

Surrogate Alternatives, Inc.

EGG DONATION INFORMATION



Typical Egg Donation Timeline

- The Egg Donor is invited to apply and completes the online application. She would then email or mail the consents and upload 8-12 photos of themselves, including photos of them as a child. (Please upload CLEAR photos, it will increase your chances of being selected).
- We receive notification that the Egg Donor has completed the online profile. We then review the application and see if she qualifies to participate in our program. The Egg Donor is notified by email if she is accepted or not. If she is accepted, her profile will be listed as active and available for clients to view.
- All Egg Donors applications are available for viewing and download once the client initiates contact with Surrogate Alternatives and receives a password.
- Once the Egg Donor is selected, we will notify her and confirm availability. If she is available, she will be considered matched through our program. The Egg Donor will then be told which clinic the clients are working with.
- Once an official match has been confirmed, the following will occur:
- A criminal background check is conducted on the Egg Donor.
- A Medical Evaluation of the Egg Donor and her partner/husband will be performed which includes, but is not limited to: HIV screening, testing for other diseases, drug and alcohol screening, hysteroscopy and a consult with the physician.
- A psychological screening is conducted on the Egg Donor, to determine emotional stability and ability to commit to the process.
- The legal contract between the Intended Parents and the Egg Donor will be drafted, which will be signed by all parties. Many times the Egg Donor and Client will have dual representation for the legal phase to ensure a timely finalization. However, the Egg Donor is always able to request separate legal representation.
- We will set up a client account for the Egg Donor in which travel, insurance and her payment will be issued from.
- The Egg Donor will receive a calendar from the clinic, after all screening is complete and the contract is signed.
- The Egg Donor begins medication for the cycle and monitoring starts.
- Ultrasounds are conducted and blood work is done twice a week for three-four weeks.
- The Egg Retrieval procedure is scheduled and the Egg Donor arrives at the clinic the morning of the procedure with a companion to drive her home. The Egg Donor is put under anesthesia and will not be permitted to drive herself home. (A representative from SAI will be present).
- After the Egg Retrieval procedure, the Egg Donor takes it easy for the rest of the day and can return to work the following day.
- The Egg Donor needs to print out the Donor Reimbursement Form that is included in this booklet and fax it to our office at: (619)-397-0736 so we can pay her for the procedure.
- Payment will be given to the Egg Donor the day of the retrieval or sent by bank wire within 5 days of the procedure.
- After the retrieval, we will inquire about the Egg Donor's willingness to donate again for another cycle. If the Egg Donor is willing, her fee will increase accordingly.
- If the Egg Donor would like to stay in our program, we ask the Egg Donor to notify us of any changes, such as address, phone number, availability, etc....
- We ask all Egg Donors who's donation results in a pregnancy to inform us of a change in their phone number, email address, health status for themselves or a family member or if they move out of their state of residence.

In Vitro Fertilization (IVF) Explained

1: OVULATION INDUCTION

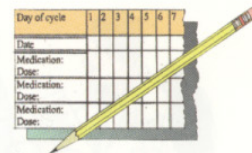
Taking medications to produce several eggs in one cycle

These medicines will also control *when* you ovulate so that the rest of the steps for in vitro fertilization can be planned. Some of your medications are given by injection. Your nurse will teach you and your partner how to prepare the injections and how to give them, so that you will be able to do this on your own at home.



FOLLOWING YOUR MEDICATION SCHEDULE

It is important to follow your medication schedule and doses exactly in order for ovulation induction to be successful. You may want to use a medication schedule chart to help you keep track of the days of your cycle, when to take each medication, and the dose for each medication.



Going for medical tests

Throughout your cycle, you will have several ultrasounds and blood tests to determine how well the ovulation medications are working. Individuals react differently to these medications — some people may need an adjustment in their medication or dosage.

FREQUENT ULTRASOUNDS

Vaginal ultrasounds provide pictures of the follicles in which the eggs develop. Your healthcare team will monitor the ultrasounds to see how your follicles are growing, and to determine when the follicles are mature enough for egg retrieval.



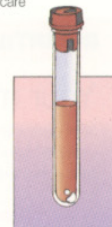
Follicles in ovary, before ovulation induction.

Early phases of ovulation induction.

Mature follicles in ovary.

FREQUENT BLOOD TESTS

As the follicles mature, they produce estradiol, a form of estrogen. Your healthcare team will check the amount of estradiol in your blood several times, to make sure your estradiol level is rising adequately in response to the medications.



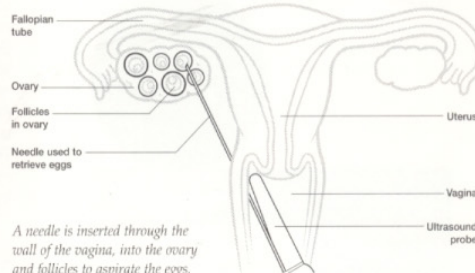
2: EGG RETRIEVAL

Doctor surgically removes the eggs

When the follicles have matured, you will be instructed to give yourself an injection of HCG (human chorionic gonadotropin). About 34 to 36 hours later, your doctor will remove the eggs from your ovaries. Your doctor will explain the various medication options available to keep you comfortable during the egg retrieval.



A vaginal ultrasound is used to locate the follicles and guide the needle for egg collection.

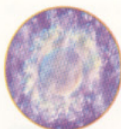


A needle is inserted through the wall of the vagina, into the ovary and follicles to aspirate the eggs.

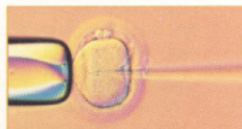
3: FERTILIZATION AND EMBRYO CULTURE

Embryologist mixes eggs and sperm

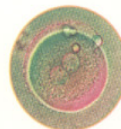
In the IVF lab, the embryologist prepares the eggs and sperm and mixes them together. If fertilization occurs, the embryologist will incubate the fertilized eggs and monitor them for about 2 to 5 days to make sure they develop properly.



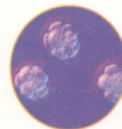
Human egg before fertilization.



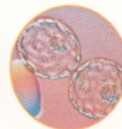
Intracytoplasmic Sperm Injection (ICSI) is a procedure in which one sperm is injected directly into one egg. This procedure may be recommended when there is a problem with fertilization, caused by low sperm motility, a low sperm count, abnormally shaped sperm, or an inability of the sperm to penetrate the egg.



Fertilized egg, approximately one day after retrieval.



Fertilized eggs as an embryo consisting of 8 cells, approximately 72-80 hours after retrieval.



Fertilized eggs as blastocysts.

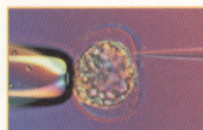
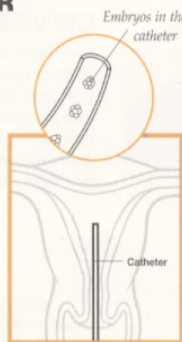
THE PROCEDURES BELOW DO NOT APPLY TO YOU

4: EMBRYO TRANSFER

The embryos are transferred to the uterus

Your doctor will discuss the number of embryos to be transferred into your uterine cavity and may suggest freezing any unused embryos to preserve them for future pregnancy attempts.

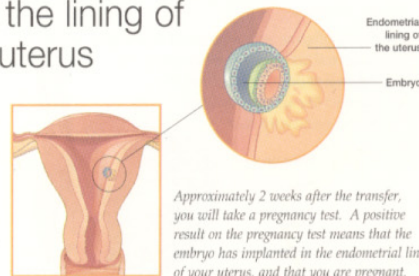
Your doctor will place a speculum inside your vagina (like a Pap smear), insert a small catheter through your cervix into your uterine cavity, and transfer the embryos through the catheter.



Assisted hatching is a procedure your doctor may recommend to help the embryo hatch out of its outer layer (zona pellucida) and implant itself in the lining of the uterus. Before the embryo is transferred, a small opening is made in the outer layer of the embryo with a tiny needle, laser, or an acid solution.

5: EMBRYO IMPLANTATION

The embryo implants into the lining of the uterus



Approximately 2 weeks after the transfer, you will take a pregnancy test. A positive result on the pregnancy test means that the embryo has implanted in the endometrial lining of your uterus, and that you are pregnant.