



Peas In a Pod™

EGG DONOR PROGRAM

Donation Process

Once you have been matched with a recipient couple, you will start the first steps in the egg (oocyte) donation process. The process will begin based on your menstrual cycle.

Screening Tests:

These tests will need to be done prior to the start of your cycle.

- Blood test
- Ultra Sounds
- FSH
- Estradiol
- Cervical cultures-GC/ Chlamydia & mycoplasma/ureaplasma
- Pap smear
- Sexually transmitted diseases-Hepatitis B surface antigen, Hepatitis C antibody, HIV 1,2 HTLV 1,2 and RPR
- Blood type & screen (ABO/Rh)
- CMV IgG & CMV IgM
- Drug & Alcohol screening
- Genetic testing (i.e. cystic fibrosis)
- Other Dr.'s orders based on medical history or religion

Contraception:

It is very important that you are aware the medication you will be taking will heighten your fertility. Make sure to use a barrier method of contraception before you start the cycle and during the specific times of the cycle. If you are not sure the method you are using is the right one, please feel free to contact us or your physician with any of your questions.

Medications:

All the medications used during the donation process are administered by injection. Most of the donors are able to do the injections themselves or have a friend help them. The injections are very simple and the Dr.'s office will give you proper training and instructions before starting the medications. The Dr.'s office will also provide you with an injection calendar of dates so you will easily be able to track the type of medication and dosage you are required and prescribed to take once daily.

You will begin taking one (1) of the following medications: Lupron, Cetrotide or Antagon. They are administered by injecting into the fatty tissue of your abdomen or leg. These 3 medications are designed to help prevent premature ovulation. You will take the medication for approx 7 days or as instructed by the Dr. You will then be instructed to take a second medication which will stimulate the ovaries to produce more follicles. You will have a period while you are taking the first medication (i.e. Lupron, Cetrotide or Antagon) and during this time you will record the dates and call the Dr.'s office as instructed. After a 2-3 week timeframe, the doctor may opt to switch your medication to either Follistim, Gonal-F, Menapur, Repronex or a combination.

Once your follicles have matured, the Dr. will instruct you to take one last injection called HCG. This medication is very time specific. You will be asked to take it at an exact time which is very crucial and will coincide with your retrieval procedure. This procedure is usually scheduled approximately 36 hours after administering the HCG injection. This injection will cause the final maturing and release of eggs for completion of the donation cycle.

Monitoring of your donation cycle:

It will be necessary to have several Dr.'s visits. These 6-8 appointments will mostly likely be in the morning and sometimes may be on a weekend. The visits are to monitor you and your body's response to the medications during the entire cycle. This monitoring is done by blood tests as well as vaginal ultrasounds.

Cancellation of the cycle:

The Dr. may cancel the donation for any of the following reasons:

- Development of less than 5 follicles
- Premature LH surge
- Premature Ovulation
- Inadequate follicle growth/poor response to meds
- Hyperstimulation

Retrieval day:

The egg (oocyte) retrievals are usually scheduled first thing in the morning. You will be instructed to not eat or drink anything after midnight the night before the retrieval. This includes water and gum. You must have a responsible adult drive you to the clinic as well as pick you up once the retrieval has been completed (this cannot be a taxi driver). We strongly recommend that you have someone stay with you while you are recovering from the anesthesia.

Retrieval Process:

The retrieval is performed at the Dr.'s office/clinic. You will empty your bladder, undress from the waist down and cover yourself with the sheet or gown that the Dr. will provide to you. Next, the Dr. will start an IV with an antibiotic and sedative before the start of the retrieval. Your vulva and vagina will be cleaned with a solution. The sonogram probe will be inserted into the vagina, which is exactly like the vaginal ultrasound performed during your cycle. The follicles will be aspirated with a thin needle through the vaginal wall, and the eggs will immediately be identified under a microscope by a professional embryologist. Depending on the number of follicles to be retrieved, the procedure usually takes anywhere from 20-30 minutes.

Post-Retrieval:

Once the retrieval has been completed, you will rest in the recovery room for approx 1 hour. When you go home, it is recommended that you rest your body for the rest of that day. Drinking liquids with electrolytes (i.e. Gatorade) will help your body regain its strength.

At Home:

Some donors may experience mild pelvic discomfort (i.e. cramping) for 1 to 2 days following the retrieval, and maybe even some light spotting. This is common and normal after egg donation retrieval. Infections and heavy bleeding are rare complications. If you have a fever higher than 100.4, please contact the Dr.'s office. We do recommend that you have someone stay with you for 24 hours following the retrieval.

Most Common side effects from medications:

Birth Control Pill: Headaches, bloating, nausea, breast tenderness and vaginal spotting

Fertility Drugs:

Lupron/Antagon/Menapur

Hot flashes	Breast tenderness	Dizziness
Sweats	Decreased Libido	General Pain
Headaches	Joint Pains	Nervousness
Nausea/vomiting	Emotional Liability	Skin Reactions
Vaginal dryness/itching	Weight gain/loss	

Gonal-F, Pergonal, Repronex, Follistim

Ovarian Hyperstimulation	Headaches
Ovarian enlargement/pain	Nausea/vomiting/diarrhea
Ovarian cysts	Skin rashes/swelling or irritation at the
Abdominal pain/cramps	injection sight
Allergic reactions (fever, chills, etc)	Dizziness
Increased heart rate	Breast pain
Back pain	Emotional Liability
Weight increase	

Please Note: These medications will be out of your system within a few days after the completion of the cycle.

Rare Complications:

Discomfort	Minor discomfort or abdominal pain may occur following the retrieval. This can be controlled by pain medications.
Bleeding	Bleeding from the site where the needle is introduced (in the vagina) can occur. Almost always is controlled by applying pressure to the site .In the event that there is internal bleeding, surgery might be required.
Infection	Vaginal and pelvic infections may result. As a preventative measure, the donor will take antibiotics during the retrieval. Complicated infections may cause tubal damage and interfere with fertility in the future.
Hyperstimulation (OHSS)	The production of a large number of eggs (30+) which may cause abdominal swelling, discomfort and difficulty breathing. In rare instances, the fluid that accumulated in the abdomen might have to be removed to alleviate symptoms. This can be prevented and the Dr.'s will take all necessary measures beforehand by controlling the amount of medications dispensed.

If you should have any questions about the process and or the medications, please do not hesitate to contact our office.

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