

Donor Code: LD2M		
Maximum permitted storage period: Donor LD2M will reach the maximum storage period on 22/04/2036 Following this date if you still have sperm in storage that you wish to use in treatment it may be possible to apply for a storage extension. Please speak with your donor coordinator.		
Vial Type: ICSI	On donation available: Dependent upon available family allocations	
Donor available for reservation in: NSW & WA – Maximum of 5 family allocations		
Blood type: B Rh (D) Positive		
Cytomegalovirus (CMV) Status: Positive		
As this sperm donor is CMV Positive the person/s planning to carry may require additional documentation in the form of a Risk Acknowledgement form to proceed with this donor. Please refer to your CMV Fact Sheet or your IVF Specialist if you have questions around your own CMV status		
Additional testing requirements:		
This donor has undertaken genetic screening for Invitae Expanded Genetic Carrier Screening (283 Panel) and has been found to be a carrier of the below listed condition/gene: <ul style="list-style-type: none"> Biotinidase deficiency – BTD – c.1330G>C (p.Asp444His) – Autosomal recessive To proceed with this donor, further screening is required for the person/s eggs being used in conjunction with this sperm donor: <ul style="list-style-type: none"> A comparative genetic panel including the above gene A consultation with a Clinical Geneticist to discuss the risks and implications of proceeding without the additional testing and the completion of a Risk Acknowledgement 		
Monash IVF Fertility Specialist and Genetics Comments		
Current Screening Guidelines as of 2023		
Test name	Initial screening	Quarantine screening
HIV 1 & 2 Antibodies	✓	✓
Hepatitis B Surface Antigen	✓	✓
Hepatitis C Core Antibody	✓	✓
Hepatitis C RNA PCR	<i>not required</i>	✓
Syphilis	✓	✓
CMV Antibodies (IgG/IgM)	✓	✓
HTLV I&II	✓	✓
Chlamydia urine PCR	✓	✓
Gonorrhoea urine PCR	✓	✓
Mycoplasma Genitalium urine PCR	✓	✓
Full Blood Examination + Film review	✓	<i>not required</i>
Blood Group	✓	<i>not required</i>
Banded Karyotype	✓	<i>not required</i>
Haemoglobin Electrophoresis	✓	<i>not required</i>
Cystic Fibrosis Screen	✓	<i>not required</i>
Spinal Muscular Atrophy Screen	✓	<i>not required</i>

Donor Details			
Donor Code or MIVF Patient ID:		Date Donor Profile Completed:	
Donor Type:	<input type="checkbox"/> Clinic Recruited Donor		<input type="checkbox"/> Recipient Recruited/Known Donor
	<input type="checkbox"/> Sperm Donor	<input type="checkbox"/> Egg Donor	<input type="checkbox"/> Embryo Donor: <input type="checkbox"/> Sperm Source / <input type="checkbox"/> Egg Source Both donors must provide a declaration

In accordance with Legislation, regulations and Monash IVF Policy, certain non-identifying donor information must be provided to Monash IVF before a donation can proceed. In line with your consent to donate your sperm, eggs or embryos, this information will be held by Monash IVF and will be provided to:

- potential or actual recipient(s) of your donation
- any children born as a result of your donation
- Government Donor Conception Registers and/or clinic held registers in the event a pregnancy or live birth results from your donation.

We ask that you please answer each question contained within this form. You may also choose to include other additional information for your profile. Please ensure you do not include any identifying information about yourself for any members of your family in this document. This document is a fillable PDF.

Donor Information	
Ethnicity:	Country of birth:
First Language:	Other Language/s (if any):
Age at time of donation:	18-25 26-30 31-40 41-45

Current Relationship Status				
Single	Married	DeFacto	Divorced	Widowed

Occupation

Educational Level	Certificates Attained/Highest Year Level Completed
Secondary	
Tafe/Vocational Training	
Tertiary	

Do you have your own children? No Yes (please complete table below)

Sex of Each Child	Year of Birth	Hair Colour	Eye Colour



Donors' Physical Characteristics					
Build	Slim	Athletic	Medium	Solid	Large
Skin Complexion	Fair	Freckled	Medium	Olive	Dark Brown
Eye Colour	Blue	Green	Hazel	Grey	Brown
Natural Hair Colour	Blonde	Red	LightBrown	DarkBrown	Black
Hair Texture (select from each row)	Fine	Medium	Coarse	Thick	
	Wavy	Straight	Curly		

About the Donor's Biological Parents

Please provide the following information about your biological parents. We acknowledge that donors who were adopted, or born via donor conception themselves may not be able to provide this information.

Biological Parents Physical Characteristics					
	Height (cm)	Build	Complexion	Natural Hair Colour	Eye Colour
Mother					
Father					

Biological Parents and Grandparents		
	Country of Birth	Ethnicity
Mother		
Father		
Maternal Grandmother		
Maternal Grandfather		
Paternal Grandmother		
Paternal Grandfather		

Please list personal and/or professional interests.

Please describe your personality/temperament.



Please describe your attitude/philosophy in life.

What do you think makes you unique?

How would you describe your childhood? And what value were you taught?

Who were the most influential people in your upbringing? And what were they like?

Please explain why you wish to become a donor.

Do you have a message for a child conceived from your donation?

