



Boston IVF

RECIPIENT HANDBOOK

**Boston IVF
130 Second Avenue
Waltham, MA 02451**

The Egg Donation Process: Step by Step

1. If you have not yet discussed egg donation with your Boston IVF physician or you have not seen your Boston IVF physician within the year, set up an appointment. Your spouse or partner must come with you to this appointment.
 2. Contact the Egg Donation Team (781)434-6500. They will be responsible for working with you to ensure that you, your partner, have been properly screened, and for synchronizing and coordinating your cycle with the donor's cycle.
 3. Attend an **Egg Recipient Seminar** with the Egg Donation Program Coordinator for comprehensive information about egg donation. Please contact the *Donor Egg Team* to make an appointment for the next seminar.
 4. Meet with the Financial Coordinator. Learn about what your insurance policy may cover. Discover what testing may be required by your insurance company. Discover what your out of pocket costs will be.
 5. Begin your egg recipient evaluation. Please mail or hand-deliver your medical records from tests performed outside of Boston IVF.
 6. With the completion of all your testing the Egg Donation Program Coordinator will contact you by phone to let you know the screening process is complete.
 7. Go to the Boston IVF website www.bostonivf.com. Click on Patient Resources on the top right hand side. Log in with the username "bostonivf" and password "patient" and download 3 consent forms:
 - Recipients of Egg Donation
 - Embryo Freezing
 - Thaw consent.
- Please read these forms and bring them with you to the seminar or your next appointment with your Boston IVF physician, to sign and be witnessed.
8. You will be contacted by the *Donor Egg Team* when all your testing is complete. Your physician will review the results of your recipient evaluation, write orders for the cycle, and forward your records to a financial coordinator who will seek approval from your insurance company for egg donation.
 9. Schedule an appointment with a social worker. Your spouse/partner must attend this appointment with you. This consultation will allow you to explore the psychological issues involved in egg donation.

If you are working with an egg donor who is known by or related to you, Boston

IVF requires that you meet once with a social worker as a couple, your donor and her spouse meet with the social worker once as a couple, and then all four of you meet again for a joint consultation.

10. Once your insurer approves an Egg Donation cycle, your potential egg donor may enter the system. Boston IVF will only allow the screening of one potential egg donor at a time. **You are financially responsible for services rendered to the donor, even if she is not accepted as a donor following her medical screening.**

Egg Donor Selection

1. Boston IVF allows anonymous donors to be recruited by **approved** egg donor agencies. When you have selected a potential donor, the agency will send a letter with a match to the Egg Donation Program Coordinator Assistant who will then mail the donor a questionnaire, and schedule her appointments, once the questionnaire has been approved. The donor's agency will send any previous medical records along with the match sheet to Boston IVF.
2. Boston IVF screens potential egg donors thoroughly. It may take some time before it is clear whether a woman is an appropriate candidate to be an egg donor. The Boston IVF Physician or Nurse Practitioner, the Social Worker, and the Egg Donation Program Coordinator work as a team to determine whether a donor candidate is appropriate. The Egg Donation Program Coordinator Assistant will inform you when your donor is scheduled to come in for her testing and when she has completed the screening process.
3. The Egg Donation Program Coordinator will be responsible for synchronizing your cycle with the egg donor's cycle and will assist you in the egg donation process through its completion.

FEES AND INSURANCE COVERAGE

Egg Donor IVF is a costly process. It is important that you meet with a Boston IVF financial coordinator before you embark on the process. During your meeting with the financial coordinator you should learn what costs, if any, will be covered by your insurer. Please do not proceed with either evaluation or treatment unless you understand your coverage and financial responsibilities.

Determination of Insurance Eligibility / Financial Clearance

Once your Boston IVF physician has reviewed your eligibility screening test results and discussed them with you, she or he will submit this information to our financial coordinators for insurance authorization.

The financial coordinator will discuss the egg donor screening fees with you and initiate the request for insurance company authorization.

We recommend that you do not select or screen a potential egg donor until after you have received insurance approval of the intended treatment cycle or have made other financial arrangements.

Selection and screening of a potential donor(s)

Egg donor IVF is a complex and expensive process. It requires a great time and effort to adequately screen potential egg donors. You will be contacted by your financial coordinator regarding payment for screening of your donor.

Donors must undergo a medical and psychological evaluation prior to donating eggs. All of these tests will be performed at Boston IVF, unless a donor has adequate documentation of a required test performed elsewhere. When we have received all of your donor's information including the results of any previous testing, we will arrange for your donor's screening. We will keep you abreast of the testing date.

Eligible Donor Medication Fees

Insurance company rules vary and the terms of your insurance policy must be checked in order to determine how much if any of the process of egg donation IVF is covered. As the recipient, you may be financially responsible for the cost of the medications used by your donor. Our financial coordinators will assist you in determining the benefits available to you and whether or not those benefits will cover the costs of the medications used by the donor.

Eligible Egg Donor Stipend, Travel, Accommodation, and other fees

None of the costs related to selecting an egg donor through an agency or facilitator are covered by insurance. Agency fees may include the egg donor's compensation, a short-

term medical insurance policy for the egg donor, and legal fees. In addition, if you select a donor who lives out of state, she is typically required to travel to Boston IVF twice:

1. Once for her screening appointments, and
2. Once again for the egg retrieval.

At the time of the egg retrieval she usually stays here for up to 1 week. None of the costs related to her travel, transportation, or accommodations are covered by insurance. Please discuss these costs with your egg donor agency or facilitator, as they will be in charge of making these arrangements.

Costs of Monitoring Outside of Boston IVF

If your insurance covers the cost of a donor egg cycle at Boston IVF, it includes ultrasound and blood tests during the egg donation cycle (monitoring) **only** at Boston IVF. If your donor lives out of state, your insurance company will not cover the costs of her blood tests and ultrasounds. You will be responsible for the costs of monitoring outside of Boston IVF.

Special Circumstances for Known Donors

The joint consultation with a social worker between a known egg donor and the recipient is not usually covered by most insurance companies. You will be responsible for the cost of this visit.

DONOR SELECTION

Egg donors must be healthy, between the ages of 21 and 35, and free of infectious disease. Known egg donors include sisters, relatives, friends or colleagues. Anonymous egg donors may be recruited by approved recruiting agencies **only**. All egg donors, whether anonymous or known, must be screened to ensure that their motivation appears reasonable and voluntary. Egg donation presents a number of unique medical, legal and emotional issues, which need to be carefully considered.

Known Egg Donors

Known egg donors must be medically and psychologically screened as rigorously as anonymous donors. Cross-generation egg donation in which a daughter donates to her mother or a mother donates to her daughter is not permitted at Boston IVF.

We require you to seek legal consultation and establish a legal contract with your donor, anonymous or known. The recipient couple is responsible for legal fees incurred by the donor.

Approved Agencies

According to guidelines published by the American Society for Reproductive Medicine (ASRM), programs recruiting oocyte donors should establish a level of compensation that minimizes the possibility of undue inducement of donors and the suggestion that payment is for the oocytes themselves:

“To avoid putting a price on human gametes or selectively valuing particular human traits, compensation should not vary according to the number or quality of oocytes retrieved, or the donor’s ethnic or other personal characteristics.” (ASRM, 2000).

Boston IVF adheres to these guidelines and will not work with agencies in direct violation of the ASRM guidelines.

Please note: we cannot guarantee the anonymity of the donor, but we will make every effort to keep her identity unknown to you, and yours unknown to her, unless you have made other arrangements through your agency regarding sharing your respective identities. Only one anonymous donor, per recipient couple, may be screened at any one time.

You are free to use any Boston IVF approved agency that adheres to the ASRM guidelines as detailed above. Your choice will not have any impact on your care here at Boston IVF.

If you select a donor who lives in another city and you choose to have her initial monitoring done in that city, your agency will need to identify an appropriate facility for monitoring. If she lives a significant distance from Boston, she may be required to stay

in the Boston Area for the entire egg donor cycle. ***The costs associated with testing outside of Boston IVF may not be covered by insurance.***

NOTE: All non-Boston IVF facilities **must** be able to provide the results of blood tests and ultrasounds on the same day by 1 pm eastern standard time, 7 days per week, including holidays. If the remote monitoring facility cannot meet those standards, we cannot use them to monitor your donor.

Tips for selecting an agency:

There are several valuable services that a good donor-recruiting agency can offer you. Look for the following qualities in an agency:

Qualities to look for:	Why its important:
Medical expertise.	An agency that offers a staff member with medical training is invaluable. Medical expertise is important to make decisions about which donors the agency will accept and make available to recipients.
One rate of compensation for every donor.	The compensation provided to an egg donor is not a payment for her eggs. It is compensation for her inconvenience, time, effort, discomfort, and the medical risk that she assumes. Agencies that offer an elite class of egg donor, or who allow donors to choose their own fees, may be taking advantage of recipients who are willing to pay for certain personal characteristics like a commodity. This practice is considered unethical and is discouraged by the American Society for Reproductive Medicine. (See above)
Legal counsel for both the donor and recipient.	Legal consultation for both the donor and the recipient protects the interests of both parties by establishing a mutually acceptable legal contract. An agency should facilitate this process and should provide this service as a part of the agency package.
Short term medical insurance policy for the egg donor.	Should an egg donor experience any adverse medical event related to the egg retrieval or the medications, the recipient is financially responsible for her medical care and treatment. We require that all recipients have a short-term insurance policy for the donor that covers any potential problems related to the procedure and the medications.

Professional, courteous staff.	Staff who are professional and courteous will treat egg donors and recipients with respect and ensure that the needs of each are met in an efficient manner. Professional demeanor usually reflects a company that is organized and efficient.
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Confidentiality.	A good agency will have multiple systems in place to ensure that your privacy (and that of the donor) is maintained. Ask what these systems are.
Convenience.	A good agency will offer the ability to look at donor profiles on-line. Look for a web site. The convenience of looking at profiles from home will be time-saving and promotes confidentiality.
Comprehensive donor profiles.	The profile of an egg donor should contain comprehensive information about her personal, social, medical and family history. This information will help you decide which donor to choose, and will become a permanent part of the records that you keep.

Once your potential donor is chosen

Your agency must contact the Egg Donation Program Coordinator with the contact information for your prospective donor. Boston IVF will contact the potential donor and proceed with her eligibility screening. If we feel that she is not a suitable candidate to be an egg donor we will notify you and ask that you find an alternate. If she passes the screening process, we will notify you and coordinate the start of your treatment.

Cycle Coordination and Medications

You and Your Donor

An important aspect of egg donation is preparation of the lining of your uterus to receive an embryo at the appropriate time. This means that we will need to synchronize your treatment cycle with the egg donors' treatment cycle. There are several ways to do this and your doctor will select a method that is appropriate for you.

Menstrual Cycle Synchronization

If you still have natural menstrual cycles, we will need to prescribe one or more medications to override and control your cycle. The medications may include oral contraceptives, injectable Lupron or both. The sole purpose of this phase of your treatment is to suppress your natural menstrual cycle. With your natural menstrual cycle suppressed, we can initiate medications to thicken and prepare your uterine lining when your donor is ready. The good news about the medications that suppress your natural menstrual cycle is that they can be used for several months at a time without causing any permanent changes to your reproductive system. This ensures a degree of flexibility that allows egg donation to function successfully.

The critical point of synchronization occurs on the day of the donors' egg retrieval. On that day, the recipient adds progesterone to her medication regimen. That permits the recipients uterine lining to become ready for the embryos that will be transferred three days later.

Medication Supplies

When you get your medications and supplies home from the pharmacy, take everything out of the box or bag. Lay everything out on a counter or table. Make sure that you have every medication and all the supplies that you are going to use during treatment. Refrigerate any medications that require refrigeration. Don't wait until the day you need something to look for it in the box or bag. Searching for an open pharmacy at 11:30 on a Sunday night looking for medication isn't any fun at all!

Class of Medication	Typical form
Oral Contraceptive Pills	Oral tablet
Lupron	Subcutaneous injection
Estrogen	Oral tablet; skin patch
Progesterone	Vaginal gel, vaginal suppository, or intramuscular injection

Please note that some forms of estrogen and progesterone routinely used to support pregnancy carry a warning against their use in pregnancy. The estrogen and progesterone that are prescribed during your treatment are natural preparations. Natural estrogen and progesterone have been used safely to support pregnancy for years and are well-accepted forms of therapy.

LEUPROLIDE ACETATE (Lupron®)

Lupron® is a type of medication called gonadotropin releasing hormone (GnRH) agonist. The GnRH agonist medications first stimulate the release of luteinizing hormone (LH) and follicle stimulating hormone (FSH) and then suppress the pituitary gland's secretion of LH and FSH. Normally, LH is secreted in high amounts by the pituitary gland just before ovulation. In fact, it is this rapid release of LH (the "LH surge") which triggers ovulation. Therefore, Lupron® suppresses the LH surge and prevents ovulation. This is especially advantageous when trying to synchronize the menstrual cycles of a donor and recipient.

Lupron® is given by subcutaneous injection, which means just under the skin. The usual dose is between 0.05 and 0.1 cc (**note cc and ml are the same**). The instructions within the Lupron® kit are very good in explaining how to do the injections. If you are using insulin syringes, 10 units is 0.1 ml and 5 units is 0.05 ml. Some women using GnRH agonists get hot flashes, mood changes, nasal stuffiness, and headaches. Other more rare and uncommon side effects have been reported. ***If you experience any untoward symptoms while using a GnRH agonist, please call your doctor.***

Storage

Lupron® 2 week kit: Store in refrigerator- needs to be protected from light and heat. Keep below 77°F (25°C).

PROGESTERONE

The luteal phase is the interval of time from ovulation until a subsequent period or pregnancy is detected. This phase is characterized by the ovarian production of progesterone. Progesterone is an important hormone that helps to prepare the lining of the uterus for implantation of the fertilized egg. In egg donation, your ovaries will not produce progesterone on their own. Progesterone will be given by vaginal gel, tablets, capsules or suppositories or by intramuscular injection. The dose and route of administration of the progesterone will be determined by your doctor. When progesterone is prescribed, it should be taken until the pregnancy test. If the pregnancy test is positive, you will continue both estrogen and progesterone well into the first trimester of pregnancy. Also, please be aware that the progesterone suppositories must be made up by the pharmacist. Therefore, many pharmacies do not carry this medication.

The progesterone medication used in your prescription is similar to natural progesterone produced by your ovaries.

Please note that progesterone is related to a variety of synthetic hormones known as progestins, i.e., Provera® or the progestin in the birth control pill. Most progestins are required by law to have a package insert that describes some studies that suggest a slight increase in birth defects associated with their use. Please note that all of these studies have involved synthetic progesterones and do not describe the progesterone that we use. We have had many years of experience using this medication and when we feel that it would be beneficial to you we feel comfortable recommending it as part of your therapy.

Occasionally, women will complain about an itchy discharge with progesterone use. It is possible to develop a yeast infection while using this hormone. This is not a serious complication and it will not affect fertility. If you are bothered by increased discharge accompanied by an itch or raw feeling, then please let us know. Natural progesterone may also be accompanied by sleepiness.

Progesterone Side Effects

The majority of patients report no side effects. However, progesterone may delay the onset of menstruation, therefore you must do a blood pregnancy test before stopping progesterone. Progesterone may improve premenstrual symptoms in some women but create premenstrual symptoms, breast sensitivity, feeling bloated and irritability in others. Nodules (small, hard bumps) in the skin can occur with injectable progesterone. Allergic reaction to the progesterone but more commonly to the particular oil used (peanut or sesame) is sometimes seen. Fever, rash or prolonged painful red nodules are rare.

ADMINISTRATION OF INJECTIONS

If you will be using medication by injection you can view an on-line teaching demonstration. For information on how to do this, go to www.bostonivf.com. Click on Patient Resources on the top right hand side. Log in with the username "bostonivf" and password "patient" and scroll down to IVF documents then click on "E-Healthbanks". The Egg Donation Program Coordinator will arrange a teaching session in the office with you following your on-line lesson if desired, or if you do not have access to the internet

ADMINISTRATION OF A SUBCUTANEOUS INJECTION

LOCATION FOR SUBCUTANEOUS INJECTION

Fold of abdomen below the belly button; anterior thigh or lateral thigh

1. Choose an injection sight (abdomen, thigh or upper arm) and swab the area with alcohol. Allow the area to dry. Avoid any area that has a bruise, mole or obvious blood vessels. Some patients have reported less stinging, burning, and redness when they use the abdomen
2. When the site is dry, pinch a fold of skin. If using the abdominal site, use the area two (2) inches to the right or left of the umbilicus. If using the thigh, use the upper outer portion of your thigh. Do not use the inner thigh area.
3. Use your other hand to insert the needle straight into the injection site.
4. Release the pinch and slowly depress the plunger all the way and remove the needle.
5. Use a clean gauze pad to stop any bleeding that may occur.

ADMINISTRATION OF A SUBCUTANEOUS INJECTION

LOCATION FOR SUBCUTANEOUS INJECTION

Fold of abdomen below the belly button; anterior thigh or lateral thigh

6. Choose an injection sight (abdomen, thigh or upper arm) and swab the area with alcohol. Allow the area to dry. Avoid any area that has a bruise, mole or obvious blood vessels. Some patients have reported less stinging, burning, and redness when they use the abdomen
7. When the site is dry, pinch a fold of skin. If using the abdominal site, use the area two (2) inches to the right or left of the umbilicus. If using the thigh, use the upper outer portion of your thigh. Do not use the inner thigh area.
8. Use your other hand to insert the needle straight into the injection site.
9. Release the pinch and slowly depress the plunger all the way and remove the needle.
10. Use a clean gauze pad to stop any bleeding that may occur.

ADMINISTRATION OF AN INTRAMUSCULAR INJECTION

LOCATION FOR INTRAMUSCULAR INJECTION

Upper outer quadrant of either buttock

1. Draw up the required amount of medication with a 1-1/2" needle on the 3-cc syringe.
2. With the needle pointing upward, flick the side of the syringe and push gently on the plunger to disperse the air bubbles and the air pocket at the top of the syringe.
3. Change your needle, if you are using the vials with the rubber stoppers, before receiving the injection. The rubber stopper can dull the needle.
4. Preferred injection site is the upper outer buttock, approximately one hand span around from the pelvic bone. Wipe with alcohol and pinch the area.
5. Place the needle into this pinch of tissue and muscle (with a dart-like motion), leaving none of the needle exposed.
6. Draw back on the plunger. If you are accidentally in a blood vessel, blood will appear in the syringe. If so, pull the needle out and start over from step 1. You may inject the medication if there is a small amount of blood in it.
7. Alternate sides between left and right each time injections are given.
8. Apply pressure and massage the injection site gently for 30 seconds.

In Preparation for Pregnancy

1. Quit smoking.
2. Limit alcohol intake, and discontinue alcohol consumption after the embryo transfer.
3. Take a prenatal vitamin, one tab daily.
4. Limit caffeine intake to one cup or less a day.
5. Wear supportive shoes and bra when exercising. Drink plenty of fluids.
6. Avoid changing cat litter.
7. Wear gloves while gardening.

8. Avoid raw or cooked fish due to its mercury content.
9. Avoid raw meat or raw shellfish. Wash hands and cutting boards carefully after preparing raw meat.
10. Avoid hot tubs and Jacuzzis.
11. Consult your Boston IVF physician before taking any prescription or over-the-counter preparations during your treatment cycle.

Egg Retrieval

Most donors will have the egg retrieval 12-14 days after the ovarian stimulation begins. Recipients will be notified approximately 40 hours prior to the donor's egg retrieval. A semen sample is required on the day of the donor's egg retrieval. You will be instructed to begin taking progesterone on the evening of the donor's egg retrieval. Remember to continue taking the estrogen as well. Typically, the embryo transfer will occur three to five days after egg retrieval. If you are uncertain about any medication instructions you receive, please ask for clarification!

Collection of the Sperm Specimen

There are no restrictions on sexual relations prior to your being notified that the donor will have her egg retrieval. It is important that a man not ejaculate between the day you are notified that the donor has taken hCG and the day of the donor's egg retrieval. Abstinence for more than one week prior to the day of the donor's egg retrieval is discouraged.

Method of sperm collection: Masturbation is ideal method of sperm collection. ***If this presents a problem, it is important to speak with your doctor about possible alternatives.*** If you live within 60 minutes of Boston IVF's Waltham Center, you may produce your specimen at home. It must be collected in a sterile specimen container. These containers are available at Boston IVF and are often available at a local pharmacy. Be sure that you have one available for use when the treatment cycle begins. This will avoid a stress-inducing last minute attempt to obtain one. A home sterilized container is not acceptable.

Difficulty with Sperm Collection

On the day of the donor's egg retrieval the male partner of the recipient will need to provide a fresh sperm specimen to the laboratory. For some men, the pressure to produce a sperm sample on the day of the donor's egg retrieval presents a significant problem. In our experience, some men have been unable to produce a specimen on demand.

On occasion, a prescription for Viagra can be provided but as you can imagine, anxiety levels can run quite high. ***If there is a possibility that there will be a problem collecting a fresh specimen notify your doctor now.*** It may be possible to arrange for a sperm sample to be frozen in advance of the egg retrieval as backup if a fresh sample is not available.

Embryo Transfer

The procedure will be performed at Boston IVF's Waltham Center. Please arrive having eaten a light meal. When you arrive please check in with the second floor receptionist. Please don't wear any perfumes (it is embryo toxic) and do not bring any valuables with you.

The embryo transfer is performed under **abdominal** ultrasound guidance. Because of this, we ask that you have a "full" bladder prior to the transfer. While having urine in the bladder is helpful in visualizing the uterus, please use your judgment; we do not want you to be too uncomfortable. The nurses can help you to decide if your bladder is adequately distended.

The doctor performing the transfer will speak with you about the number, quality and cell count of the embryos. Typically two embryos are transferred. There are no activity restrictions after the embryo transfer. Please continue to take estrogen and progesterone as instructed. When you meet with your doctor to review the cycle she or he will have information about whether and how many embryos were frozen.

Pregnancy Test

Call the Donor Egg Nurse Coordinator to schedule a pregnancy test for 11 days after the embryo transfer. If the result is positive, you will be instructed to remain on all medications. You will discontinue all medications if the result is negative. Regardless of the outcome, you will need to schedule a follow-up appointment with your doctor.

Thaw Cycle

If frozen embryos remain after a fresh donor egg cycle, your doctor will inform you of this at your post-operative appointment. At that time you will decide when to make arrangements for the thawing and transfer of those embryos. You should plan a spacing interval of one to two months between a fresh cycle and a thaw cycle.

Summary

All of us at Boston IVF hope that your egg donor 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 Egg Donor Program Coordinator for specific instructions regarding your care.