



## **Intended Parent(s) Handbook**

*For patient(s) working with a Gestational Carrier and using their own eggs and partner/donor sperm*

# Introduction

This handbook was created to help you understand and navigate the process of participating in a Gestational Carrier cycle at Boston IVF. There are many steps, including physician visits, legal consultations, as well as medical tests, to prepare for a Gestational Carrier cycle. The medical team at Boston IVF is here to help you understand and complete the required steps.

## **The process of using a gestational carrier consists of the following steps:**

1. Physician Consult
2. Intended parent(s) Phone Seminar
3. Intended parent(s) IVF cycle
4. Selection of Gestational Carrier
5. Screening of Gestational Carrier and the Intended Parent(s)
6. Completion of legal contract between Intended Parent(s) and Gestational Carrier
7. Determination of insurance eligibility / financial clearance
8. Cycle coordination
9. Summary

# The Gestational Carrier Process: Step by step

## **1. Physician Consult**

You are required to meet with one of the Boston IVF physicians to establish medical eligibility for a gestational carrier cycle. If you have not seen your Boston IVF physician within the calendar year, please make an appointment before contacting the Third-Party Reproduction Team at Boston IVF. After the initial consultation, your physician will notify Third Party Reproduction Team and request to schedule you for a phone seminar.

## **2. Intended parent(s) phone seminar**

Third Party Reproduction Team will contact you to schedule a complementary phone seminar. During the seminar, Third Party Reproduction team nurse will review the approximate cost, timeline and step-by-step process.

## **3. Intended parent(s) IVF cycle**

Your doctor of record team will plan and coordinate your IVF cycle. Please refer to “IVF treatment booklet” on [www.bostonivf.com](http://www.bostonivf.com) patient portal to review IVF and egg retrieval process.

*Please note: the intended parent(s) need to undergo FDA (Federal Drug Administration) requirements, which consist of FDA physical exam to be completed by your PCP, FDA questionnaire to be completed on the phone with Boston IVF nurse and FDA blood work and urine test to be scheduled prior or on the day of egg retrieval and/or sperm production.*

If you are using donor sperm, please refer to “Donor sperm general information” on [bostonivf.com](http://bostonivf.com) patient portal under Donor sperm consent forms.

The Third-Party Reproduction Team will discuss FDA requirements with you and make sure they are all completed prior to you creating your embryos.

Your embryos will be frozen for the use with a gestational carrier.

## **4. Selection of a Gestational Carrier**

The next step is to choose a gestational carrier. Boston IVF does not recruit carriers, but works with agencies, which recruit carriers. You will be provided with a list of recommended agencies. You may choose to work with a known gestational carrier such as a family member or a close friend. A Gestational Carrier cycle presents a number of unique medical and legal issues that need to be carefully considered.

It is important to remember that a potential Gestational Carrier should be healthy, have had a previous uncomplicated pregnancy and delivery, and be free of infectious disease.

The gestational carrier will need to make at least two visits to Boston IVF, daily injections for 12 weeks if she is pregnant, and aware of the medical risks that are linked to pregnancy and delivery. Part of the screening for Gestational Carrier is to ensure that their participation appears reasonable and voluntary.

## **5. Screening of the Gestational Carrier and the Intended Parent(s)**

The intended parent(s)/gestational carrier screening consists of several appointments and typically scheduled in 2 days. The Third-Party Reproduction Team at Boston IVF will review all tests needed and assist you in scheduling the screening. The screening needs to be completed prior to initiating a cycle at Boston IVF.

As part of intended parent(s)/gestational carrier screening, you and your gestational carrier will be meeting with a BIVF physician. During the screening, the BIVF physician will meet with the Intended Parent (s) and the Gestational Carrier each separately, then all together.

The medical screening includes blood and urine testing for infectious diseases and drug screen. Your gestational carrier will also be meeting with Third Party Reproduction nurse for cycle overview and medication/injection teaching.

The psychological screening is a large and very important part of the evaluation. Your gestational carrier will undergo several psychological testing and meeting with a mental health provider. You will also meet with a mental health provider and then you and your gestational carrier will meet with a mental health provider for a group meeting. During these meetings, the communication and understanding among all those involved in the cycle will be addressed.

*If the gestational carrier has a partner, she/he/they will also participate in the medical/psychological screening.*

We know that many Gestational Carriers have children; however, we ask that they make arrangements for care either in their home, or outside of Boston IVF, wherever they are staying. This is an important visit filled with a large amount of information, which requires full attention from all who are involved. Also, while we love children, our patients are particularly sensitive to the presence of children due to the nature of our practice. We thank you in advance for your respectful compliance.

Please note that Boston IVF does not allow concurrent/simultaneous pregnancies with either intended parents and gestational carrier or two gestational carriers.

## **6. Completion of a Legal Contract**

It is a requirement that Intended parent(s) and gestational carrier sign a legal contract executed by a reproductive lawyer before proceeding with a cycle at Boston IVF. This is required for both known and agency gestational carriers.

## **7. Determination of Insurance Eligibility/ Financial Clearance**

A Gestational Carrier cycle is expensive. It is important that you meet with a Boston IVF financial coordinator before you embark on the process, ideally at the time of your initial consult with your Physician here at Boston IVF. During your meeting with the financial coordinator you will learn what costs, if any, will be covered by your insurer, and also what costs will be your responsibility. Please do not proceed with screening or treatment until you understand your financial responsibilities.

## **8. Treatment Cycle Coordination**

The Nurse Coordinator on the Third-Party Reproduction Team at Boston IVF will be responsible for coordinating your Carrier's medicated cycle. In most cases intended parents create and freeze their embryos prior to finding a gestational carrier. The frozen embryo transfer cycle will be planned for your gestational carrier.

Once all screening results, financial and legal clearances are obtained, your Third-Party Reproduction Nurse coordinator will coordinate dates for your gestational carrier's frozen embryo transfer cycle. The dates will be coordinated based on gestational carrier's menstrual cycle. Your gestational carrier will be taking estrogen and progesterone hormones to get prepared for embryo transfer. She will also be scheduled for routine monitoring to assess her uterine lining before proceeding with embryo transfer. You will get routine updates on your gestational carrier's cycle.

## **9. Summary**

All of us at Boston IVF hope that your Third-Party IVF experience is a positive and successful one. This handbook is a guideline for your treatment and its purpose is to provide you with a detailed overview of the entire process. As scientific advances occur at a rapid pace, please make sure that you check with our Third-Party Program Coordinator for specific instructions regarding your care.

Revision Number	Authorized Signature(s)	Date	Description of change (If no changes, write N/A)
0	Julia Rzakhanov	6/2/2022	Created document
1	Julia Rzakhanov	10/21/22	Added wording to section 5 regarding concurrent pregnancies with IP&GC or 2 GCs