

General Requirements for Egg Donation

The following guidelines/requirements are a combination of those of The Fertility Center and the Food and Drug Administration (FDA). Some are in place to assure optimal fertility response in the donor, while others reduce the risk of communicable disease transmission. Note that there may be additional reasons a donor may not be eligible to donate, but this list covers most requirements.

Anonymous egg donors should meet the following requirements to be accepted into the program:

- Between age 21 and 31
- Non-smoking for a full 3-6 months minimum
- High school grad minimum; college education preferred
- Donors cannot be adopted unless they have full access to their family medical background
- Normal Body Mass Index (BMI of 30 or less)
- No history of severe endometriosis
- No genetic disorders, bipolar disorder, or significant depression, in donor or immediate family
- Must be low risk for communicable disease
- Donors cannot currently be taking antidepressant medications
- Medical records reviewed from primary care or OB/GYN demonstrate eligibility
- Psychological screening by our on site counselor determines donor is appropriate/eligible
- Completion of the Minnesota Multiphasic Personality Inventory (MMPI); reviewed by our counselor and a Fertility Center physician for eligibility

After initial acceptance, all egg donors must complete the following:

- A new patient appointment and physical examination by a Fertility Center physician
- Consultation with the Donor Coordinator (to review procedures, plans, medications, etc)
- Injection teaching
- FDA screening and testing for HIV, hepatitis B virus, hepatitis C virus, syphilis, gonorrhea, and Chlamydia and other communicable disease risks

If you are using a known egg donor, follow the above guidelines for your best chance at success.

Please contact our donor coordinator nurses if you have any questions:
(616) 988-4602

Types of Egg Donors

Recruited/Anonymous egg donors: These women are initially screened online by questionnaire. If they are eligible after the initial screening, they must complete an extensive questionnaire and release their medical records to our office. We review their medical records and compare them to the questionnaire. If their information is consistent and they remain eligible, we schedule them with our counselor and they complete the MMPI. We also normally do an ultrasound at this time to evaluate their antral follicles (potential to create numerous eggs). If they remain eligible, they meet with our Donor Coordinator to review the process in its entirety and to stress the significant commitment they are choosing to make. If they remain interested, their profile is made available online to potential recipients. After they are matched with a couple, we perform additional screening and testing for FDA eligibility. Once this is complete, and if the donor remains eligible, we begin to match up the donor and recipient's menstrual cycles for the procedure, which is a two month process.

Advantages: There is low chance of cancellation due to low numbers of eggs. There is a high chance of having additional embryos to freeze for later use. Young, healthy donors are more apt to have good quality eggs.

Disadvantages: Cost is the biggest disadvantage. All testing, medications, and procedure costs have to be paid, as well as donor reimbursement for their time and efforts.

Egg Bank: These are eggs that have been frozen in batches from an anonymous egg donor. Typically they are repeat egg donors. You will be offered a "batch" of eggs, usually around 7 and you may have the option to purchase additional eggs if available. The batch of frozen eggs are thawed and fertilized with your husband's fresh sperm sample and the fresh embryos are transferred to you 2 days later. Extra embryos would be frozen for future use.

Advantages: Lower cost. Can schedule your procedure on your own timing. Eggs are frozen, low chance of cancellation unless poor survival at thawing or poor fertilization.

Disadvantages: Less information on egg survival rates with thawing, fertilization rates and pregnancy outcomes because it is a new program to our office. May only have enough embryos for 1 procedure if low survival of eggs or poor fertilization results. Required to do cryopreservation of the embryos that are created and not transferred at the first procedure.

In Vitro Fertilization (IVF) patient donor: These donors are rare.

A patient who is doing her own IVF cycle and decides to donate some of her eggs. The ideal patient is a young woman with infertility which doesn't affect egg quality (e.g. tubal or male factor).

Advantages: The biggest advantage to using an IVF patient donor is the lower cost, due to the fact that the patient will pay for her own medications and procedures.

Disadvantages: The wait time to be matched with an IVF patient donor can vary from immediate availability to having to wait for months for a patient to choose this option. The IVF patient may want to freeze some embryos for themselves. If so, decisions will need to be made regarding how many eggs will be received by each party.