

EGG DONATION

101

Everything You Need To Know About Becoming an Egg Donor





Overview

- Key Terms
- Health Canada
- Process
- Cycle Monitoring
- Medications
- Trigger Day
- Procedure





Key Terms



OD: Ovum Donor; a person who is donating their eggs. May be AOD (anonymous ovum donor) or KOD (known ovum donor).



IP: Intended parent; a person who is intended to be the recipient of donor eggs/sperm or a child through surrogacy.



Health Canada Requirements



Infectious Screening

Must be completed within 30 days of your egg donation. The clinic will provide you with information as to when to have this bloodwork done.



Genetic Questionnaire

You will be required to fill out a questionnaire about your family medical history. Please share all information you are aware of.



Medical Questionnaire

You will meet with the physician to conduct a detailed medical questionnaire required by Health Canada.



Physical Exam

May be required at the discretion of the physician.



Egg Donation Process



Match Official

Once you are selected by Intended Parents your information will be sent to the fertility clinic.



Medical Screening

A nurse will reach out to you to schedule your pre-screening appointments. Some will be done virtually and you will also be required to travel to the clinic for in-house testing that will include bloodwork, urine testing, a follicular ultrasound, and physical exam.



Medically Approved

Your test results will be reviewed by a physician and you will be "medically approved" to proceed. This is approximately 4 weeks after the testing began.



Legal Agreement

A legal agreement will be drawn up between yourself and the Intended Parents. The IPs may make certain requests of you in regards to contact with themselves or their donor conceived child. Please discuss any concerns or requests of your own with your lawyer. Fertility Match will provide you with a lawyer at no expense to yourself. This process takes approximately 3 weeks.



Egg Donation Process

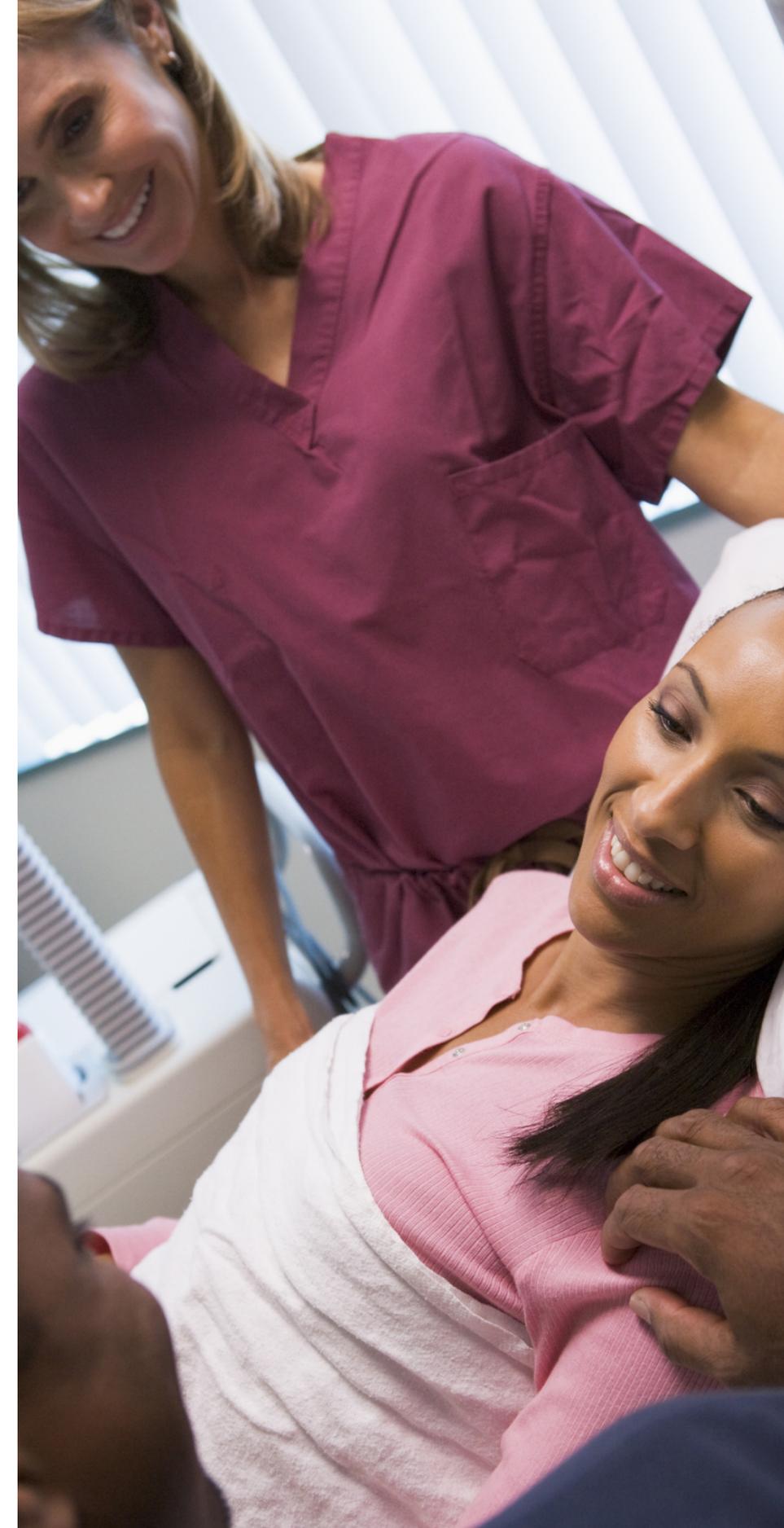
Donation Cycle Begins

Once the legal agreement is in place you are ready to start your injectable fertility medications. You will be given instructions by your nurse to call in with your next Cycle Day 1 (first day of full flow of your period).



Egg Retrieval

You will take the fertility medications until your eggs are mature and you will then be booked for your egg retrieval.





Cycle Monitoring



Your physician will monitor your cycle closely to ensure your follicles are developing as they should.

Cycle monitoring consists of 8 to 12 daily appointments starting on day 2 or 3 of your period. You will have a follicular ultrasound performed transvaginally, this lets the physician know how your eggs are growing as well as bloodwork to check your hormone levels.



It is critical that you attend all cycle monitoring appointments during your cycle.



Cycle Calendar

01

Blood tests are used to measure hormone levels (Estradiol and LH)

02

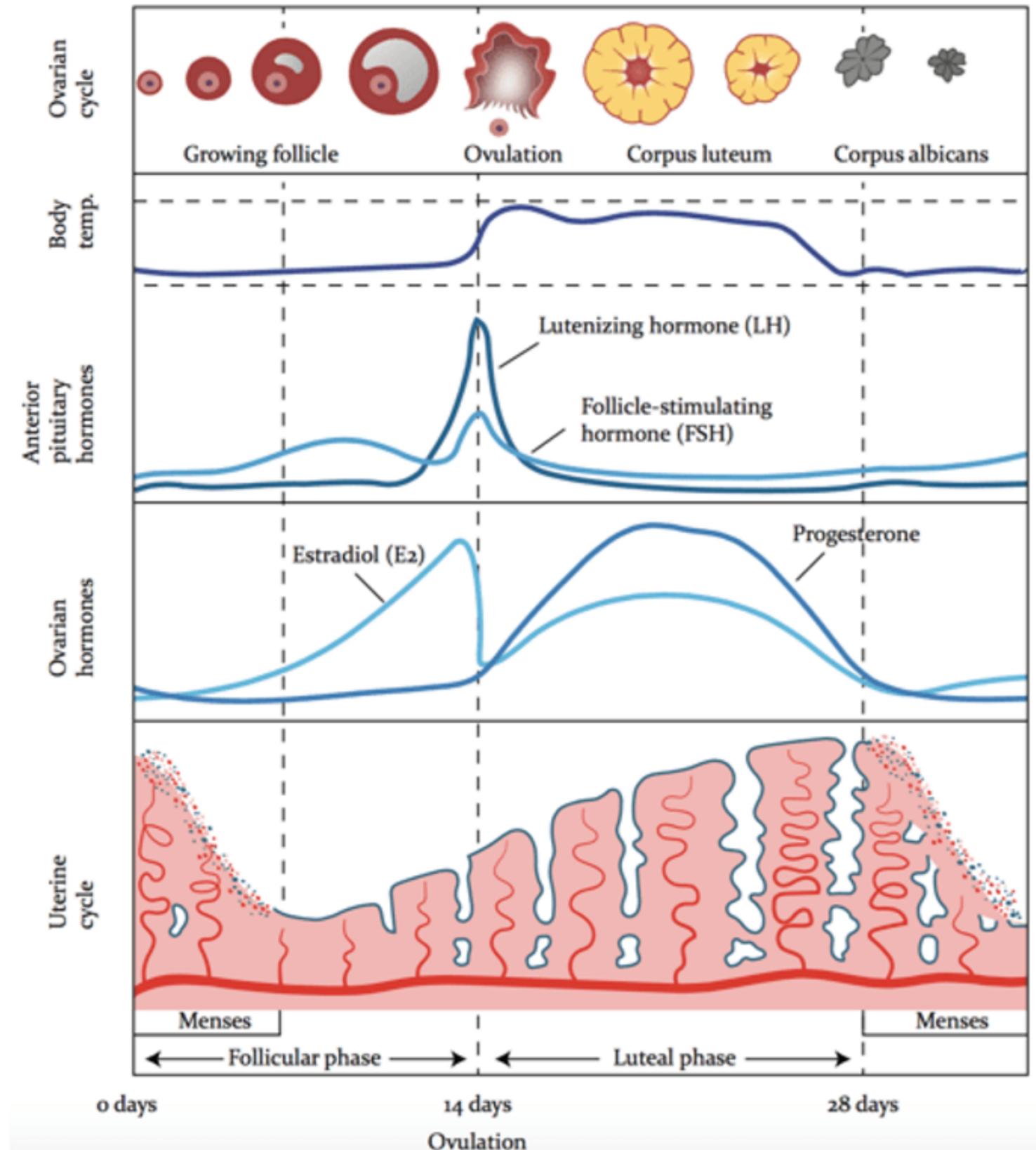
Ultrasound is used to measure follicular activity and endometrial lining thickness. Ultrasounds do NOT determine egg quality or the presence of eggs

03

Cycle length and medication doses are determined on a day-by-day basis, which are dependent on your response to your medications.

04

The egg retrieval is scheduled when your follicle size and blood results are within appropriate ranges. This can only be confirmed when you are triggered (given a medication to stimulate ovulation).





Day 1 Instructions

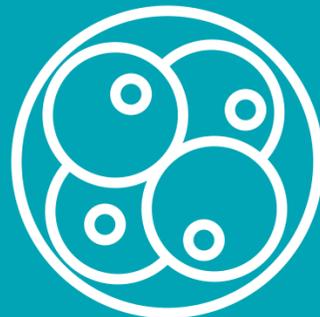
(Once donation cycle is confirmed)

Day one = Full continuous flow

If full flow of your period starts between 6pm and midnight consider the following day Day 1 and notify your clinic or nurse.

When will you begin cycle monitoring?

- Once you have completed all requirements and received a confirmation email
- Day 2-3 of your cycle
- You will receive all necessary instructions from your clinic or nurse





First Day of Cycle Monitoring



Day 2-3 of your cycle

Your clinic or nurse will advise you of your next steps as well as your next bloodwork and/or ultrasound appointment date and time(s).

Bloodwork and ultrasound must be completed and reviewed by a doctor prior to starting medications later that day (unless instructed otherwise).





Important To Know

Instructions are only sent after the physician has reviewed your results and dosed accordingly. There may be times when instructions are delayed.

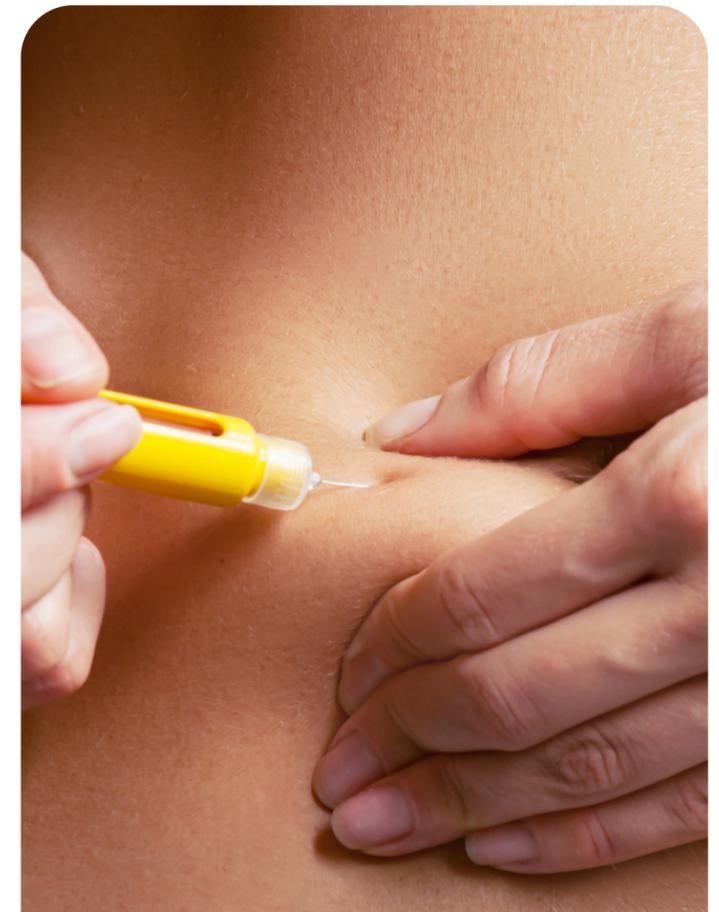
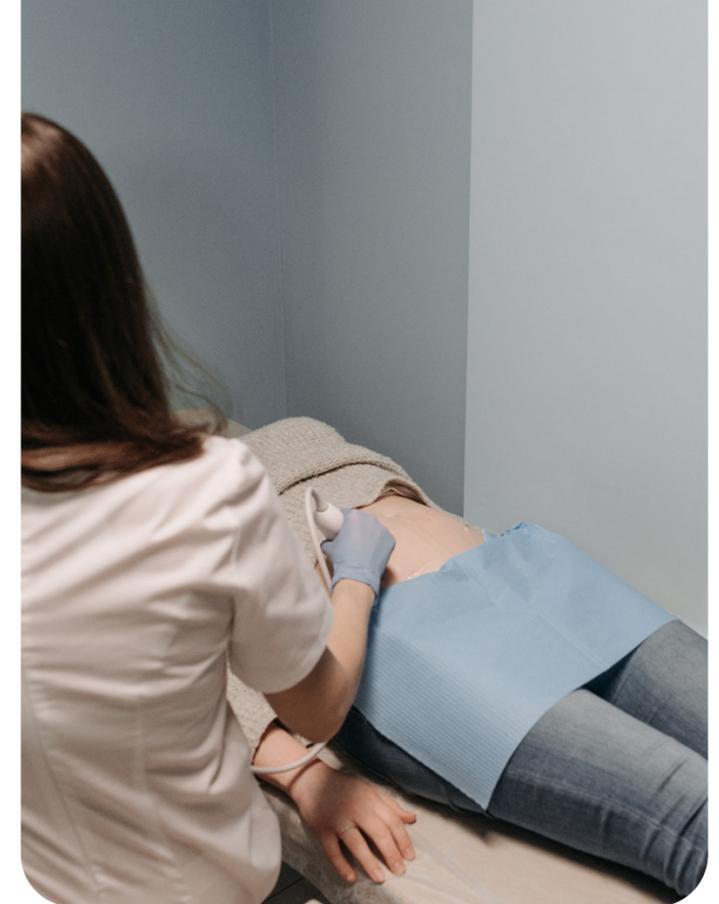
DO NOT TAKE MEDICATIONS WITHOUT RECEIVING INSTRUCTIONS FIRST, YOUR DOSE IS BASED OFF OF YOUR DAILY RESULTS AND MAY CHANGE THROUGHOUT THE CYCLE.

Questions during your cycle? Wish to discuss your results?
Medications?

Contact your nurse coordinator during clinic hours.

Please Note:

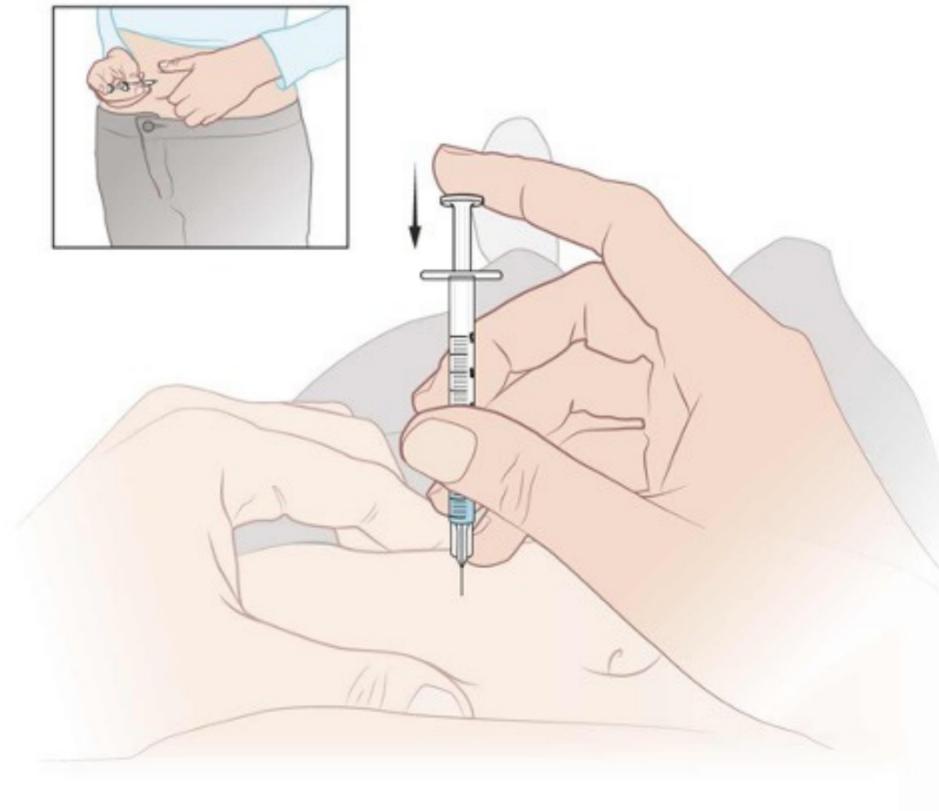
If you need to pick up medications for the weekend, let your nurse coordinator know *no later* than Thursday in order to process for pick up on Friday.





Daily Medications

Take your medications by subcutaneous injection **DAILY**. You may be instructed to take the medications at a certain time. Take your medications at the same time every day (within 1 hour), unless specifically instructed by the clinic.



Never take any medication unless instructed to do so by the clinic. Your dose is based off of your daily results and may change throughout the cycle.



IVF Medications

-  **Gonal F, Puregon & Rekovelle**
Purified FSH used to recruit and develop ovarian follicles.
Taken daily for 9-11 days on average.
-  **Menopur**
A 1:1 mixture of purified FSH and LH used to recruit, develop, and mature ovarian follicles.
-  **Luveris**
Purified LH used to enhance mature ovarian follicles.
Typically started when estradiol level reaches 1000.
-  **Orgalutran & Cetrotide**
Prevents premature ovulation during the stimulation portion of your protocol. The medication is available in pre-filled syringes. Keep one with you at all times of your cycle.

*Medications cannot be returned once they have been picked up.

**Your IP will pay a medication deposit in advance of your cycle through Fertility Match or your clinic . There will be no payment expected from you.

The start date for this medication is determined by follicle size and hormone level.



IVF Medications



HCG

This medication is used to induce ovulation (egg release "trigger").

TIME SENSITIVE: Taken 36 hours before scheduled egg retrieval.

Your instructions will tell you exactly what time to take this medication.



Lupron

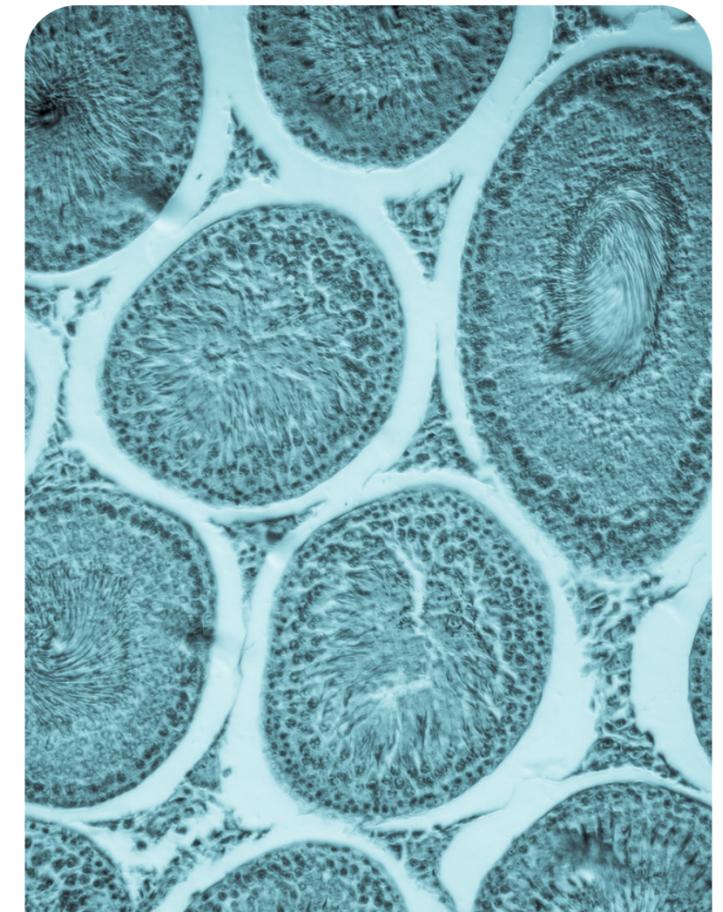
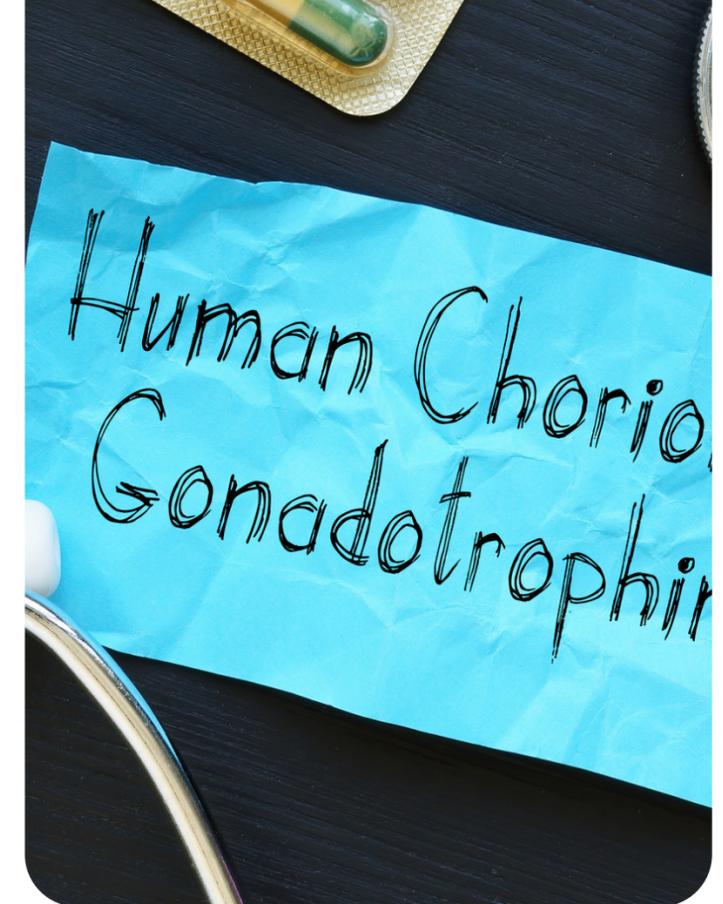
A synthetic medication that can be used to down-regulate (suppress) your own hormones.

Can also be used as a trigger.

Depending on your response, you may be triggered with HCG only, Lupron only, or HCG and Lupron.

*Medications cannot be returned once they have been picked up.

**Your IP will pay a medication deposit in advance of your cycle through Fertility Match or your clinic . There will be no payment expected from you.





Medications: Possible Side Effects

Local skin reactions may occur at the injection site:

- Pain
- Redness
- Itching
- Swelling



What to do

Ice the injection site to reduce local reactions.

Common side effects include:

- Drowsiness
- Headache
- Nausea
- Breast tenderness
- Abdominal discomfort
- Increased vaginal discharge
- Ovarian cysts



What to do

Tylenol and Gravol are safe. Please follow the instructions on the bottle.

Please avoid Advil during your cycle.

Please contact your nurse if you need to take any other medications or supplements.





Medications: Possible Side Effects

Rare side effects include:

- Thromboembolism (blood clotting) is an extremely rare complication.
- Ovarian Hyperstimulation Syndrome (OHSS)
Please see next slide for more information about OHSS.

IMPORTANT:

IF AT ANY TIME IN YOUR CYCLE YOU ARE CONCERNED ABOUT POTENTIAL SIDE EFFECTS, PLEASE CONTACT YOUR NURSE DIRECTLY OR PROCEED TO THE NEAREST EMERGENCY DEPARTMENT.

In general, it can be stated that all of the fertility medications used are extremely safe. Medically-based scientific evidence has repeatedly proven this.





Ovarian Hyperstimulation Syndrome (OHSS)



- OHSS occurs when the ovaries are overstimulated.
- The ovarian blood vessels begin to leak fluid, causing swelling of the ovaries and fluid retention in the abdominal cavity.
- OHSS can usually be predicted before it occurs, although it can also occur when minimal risk factors exist.





Ovarian Hyperstimulation Syndrome (OHSS)



Extremely rare

1-3% of patients



Symptoms

Abdominal pain and distension, sudden weight gain, nausea, decreased urine output, shortness of breath



Risk Factors

- Women with polycystic ovarian syndrome (PCOS).
- High Estradiol (E2) levels associated with numerous small follicles on ultrasound.
- A previous history of OHSS.



Prevention

- Regular monitoring.
- Medication dose changes.
- Increase salt, electrolyte, and protein intake if symptomatic.



Medications: Additional Resources

You will be provided with links to clinic and/or medication videos by the Fertility Centre to assist with administering your medications.

Extra Resources:

- Check out the manufacturers' website for written, pictorial, and additional video training tools
- Some available in multiple languages



Ferring Canada

FerringFertility.ca

(Menopur, Rekovelle,
HCG)



EMD Serono

fertility.mymomentum.ca

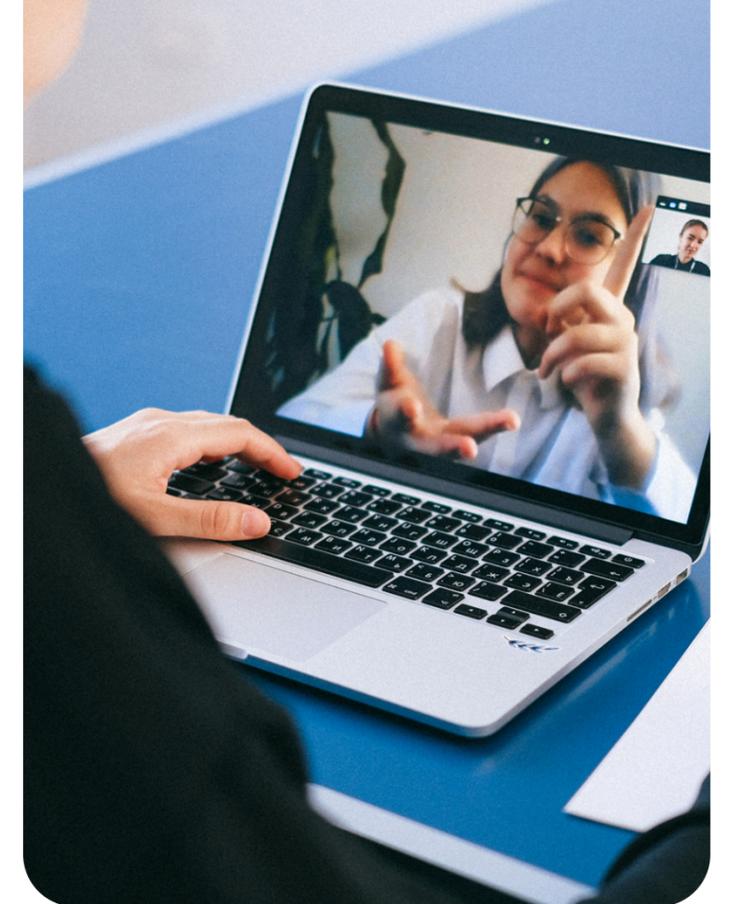
(Gonal F, Luveris)

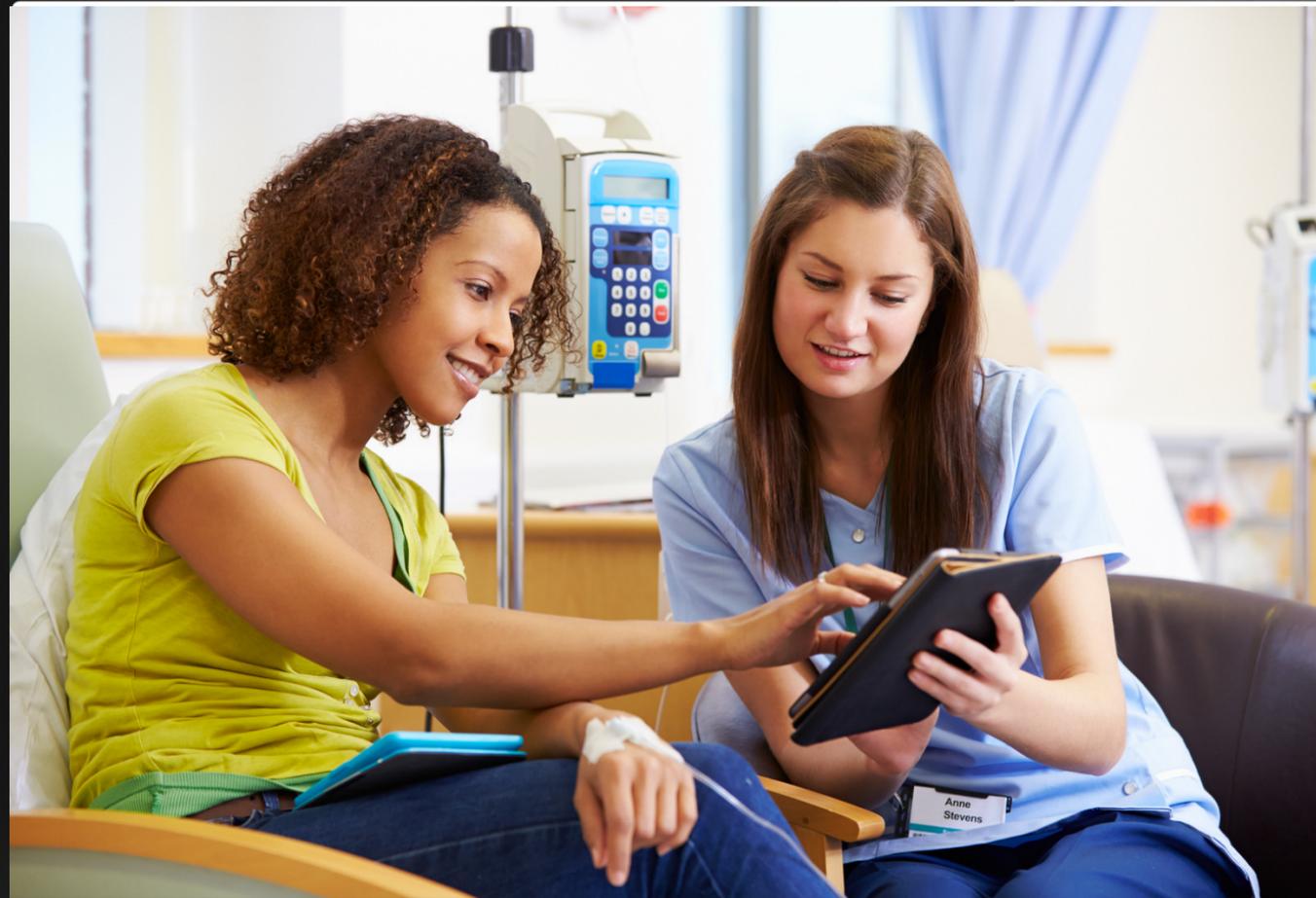


Merck

orgalutran.ca

(Orgalutran)





Trigger Day

Detailed instructions will be given to you by your fertility nurse.

- Stop all other stimulation medications on the same day as your trigger.
- Take your trigger as instructed.
- No blood or ultrasound monitoring on the day after your trigger.
- Have nothing to eat or drink after midnight the night before the egg retrieval.
- Bring a support person with you to the egg retrieval appointment.



Egg Retrieval Day

Detailed instructions will be given by your nurse.

01

Egg Retrievals are usually performed in the mornings or early afternoon, Monday through Sunday.

02

You will be instructed to come to the clinic at a certain time before the scheduled retrieval.

03

A “twilight” anaesthetic is administered intravenously. This will make you sleepy and groggy, you cannot drive for 24 hours. You must arrange for someone to transport you to and from the clinic. **YOU MUST DISCLOSE ANY MEDICATION CONCERNS TO THE ANAESTHETIST.**

04

Transvaginal ultrasound guided egg retrieval. Most retrievals take 15-30 minutes and patients typically require 30 to 90 minutes for recovery.

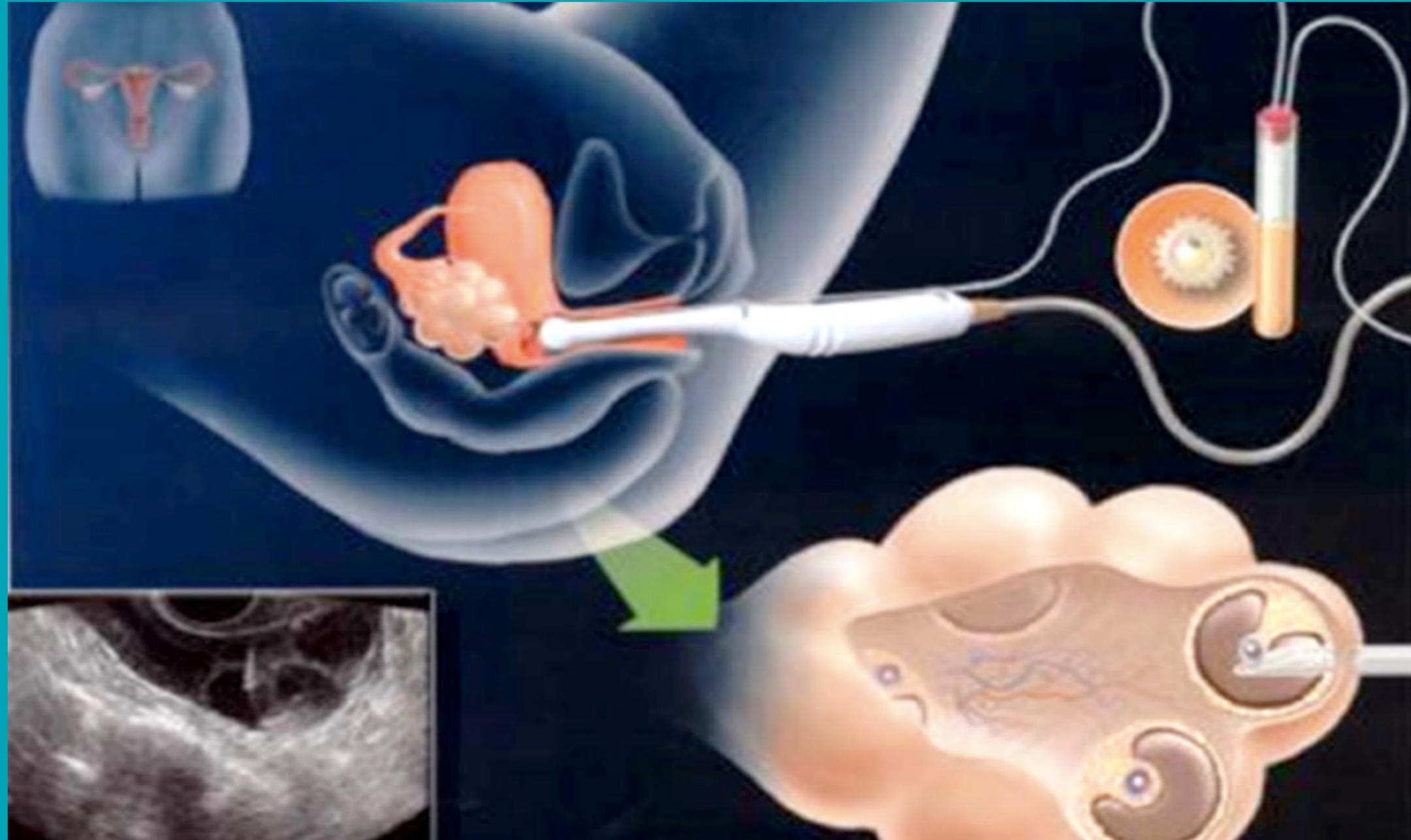
05

Bring juice or ginger ale and a light snack for after the retrieval. The nurse will let you know when you can have it.





IVF (Egg Retrieval) Procedure

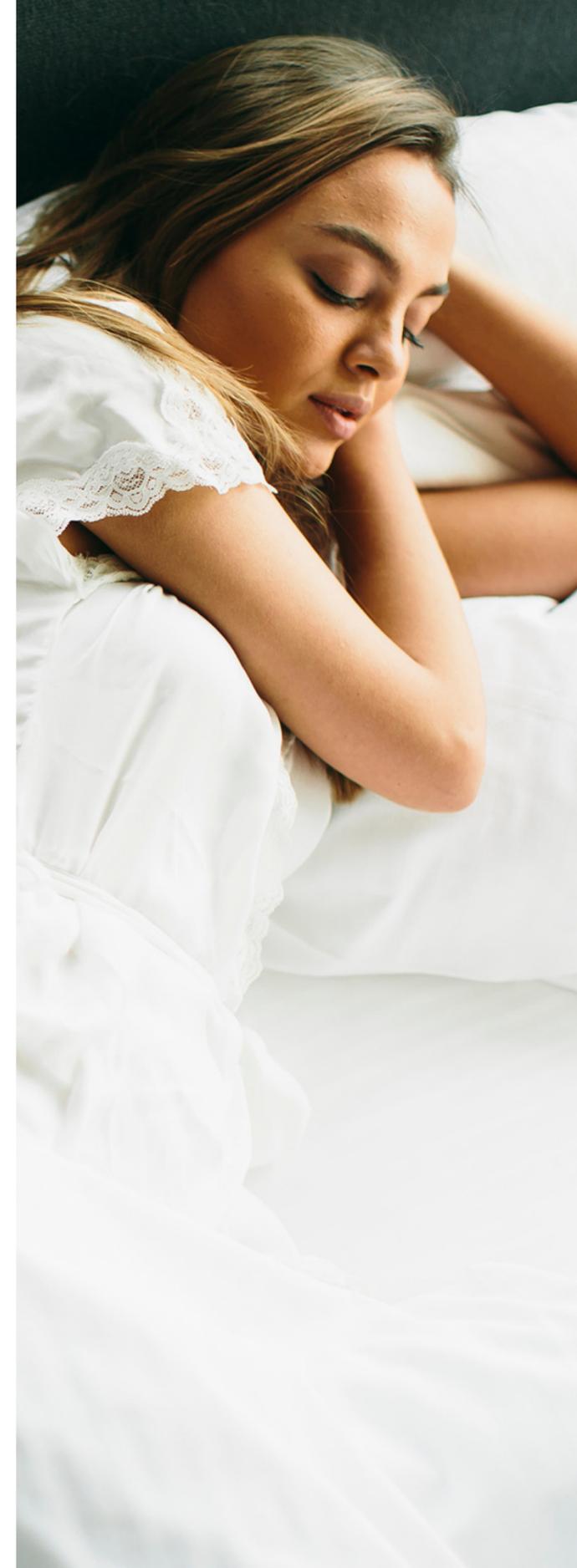




After Retrieval: Discharge from Clinic

Post Procedure Care

- The nurse will discharge you after the egg retrieval, once you are considered safe to leave the clinic
- You will be provided with written discharge instructions
- Nausea, vaginal bleeding (heavy at times), and pelvic discomfort post egg retrieval are normal (should settle down with 24 hours).
- You can take Tylenol or Gravol to manage these symptoms.
- If pain or nausea persists, or if you develop a fever, notify the clinic immediately or proceed to your nearest emergency department as appropriate.
- Avoid baths, intercourse and tampons for 2-3 days. You may have a shower and wear a pad.
- You may be asked to return to the clinic the following day for assessment or may receive a follow up email in the days following the egg retrieval to assess how you are feeling, and to confirm that you are following your post retrieval protocol.

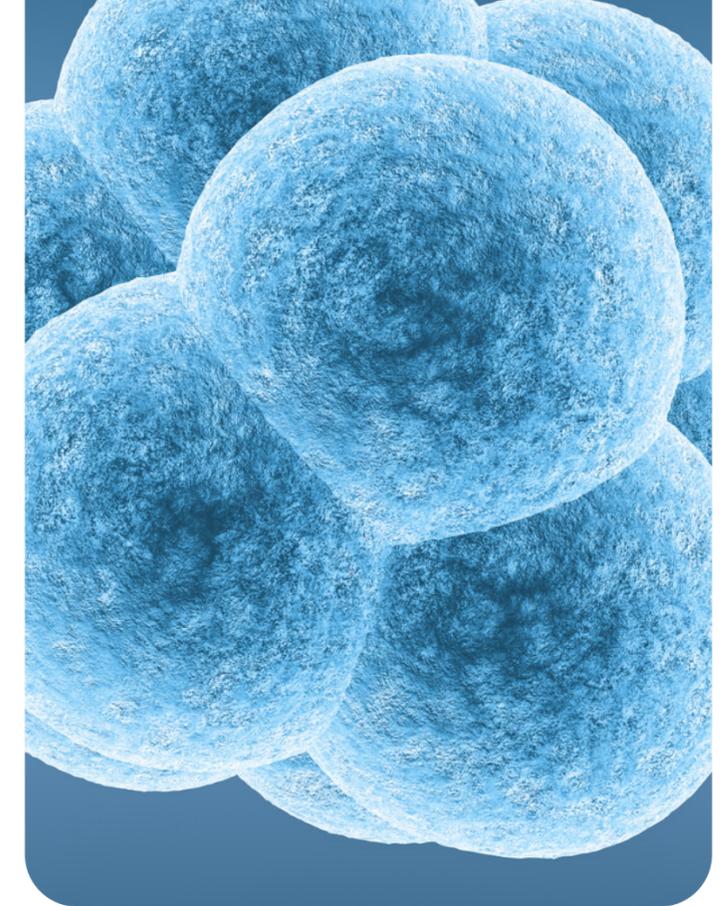
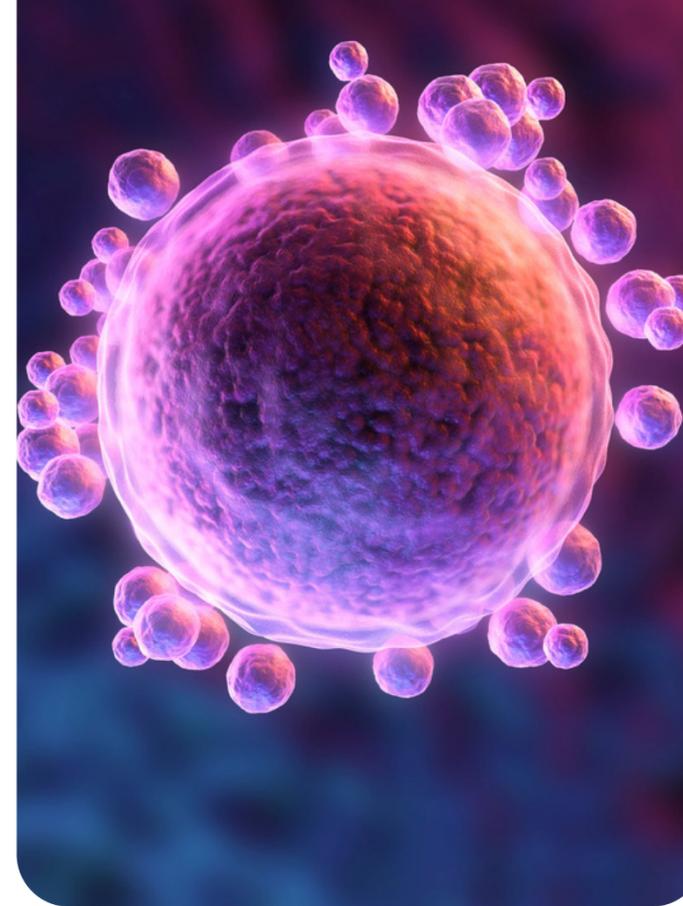




FERTILITY MATCH CANADA INC.

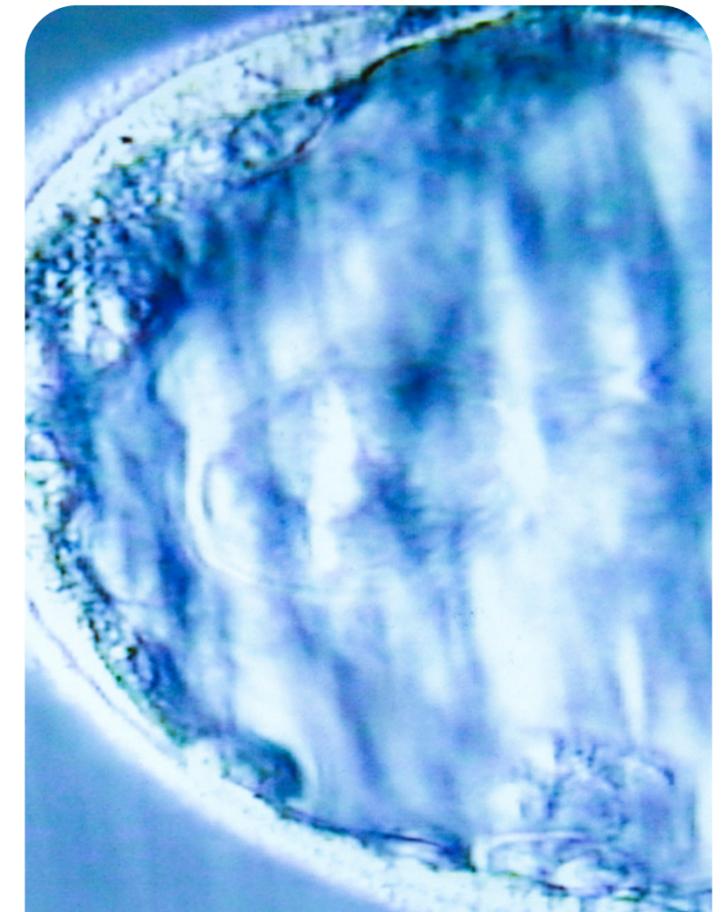


Egg Donation: Post-Retrieval Follow Up



From this point on, the eggs and future embryos will be the responsibility of your IPs.

If you wish to have information on results beyond the number of eggs retrieved from your ovaries, feel free to reach out to us at least 2 weeks post retrieval. We can share any information agreed upon in your Ovum Donation Agreement with your IPs.





Things You Should Know

- On weekends clinic staff may be limited. Please limit questions to only those that cannot wait until the next business day.
- You are under the care of your primary physician whenever possible, there may be times when you will be in the care of one of the clinic's affiliated physicians. This care could include, but is not limited to, the monitoring of a cycle, egg retrievals, and consultations as deemed necessary.
- You are a patient of the clinic while you are doing your donor cycle. The team is there to support you. If you have questions or are feeling uncertain at anytime, please reach out to your nurse coordinator. You are a very important part of this process for your IPs, and Fertility Match wants you to feel safe and well supported throughout the entirety of your donor cycle.





Cycle Checklist

1. Signed all consents.
2. Complete legal agreement.
3. Complete psychological assessment.
4. Printed and signed anesthesia questionnaire
5. Arranged for all three 30 day requirements.
6. Pick up medications before first day of cycle monitoring and check your inventory regularly.
7. Put an Orgalutran in your purse on Day 2: in case you need to take it urgently
8. Ensure you have a support person to drive you to and from retrieval day.





FERTILITY MATCH CANADA INC.



Fertility Match Contact Information



Website: fertilitymatch.ca



Email: heather@fertilitymatch.ca
shannon@fertilitymatch.ca



FERTILITY MATCH



1.833.33.MATCH (62824)



FERTILITY MATCH CANADA INC.



THANK YOU

For taking the time to watch this presentation.

We hope it has helped you gain a better understanding about egg donation and the IVF process.



FERTILITY MATCH