Embryo Donation
Patient Information
Donating or using donated embryos
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Introduction

The decision to use donated embryos will have a significant impact on the people who achieve a family through the donor program and upon the children in that family. The decision to donate can also have a significant impact on the donor and their family. Therefore donating and becoming a recipient of donor embryos should be a considered and informed decision.

This booklet provides the information necessary to assist donors and recipients in making informed decisions in regards to using or donating donor embryos, including legal rights and responsibilities, medical treatment and social issues.

Melbourne IVF’s donor program nurse is the point of contact (for both recipients and donors), to provide information and guidance on the procedures and processes involved in becoming an embryo donor or recipient. We encourage you to contact the donor program nurse at any stage by phoning 03 9473 4401 or by emailing donor@mivf.com.au.

General Information

What is embryo donation?

When an individual or couple have embryos stored that are in excess of their needs, it is possible to donate these embryos to other people. The individual or couple who have the excess embryos are known as the ‘donors’ and are able to help others, known as ‘recipients’ in their attempt to become parents.

Embryo donation may either be ‘Recipient Recruited’ or ‘Clinic Recruited’ depending on the relationship between the donor and recipient.

Recipient recruited donation

Recipient recruited donors donate their embryo(s) to specified named recipient(s), usually a relative or friend.

Clinic recruited donation

Clinic recruited donors donate their embryo(s) to the IVF clinic for allocation to unknown recipient(s).

Who can be an embryo donor?

Couples or individuals who have completed their IVF treatment are often faced with the decision about what to do with remaining excess frozen embryos. These donors, who have generally completed their own families, give a variety of reasons for deciding to donate, including:

- Believing it is ethically preferable to donate rather than to dispose of the embryos.
- Feeling compassion for couples struggling with infertility.
Melbourne IVF donor embryo guidelines stipulate that if the donors have a child less than 12 months of age, the donor process may commence; however allocation of embryo(s) will not occur until the child reaches 12 months of age.

**Who can be an embryo recipient?**

In most instances embryo recipients are Melbourne IVF patients who have received medical or counselling advice that this is the best option for them. Women may be placed on the Melbourne IVF donor embryo waiting list up to 45 years of age. If they have not signed consent to use donor embryos with a counsellor prior to their 46th birthday they will be removed from the waiting list (refer to waiting list information below). Women allocated donor embryos may continue to use the embryos up until their 51st birthday.

**Can I be paid to be an embryo donor?**

No, donating embryo is purely altruistic. In Australia it is illegal to receive or make any type of payment for human tissue, including donated embryos.

**Becoming an embryo donor — what is involved?**

The process for either using or donating embryos involves careful consideration from all parties and a series of preliminary appointments including counselling and nursing appointments are required.

**Counselling**

In Victoria it is a legislative requirement that all embryo donors and recipients have counselling appointments to discuss the implications of embryo donation. This is an opportunity to consider the issues and implications associated with being involved in the donor program and to make an informed decision.

Embryo donors are required to attend a group information session and at least two counselling sessions. For some recipient recruited embryo donors there may be a combined counselling session with their recipient(s) if there are common issues to discuss. This will be scheduled at the counsellor’s discretion.

**Becoming a clinic recruited embryo donor — issues to consider**

- Why you wish to become an embryo donor.
- How will you feel about a child conceived from your donation.
- How many families you wish to be conceived as a result of your donation (there is currently a legislated maximum of ten women who may have children conceived from the donation of your embryos. This number takes into account any previous or current relationships where children have been conceived by the donors).
- Issues regarding your own fertility that require discussion with the fertility specialist or counsellor (e.g. previous pregnancy losses).
• What your children should know (if applicable).
• How will you feel if the donor conceived child contacts you at age 18 or wants earlier contact.
• What should your family and friends be told.
• Who else should be told?
• Whether you wish to know if a child is conceived as a result of your donation. Information is available from Melbourne IVF. Donors will also be notified by Births, Deaths and Marriages (BDM) that a birth resulting from their donation has been recorded on the Central Register. This register is maintained by BDM and records all births resulting from donor treatment in Victoria.

Preparing for treatment (Donor)

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Donor Team or return “Consent to Dispose/Donate” form to Donor Team to commence process</td>
<td>Donor Program Nurse provides information and forwards information pack. If donor couple wish to proceed, the Donor Program Nurse schedules the couple to attend the group information session and two counselling sessions.</td>
</tr>
<tr>
<td>Group Information Session (1)</td>
<td>Discuss the process of donation and legislative requirements.</td>
</tr>
<tr>
<td>Counselling Appointment (2)</td>
<td>Discuss implications of donating and complete paperwork.</td>
</tr>
<tr>
<td>Counselling Appointment (3)</td>
<td>Review issues and sign consent forms with same counsellor. Screening blood test form given to donor (if required). If recipient recruited donor, donor recipient and partners will have back to back appointments, in case joint counselling session is required.</td>
</tr>
<tr>
<td>Blood Test</td>
<td>Donor undertakes screening blood tests.</td>
</tr>
<tr>
<td>Embryo Donor Program Fertility Specialist Review</td>
<td>Embryo Donor Program Fertility Specialist (and in some instances geneticist) reviews details and advises if any further follow up is required.</td>
</tr>
<tr>
<td>Allocation</td>
<td>Counsellor contacts donor to advise of potential allocation. If required counsellor contacts donor 1 week later to ascertain if they wish to continue with embryo donation.</td>
</tr>
</tbody>
</table>

Treatment begins for recipient
Becoming a recipient recruited embryo donor — issues to consider

- How will communication occur between you and your recipient(s) i.e. phone, email.

- How the donation, whether successful or not, is likely to impact on your relationship with your recipient(s) and your own relationships.

- Whether there is a clear understanding of each other’s approach to disclosing any child’s donor origins.

- What future contact will occur between you and your recipient(s) should a pregnancy occur: how often and by what means. Expectations of contact for the near future should be clarified as much as possible with the understanding that feelings and needs may change over time.

- Options for any excess embryos in storage once the recipient(s) have completed their family.

Screening blood and genetic testing

All embryo donors are required to undergo blood tests including Blood Group, HIV (AIDS), Hepatitis B & C, Syphilis, Cytomegalovirus, Human T-Lymphotropic Virus (HTLV) 1 & 2, Cystic Fibrosis and Thalassemia. Further genetic screening may be ordered as appropriate.

Donors are also required to complete a Genetic and Medical Health Questionnaire. Any issues that arise from the completion of this form will be referred to a Geneticist.

Clinic recruited embryo donor allocation

Embryo donors will be advised once the embryos are ready for allocation to ensure they still wish to proceed with the donation. Once donors have agreed to proceed, recipients will be contacted by a donor embryo program counsellor and be sent profile/s of donors. The profiles contain the de-identified donor information form and Genetic and Medical Health Questionnaire.

Becoming a recipient donor of embryos — what is involved?

Counselling

In Victoria it is a legislative requirement that recipients of donor embryos have counselling appointments to discuss the implications of embryo donation. This is an opportunity to consider the issues and implications associated with being involved in the donor program and to make an informed decision.

As of 1st January 2010, people wishing to undertake Assisted Reproductive Treatment (ART) are required to undertake a Criminal (Police) Record Check and Child Protection Order check prior to attending counselling appointments as they are required to be sighted by a counsellor, in accordance with the ART Act 2008. This includes recipients of donor embryos. Donors are not required to undertake these checks.
Embryo recipients are required to attend at least 2 counselling sessions once advised by the Donor Embryo Program Nurse to begin the process for allocation of embryo(s). For some recipients who have recruited their own embryo donors there may be a combined counselling session with their donors, if there are common issues to discuss. This will be scheduled at the counsellor’s discretion.

Recipients may contact or schedule further appointments with the counsellors to discuss any questions or concerns at any stage of the process. Counselling appointments are available at East Melbourne, The Women’s Hospital or at Melbourne IVF local clinics.

**Becoming a recipient of donated embryo(s) — issues to consider:**

- Your feelings about creating a family where neither partner will be a genetic parent.
- Whether you and your partner (if applicable) agree to using donated embryos or whether one prefers to investigate other options.
- Your feelings about being a single parent if undergoing treatment as a single woman.
- If enough time has been given to understanding and grieving the loss of your fertility.
- How your relationship with your partner (if applicable) will be affected if the donation is unsuccessful.
- How will you feel if the child wants to contact the donor.
- What to tell any donor conceived child.
- What should you tell family and friends?
- Who else should you tell?

**Patient Liaison Administrator appointment**

Prior to attending the second counselling appointment, the recipient is required to attend an appointment with a member of the Patient Liaison Administration team to discuss management and treatment fees. The donor management fee (non Medicare rebatable) must be paid prior to attending the counselling session to sign consents. All costs for treatments using donor embryos are paid by the recipient(s).

Further queries regarding fees should be made to the Patient Liaison Administrators at Melbourne IVF on 03 9473 4444.

**Recipient recruited embryo donor allocation**

Recipients of recipient recruited donor embryos will be informed by the donor program nurse once all the required donor and recipient documentation has been received and the embryos have been cleared for allocation and use.
## Preparing for treatment (Recipient)

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical Appointment</strong></td>
<td>Recipient attends appointment with Melbourne IVF fertility specialist to discuss the use of donated embryos. Counselling appointment organised. If the recipient is using a recruited donor, recipient will contact the Embryo Donor Nurse.</td>
</tr>
<tr>
<td><strong>Initial Counselling Appointment</strong></td>
<td>Explains process to recipient, and gives information pack containing an application form for the donated embryo waiting list.</td>
</tr>
<tr>
<td><strong>Apply for Criminal (Police) Record and Child Protection Order Checks</strong></td>
<td>Recipient organises checks through the relevant government bodies (if not already undertaken). Please note these can take 2-4 weeks to process. These checks must be received by Melbourne IVF prior to commencement of treatment. Visit <a href="http://www.mivf.com.au">www.mivf.com.au</a> for details on how to apply for the checks.</td>
</tr>
<tr>
<td><strong>Donor Program Nurse</strong></td>
<td>Recipient maintains three monthly contact with Donor Program Nurse to maintain currency of waiting list registration. Once recipient reaches the first 10 on the waiting list, donor program nurse contacts recipient and requests they phone a Patient Liaison Administrator to schedule their counselling and patient liaison administrator appointments.</td>
</tr>
<tr>
<td><strong>Counselling Appointment (1)</strong></td>
<td>Discuss implications of using donated embryos.</td>
</tr>
<tr>
<td><strong>Patient Liaison Administrator Appointments</strong></td>
<td>Discuss management and treatment fees. Management fee to be paid prior to 2nd counselling appointment.</td>
</tr>
<tr>
<td><strong>Counselling Appointment (2)</strong></td>
<td>Review issues and sign consent forms. Screening blood test request forms given to recipient at this appointment.</td>
</tr>
<tr>
<td><strong>Nursing Appointment (if required)</strong></td>
<td>Recipient undertakes screening blood tests and an information session with a nurse to discuss the upcoming treatment (thaw/frozen embryo cycle).</td>
</tr>
<tr>
<td><strong>Embryo Donor Fertility Specialist Appointment</strong></td>
<td>Donor Program Nurse liaises with Embryo Donor Doctor to review test results and determine if any further follow up consent is required. The recipient and their fertility specialist will be advised if further follow up or consents are required. The recipient’s fertility specialist will provide the treatment plan.</td>
</tr>
<tr>
<td><strong>Allocation</strong></td>
<td>Counsellor contacts potential recipient advising of allocation and sends profiles to donor. Counsellor contacts potential recipient 1 week after profiles are sent regarding acceptance of profile. If potential recipient declines a profile then they will be considered in next allocation. If they accept and all required documentation is received then the allocation will proceed and they may commence treatment.</td>
</tr>
<tr>
<td><strong>Treatment begins</strong></td>
<td></td>
</tr>
</tbody>
</table>
Treatment information for recipients

If the recipients are new patients to Melbourne IVF, a nursing information session is arranged for the recipient once allocation has occurred and treatment is ready to proceed. This information session will discuss the treatment cycle details. Following this session, recipients will be asked to contact the nurses on day one of their cycle.

Embryo donation is a relatively simple option from a medical perspective because the embryos are already frozen and the procedures are the same as having an IVF thaw cycle. The recipient’s natural cycle is tracked to determine when she will ovulate, and the embryo transfer is performed a couple of days later.

A step by step guide to an IVF thaw may be reviewed on the Melbourne IVF website www.mivf.com.au

Is there a waiting list to use donated embryos?

Yes, there is a waiting list of people wishing to use donated embryos. Donating embryos to another couple or individual is a difficult decision.

At Melbourne IVF, recipients are placed on the embryo waiting list after referral by their Melbourne IVF fertility specialist or counsellor. Women must be less than 45 years of age to be placed on the list, and will be removed from the list when they reach 46 years of age if consent forms have not been signed.

People can generally expect to be on the waiting list for at least 8–12 months; however this may vary considerably depending on the availability of embryos. Once on the waiting list, contact must be maintained every three months with the donor program nurse, to indicate ongoing interest in remaining on the waiting list. If contact is not maintained, the potential recipients name will be removed from the waiting list.

The length of time on the waiting list may vary depending on many factors including how many people donate.

Legislation and requirements

The Melbourne IVF Donor Program is guided by the legislative requirements under the Assisted Reproductive Treatment Act 2008. Under this legislation the following important information applies:

1. An embryo donor’s consent lapses after 10 years, unless a lesser period is specified by them.

2. Legislation provides that treatment using donor embryos may not result in more than 10 women having genetic siblings, including the donor and any current or former partners of the donors. This does not prevent women using embryos produced by the donor to produce a child that will be a genetic sibling to the woman’s children.

3. The person who produced the gametes (eggs & sperm) from which the embryo(s) have been formed must consent to storage period beyond 5 years and also must consent to the removal of the embryo(s) from storage.
The import or export of donor gametes or embryos formed from donor gametes in or out of Victoria must have written approval from the Victorian Assisted Reproductive Treatment Authority (VARTA). Melbourne IVF is required to give the donor’s written notice of the name of the clinic to which their embryo(s) have been exported.

It is an offence to knowingly or recklessly provide false or misleading information or omit to give material information.

Posthumous use of donor embryos is not possible.

Status of children

Where donor embryo(s) were used by a married woman or a woman in a bona fide domestic relationship, the woman and her husband/partner shall be presumed for all purposes to be the mother and father of any child born as a result of the pregnancy.

Where donor embryo(s) were used by a woman with a female partner. Her partner is presumed to be the legal parent of any child born as a result of a treatment procedure if she:

• Was her partner at the time of treatment and resulting pregnancy;
• Consented to the treatment procedure; and
• Where donor embryo(s) were used by a woman with a female partner or a woman with no partner, the donors who produced the gametes (eggs and sperm) to produce the embryo(s) are presumed not to be the mother and father of any child born as a result the pregnancy.

Birth registration

• Melbourne IVF must provide Information regarding births of donor conceived offspring to Births, Deaths and Marriages (BDM), who will maintain the Central and Voluntary donor registers.
• If the birth registrations statement indicates that the child was conceived by a donor treatment, the Registrar must mark the words “donor conceived” against the entry about the child’s birth in the register.
• If the donor conceived offspring applies for a birth certificate after 18 years of age, the Registrar must attach an addendum to the certificate stating further information is available about this entry.
• The Registrar is only able to issue the addendum to the donor conceived person named in the entry on the register.

The Registry of Births, Deaths & Marriages contact donors in writing to verify the information Melbourne IVF provides Births, Deaths & Marriages when donors details are first entered on the Births, Deaths & Marriages central register (i.e. when the first donor conceived child is born). It is the donors responsibility to notify Births, Deaths & Marriages of any change to their contact details.

Melbourne IVF encourages all individuals/couples to seek independent legal advice before donating gametes/embryos or using a gamete or embryo donor.
Telling children about their donor origins

Research indicates that there are many benefits for the donor conceived child and family as a whole if disclosure to the child regarding their donor origins occurs at an early age (Schieb, Riordan & Rubin, 2005). A sense of openness and honesty is promoted and the child is able to incorporate this information into their developing sense of identity (Rumball & Adair, 1999), reducing the risk of the child experiencing any sense of shame or secrecy. A child then has the opportunity for gradual understanding of their donor conception.

In comparison, research investigating offspring who were told at an older age found that children were more likely to feel confused, deceived or betrayed (Turner & Coyle, 2000).

In addition to the emotional, psychological and family functioning benefits of disclosure at an early age, there are also practical benefits such as the child having access to their medical and genetic history.

The issue of disclosure may create anxiety for many parents. Your Melbourne IVF counsellor is available to discuss disclosing and assist you in making decisions that are in the best interest of your family.

There is also an abundance of resources including children’s books which may assist in explaining donor conception to children. The Victorian Assisted Reproductive Treatment Authority website also provides information and a list of resources, to support parents with disclosing to their children at any age. Please refer to contacts and reference list at the end of this booklet.

Please contact the counselling department if you have any further questions.
Contacts and resources

<table>
<thead>
<tr>
<th>Resource</th>
<th>Telephone</th>
<th>Web-email contacts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Melbourne IVF</td>
<td>03 9473 4444</td>
<td><a href="http://www.mivf.com.au">www.mivf.com.au</a></td>
</tr>
<tr>
<td>Donor Program Nurse</td>
<td>03 9473 4401</td>
<td><a href="mailto:donor@mivf.com.au">donor@mivf.com.au</a></td>
</tr>
<tr>
<td>Counsellors Melbourne IVF</td>
<td>03 9473 4444</td>
<td></td>
</tr>
<tr>
<td>Counsellors Reproductive Services Unit</td>
<td>03 8345 3227</td>
<td></td>
</tr>
<tr>
<td>Nurses Melbourne IVF</td>
<td>03 9473 4444</td>
<td></td>
</tr>
<tr>
<td>Nurses Reproductive Services Unit (RWH)</td>
<td>03 8345 3227</td>
<td></td>
</tr>
<tr>
<td>Patient Liaison Team Administration</td>
<td>03 9473 4444</td>
<td></td>
</tr>
<tr>
<td>VARTA — Victorian Assisted Reproductive Treatment Authority</td>
<td>03 8601 5250</td>
<td><a href="http://www.varta@varta.org.au">www.varta@varta.org.au</a></td>
</tr>
<tr>
<td>BDM — Births, Deaths and Marriage</td>
<td>1300 369 367</td>
<td><a href="http://www.bdm.vic.gov.au">www.bdm.vic.gov.au</a></td>
</tr>
<tr>
<td>Donor conception Support Group</td>
<td>02 9793 9335</td>
<td><a href="mailto:dcsg@optushome.com.au">dcsg@optushome.com.au</a></td>
</tr>
<tr>
<td>Donor Conception Network UK</td>
<td></td>
<td><a href="mailto:enquiries@dcnetwork.org">enquiries@dcnetwork.org</a></td>
</tr>
<tr>
<td>Prospective Lesbian Parents</td>
<td></td>
<td><a href="http://www.vicnet.au/~plpvic">www.vicnet.au/~plpvic</a></td>
</tr>
</tbody>
</table>

Journal articles


**Books**

Daniels K. *Building a Family with the Assistance of Donor Insemination*. Palmerston North: Dunmore Press; 2004

Rawlings D., Looi K. *Swimming Upstream: The Struggle to Conceive*. South Australia: Landmark Media; 2006

Johnson P.I. *Taking Charge of your infertility*. Indianapolis (IN): Perspectives Press; 1994

**Books for children**

Bourne K. *Sometimes it takes three to make a baby: Explaining egg donor conception to young children*. East Melbourne: Melbourne IVF; 2002

Donor Conception Network UK. *Our Story*. Nottingham: Donor Conception Network UK; 2002

Grimes J. *Before You Were Born: Our wish for a baby*. Iowa: X,Y. and Me, LLC; 2004

**DVD**

Evans L. *Telling and Talking* (DVD). Nottingham: Donor Conception Network; 2006

**Support Groups**

The embryo recipient support group is a group for people waiting to be allocated embryos, or those who are currently using donated embryos, and who wish to meet others similar situations.
