Sperm Donor Profile Addendum

Donor Code: MQ10223

Maximum permitted storage period: Donor MQ10223 will reach the maximum storage period on 7/07/2033. 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.

Donor available for reservation in QLD 10 family allocations

Blood type: A +

Cytomegalovirus (CMV) Status: Negative

As this sperm donor is CMV Negative, no additional documentation is required. Please refer to your CMV act Sheet or your IVF Specialist if you have questions around your own CMV status.

Additional testing requirements:

This donor has undertaken genetic screening for Expanded carrier screening (ECS) and has been found to be a carrier of the below listed condition/gene:

- Congenital adrenal hyperplasia due to 21-hydroxylade deficiency

To proceed with this donor, further screening is required for the person/s eggs being used in conjunction with this sperm donor.

Monash IVF Fertility Specialist and Genetics Comments

Scoliosis is considered multi-factorial (caused by a combination of genetic and environmental factors) in most cases. Based on the donor's description (and no other affected individuals reported in the family) this is unlikely to result in a child with severe forms of scoliosis. Screening for scoliosis in adolescence could be considered.

Current Screening Guidelines as of 2023

Test name	Initial screening	Quarantine screening
HIV 1 & 2 Antibodies	✓	✓
Hepatitis B Surface Antigen	✓	✓
Hepatitis B Core Antibody	✓	✓
Hepatitis C Core Antibody	✓	✓
HCV RNA PCR	*Not Required*	✓
Syphilis	✓	✓
CMV Antibodies (IgG/IgM)	✓	✓
HTLV I&II	✓	✓
Chlamydia urine PCR	✓	✓
Gonorrhoea urine PCR	✓	✓
Mycoplasma Genitalium urine PCR	✓	✓
Full Blood Examination + Film review	✓	*Not Required*
Blood Group	✓	*Not Required*
Banded Karyotype	✓	*Not Required*
Haemoglobin Electrophoresis	✓	*Not Required*
Cystic Fibrosis Screen	✓	*Not Required*
Spinal Muscular Atrophy Screen	✓	*Not Required*
Extended Genetic Carrier Screening	✓	*Not Required*

Monash IVF Group

Donor Non-Identifying Information

Donor Details			
Donor Code: MQ10223			Date Completed: 02.02.2023
Donor Type:	☑ Sperm Donor	☐ Egg Donor	☐ Embryo Donor: ☐ Sperm Source / ☐ Egg Source

In accordance with current regulations, legislation and Monash IVF Policy, the following non-identifying information for all donors must be provided to Monash IVF. This information will be made available to:

- recipient(s) of your donation
- children born as a result of your donation
- recorded on the State and/or Clinic Registers if a pregnancy and/or birth are achieved by the recipient(s).

Please advise your Donor Co-Ordinator if any information you have included on this form changes, including any medical or genetic information you are made aware of after the donation has been completed.

We ask that you please answer each question contained within this form. Please ensure you do not include any identifying information about yourself or any members of your family in this document. This document is a fillable PDF.

Donor Information		
Place of Birth	Town/State: Ipswich/Queenslan	Country: Australia
Ethnicity: Mixed Australian, Indian		Religion (if any): hindu
First Language: English		Other Language/s (if any): N/A
Occupation: Cabinetmaker		

Current Relationship Status				
☑ Single	☐ Married	☐ De Facto	☐ Divorced	☐ Widowed

Blood Group							
☐ O+	☐ O-	☑ A+	☐ A-	☐ B+	☐ B-	☐ AB+	☐ AB-

Genetic Carrier Screening Status	Cytomegalovirus (CMV) Status
Positive	Negative

Educational Level	Certificates Attained/Highest Year Level Completed
☐ Secondary	
☑ Tafe/Vocational Training	Certificate 3 in Cabinetmaker Kichens and Barthrooms
☐ Tertiary	

Do you have your own children? ☑ N/A

Gender of Each Child	Year of Birth	Hair Colour	Eye Colour

Monash IVF Group

Donor Non-Identifying Information

Donor Details	
Donor Code: MQ10223	Date Completed: 02.02.2023

Physical Characteristics					
Height (cm) 180			Weight (cm) 94		
Build	☐ Slim	☐ Athletic	☐ Medium	☑ Solid	☐ Large
Complexion	☑ Fair	☐ Freckled	☑ Medium	☐ Olive	☐ Dark Brown
Eye Colour	☐ Blue	☐ Green	☐ Hazel	☐ Grey	☑ Brown
Natural Hair Colour	☐ Blonde	☐ Red	☐ Light Brown	☐ Dark Brown	☑ Black
Hair Texture	☐ Fine	☐ Medium	☐ Coarse	☐ Thick	
	☐ Wavy	☐ Straight	☐ Curly		

Biological Parents Physical Characteristics					
	Height (cm)	Build	Complexion	Natural Hair Colour	Eye Colour
Mother	150	medium	dark brown	black	brown
Father	180	Solid	fair	black	green

Biological Parents and Grandparents Country of Birth and Ethnicity		
	Country	**Ethnicity**
Mother	Fiji	indan
Father	Australian	Fair
Maternal Grandmother	Fiji	Indian
Maternal Grandfather	Fiji	Indian
Paternal Grandmother	Australia	Australian
Paternal Grandfather	Australia	Australian

Please describe your general health:
I am fit adverage build, a bit over weight.

Health Questions			
Do you smoke?	☑ No / ☐ Yes	per day	per week
Do you drink alcohol?	☑ No / ☐ Yes	per day	per week
Do you exercise/engage in physical activity?	☑ No / ☑ Occasionally / ☐ Often		per week
Do you have issues with your eyesight?	☐ No / ☑ Yes	Do you wear glasses?	☐ No / ☑ Yes
Do you have issues with your hearing?	☑ No / ☐ Yes	Do you wear hearing aids?	☑ No / ☐ Yes

Monash IVF Group

Donor Non-Identifying Information

Donor Details	
Donor Code: MQ10223	Date Completed: 02.02.2023

Do you have any personal or professional interests?
I would like to keep expanding my career, and knowleadge baes.

Please describe your personality/temperament.
I am introverted personality, thinking and sentive type. I lke to have a go at most thing providing the risk and reward sometime more risk.

Please describe your attitude/philosophy in life.
i belive in haven life and enjoing life with being in just the moment and understanding what this moment meas to me. I have a fix attitude in what I am here to do in, and have the best out come of everyone. I do have a reactive personality and sometime set in my views even if they are not the best view, or perpective.

What do you think makes you unique?
I have the creative, idaes in mind and always thinking is this the best way or could this be better. I do like to draw and see the beuity in most things.

How would you describe your childhood? And what value were you taught?
I find it the best and like all the moments, the happy and the sad. i was taught to play and sometimes the english, math science did have a need for encougement.

Who were the most influential people in your upbringing? And what were they like?
The most would be my mum and dad having sister, no brother which is a bit diffirent but not anyless better. My dad rich in experience, mum the kind and spirual. My sister the care and conversation, the best. Sometime moives and the art of most people dose not matter the artice.

Monash IVF Group

Donor Non-Identifying Information

Donor Details	
Donor Code: MQ10223	Date Completed: 02.02.2023

Please explain why you wish to become a donor.
I would like to leave someting behind, and would like he enjoyment I had can be passed one in to the future.

Do you have a message for a child conceived from your donation?
i would like the too just live life be happy if they can sometime there will be hard time. In the absence of light draknees prevail, so find your light the soul. I did care and hope for the best. Try to mack the best chose for you. Be good and listen to your parents and make good choces.

The following is a list of conditions that are known to be genetic or have a genetic contribution meaning that they could be inherited by a donor conceived child. If **you** *or* **any member of your family** has been diagnosed as being affected by one of these conditions or as being a carrier of one of these conditions, please tick yes and add the age of onset. If a relative has been affected by the condition, describe the relationship of the person to yourself (i.e. grandparent, parent, sibling, aunt, uncle or cousin). If you would like to provide further information about any condition(s) you indicate as yes, please add this information in the box at the end of this document.

Auto Immune Disorders	No	Yes *(self)*	Age of onset	Yes *(relation)*	Age of Onset	Relation to you
Lupus	☑	☐		☐		
Scleroderma	☑	☐		☐		
Sjogren's Syndrome	☑	☐		☐		

Kidney Disease	No	Yes *(self)*	Age of onset	Yes *(relation)*	Age of Onset	Relation to you
Polycystic Kidney Disease	☑	☐		☐		
Born with one kidney	☑	☐		☐		
Urinary tract disorders	☑	☐		☐		

Neurological Disease	No	Yes *(self)*	Age of onset	Yes *(relation)*	Age of Onset	Relation to you
Attention-Deficit Hyperactivity Disorder	☑	☐		☐		
Autism Spectrum Disorder	☑	☐		☐		
Asperger's Syndrome	☑	☐		☐		
Down Syndrome	☑	☐		☐		
Dyslexia Disorder	☑	☐		☑	5	Dad
Chronic Migraines	☑	☐		☐		
Alzheimer Disease	☑	☐		☐		
Huntington's Disease	☑	☐		☐		
Epilepsy	☑	☐		☐		
Cerebral Palsy	☑	☐		☐		

Monash IVF Group

Donor Non-Identifying Information

Donor Details	
Donor Code: MQ10223	Date Completed: 02.02.2023

Neurological Disease	No	Yes (self)	Age of onset	Yes (relation)	Age of Onset	Relation to you
Creutzfeldt-Jakob Disease	☑	☐		☐		
Friedreich Ataxia	☑	☐		☐		
Multiple Sclerosis	☑	☐		☐		
Parkinson's Disease	☑	☐		☐		
Spina Bifida	☑	☐		☐		
Tourette Syndrome	☑	☐		☐		
Intellectual Disability	☑	☐		☐		
Guillain Barre Syndrome	☑	☐		☐		
Fatal Familial Insomnia (FFI)	☑	☐		☐		
Gertsmann-Straussler-Scheinker Syndrome (GSS)	☑	☐		☐		
Neurofibromatosis	☑	☐		☐		

Cancer	No	Yes (self)	Age of onset	Yes (relation)	Age of Onset	Relation to you
Breast	☑	☐		☐		
Lung	☑	☐		☐		
Skin	☑	☐		☐		
Bowel	☑	☐		☐		
Lymphoma	☑	☐		☐		
Melanoma	☑	☐		☐		
Tumour	☑	☐		☐		
Other	☑	☐		☐		

Blood Disorders	No	Yes (self)	Age of onset	Yes (relation)	Age of Onset	Relation to you
Haemochromatosis	☑	☐		☐		
Anaemia	☑	☐		☐		
Haemophilia	☑	☐		☐		
Sickle Cell Anaemia	☑	☐		☐		
Leukaemia	☑	☐		☐		
Thalassemia	☑	☐		☐		

Muscular/Bones/Joints	No	Yes (self)	Age of onset	Yes (relation)	Age of Onset	Relation to you
Muscular Dystrophy	☑	☐		☐		
Marfan Syndrome	☑	☐		☐		
Spinal Muscular Atrophy	☑	☐		☐		
Arthritis	☑	☐	~~18~~	☑	18	Dad
Rheumatoid Arthritis	☑	☐		☐		
Osteoarthritis	☑	☐		☐		
Scoliosis	~~☐~~	☑	28	☐		
Achondroplasia (Dwarfism)	☑	☐		☐		
Osteoporosis	☑	☐		☐		

Monash IVF Group

Donor Non-Identifying Information

Donor Details	
Donor Code: MQ10223	Date Completed: 02.02.2023

Cardiovascular Disease	No	Yes (self)	Age of onset	Yes (relation)	Age of Onset	Relation to you
Long QT Syndrome	☑	☐		☐		
Heart Disease	☑	☐		☐		
Cardiomyopathy	☑	☐		☐		
Heart Attack	☑	☐		☐		
Stroke	☑	☐		☐		
High Cholesterol	☑	☐		☐		

Mental Health	No	Yes (self)	Age of onset	Yes (relation)	Age of Onset	Relation to you
Clinical Depression	☑	☐		☐		
Schizophrenia	☑	☐		☐		
Bipolar Disorder	☑	☐		☐		
Intellectual Disability	☑	☐		☐		
Obsessive-Compulsive Disorder (OCD)	☑	☐		☐		

Metabolic/Endocrine	No	Yes (self)	Age of onset	Yes (relation)	Age of Onset	Relation to you
Tay-Sachs Disease	☑	☐		☐		
Type 1 Diabetes	☑	☐		☐		
Type 2 Diabetes	☑	☐		☑	47	Mum
Thyroid Disease	☑	☐		☐		
Phenylketonuria (PKU)	☑	☐		☐		
Hypoglycaemia	☑	☐		☐		

Congenital Malformations	No	Yes (self)	Age of onset	Yes (relation)	Age of Onset	Relation to you
Cleft Lip	☑	☐		☐		
Cleft Palate	☑	☐		☐		
Club Foot	☑	☐		☐		
Hypospadias	☑	☐		☐		
Undescended Testicles	☑	☐		☐		
Polydactyly	☑	☐		☐		

Respiratory Disease	No	Yes (self)	Age of onset	Yes (relation)	Age of Onset	Relation to you
Cystic Fibrosis	☑	☐		☐		
Bronchiectasis	☑	☐		☐		
Asthma	☑	☐		☐		
Allergies (Food)	☑	☐		☐		
Allergies (Drug)	☑	☐		☐		
Allergies (Pet)	☑	☐		☐		
Allergies (Hay fever)	☑	☐		☐		

Monash IVF Group

Donor Non-Identifying Information

Donor Details	
Donor Code: MQ10223	Date Completed: 02.02.2023

Skin	No	Yes (self)	Age of onset	Yes (relation)	Age of Onset	Relation to you
Psoriasis	☑	☐		☐		
Eczema	☑	☐		☐		
Albinism	☑	☐		☐		
Vitiligo (pigmentation disorder)	☑	☐		☐		

Sight/Sound	No	Yes (self)	Age of onset	Yes (relation)	Age of Onset	Relation to you
Colour Blindness	☑	☐		☐		
Cataracts	☑	☐		☐		
Glaucoma	☑	☐		☐		
Retinoblastoma	☑	☐		☐		
Macular Degeneration	☑	☐		☐		
Deafness	☑	☐		☐		

Gastrointestinal Disease	No	Yes (self)	Age of onset	Yes (relation)	Age of Onset	Relation to you
Crohn's Disease	☑	☐		☐		
Ulcers	☑	☐		☐		
Diverticulitis	☑	☐		☐		
Ulcerative Colitis	☑	☐		☐		

Please feel free to add further information relating to any conditions you ticked yes to above.
To the best of my knowledge..

Comment from MIVF Genetics Team: Scoliosis is considered multi-factorial (caused by a combination of genetic and environmental factors) in most cases. Based on the donor's description (and no other affected individuals reported in the family) this is unlikely to result in a child with severe forms of scoliosis. Screening for scoliosis in adolescence could be considered.