

PERSONAL HEALTH HISTORY SUMMARY

CONSULTATION DATE	DONOR'S YEAR OF BIRTH
10/15/2020	1986

DONOR'S SELF-REPORTED ANCESTRIES	
MATERNAL	PATERNAL
Cambodian	Cambodian

SIGNIFICANT SURGICAL HISTORY/HOSPITALIZATIONS
Has the donor ever had surgery? <u>NO</u>
Procedures/indications and age(s), if applicable: <u>N/A</u>
If applicable, was general anesthesia used? <u>N/A</u>
Anesthesia-related complications, if applicable: <u>N/A</u>
ALLERGIES
Does the donor have any allergies? <u>NO</u>
If yes, please describe: <u>N/A</u>
Does the donor have any food intolerances? <u>NO</u>
If yes, please describe (e.g. lactose, gluten): <u>N/A</u>

GENETIC FAMILY HISTORY SUMMARY

A three-generation family medical history was elicited from the donor by a certified genetic counselor and is summarized below. This information is collected to help evaluate the risk for inherited disorders in the donor’s offspring and the donor’s eligibility for participation in this donor program. It is provided to assist in donor selection but is not a guarantee of the health of any future child.

NUMBER OF FAMILY MEMBERS								
SISTERS	BROTHERS	NIECES/ NEPHEWS	MATERNAL AUNTS	MATERNAL UNCLES	MATERNAL FIRST- COUSINS	PATERNAL AUNTS	PATERNAL UNCLES	PATERNAL FIRST- COUSINS
1 (full), 5 (half)	5 (half)	1 (full), 8 (half)	4	5	21	1	4	12

CURRENT AGE OR AGE AT DEATH (d.)						
DONOR	MOTHER	FATHER	MATERNAL GRANDMOTHER	MATERNAL GRANDFATHER	PATERNAL GRANDMOTHER	PATERNAL GRANDFATHER
34	55	60	78	79	83	d.81

FAMILY MEMBER	DIAGNOSIS	HEALTH DETAILS (age at diagnosis, treatment, etc.)
DONOR	Alive and well	
SON	Speech delays	Speech delay around 1 to 2 years old. Caused by fluid in ears. Resolved after putting ear tubes in. Currently 7 years old.
MATERNAL HALF NEPHEW	Respiratory concerns	Born premature and these respiratory concerns are associated with being born premature, per donor.
MOTHER	Alive and well	
FATHER	Alive and well	
MATERNAL GRANDMOTHER	Alive and well	

Medical Profile

MATERNAL GRANDFATHER	Diabetes, type II	Heavy drinker and smoker.
2 MATERNAL FIRST-COUSINS	Autism	One boy and one girl
PATERNAL GRANDMOTHER	Alive and well	
PATERNAL GRANDFATHER	Alzheimer's Disease	Diagnosed with Alzheimer's and died in the same year at 81 years old.

RISK ASSESSMENT

There is a 3-4% risk for birth defects in all children regardless of their method of conception, usually for conditions that cannot be tested for or predicted based on one's family medical history. There is no evidence of an increased risk, above the general population risks, for any health problems in this donor's offspring based on the information reported, other than the risks specified below:

Genetic factors may contribute to development of autism, but there is no genetic testing available to determine if a person has an increased risk of developing these conditions. It is possible that offspring of this donor could have an increased risk of developing autism, above the general population risk, based on the donor's family history, but their actual chance of developing symptoms cannot be quantified and the severity of symptoms cannot be predicted.

If the donor's reproductive partner is also a carrier of alpha thalassemia, there is an increased chance of having a child with alpha thalassemia trait (up to 50%) or Hemoglobin H disease (up to 25%). Recommend testing of donor's reproductive partner(s) for alpha thalassemia.

Prospective recipients are encouraged to discuss their own family histories and their donors' family histories and genetic test results with their personal healthcare providers to help determine if the donor is suitable for their reproductive needs.

Medical Profile

As part of the donor screening process, a donor applicant completes a family history screening form and indicates any known family members with a range of health conditions including those listed below. After this initial intake, the donor meets with a certified genetic counselor who elicits, documents, and assesses the family medical history in further detail.

The donor's family medical history collected during that evaluation is summarized for you on the previous pages. We recommend that you discuss a donor's family medical history with your personal healthcare providers and/or a genetic counselor prior to using gametes from a donor so that you can be fully informed about the medical conditions reported, any health risks related to that donor's medical history, as well as the general population risks for health problems.

Example of Health Conditions Evaluated During a Donor Applicant's Family Medical History Screening

HEALTH CONDITION	HEALTH CONDITION
Alcoholism/Drug abuse	Heart attack prior to age 50
Alzheimer disease/dementia prior to age 60	Heart defect
Aneurysm	Huntington's disease
Anxiety/panic attacks	Kidney defect/disorder/cancer
Attention deficit/hyperactivity disorder	Learning disability/delay
Autism or Asperger syndrome	Melanoma
Bipolar disorder	Mental retardation
Birth defects	Miscarriage/Stillbirth/Infertility
Bleeding disorder/hemophilia	Obsessive compulsive disorder
Blindness prior to age 50	Ovarian cancer
Brain tumor/abnormality	Pancreatic cancer
Breast cancer	Parkinson disease prior to age 60
Cancers	Pituitary disorder
Cerebral palsy	Prostate cancer prior to age 50
Cleft lip or palate	Ovarian cancer
Colon cancer	Schizophrenia
Club foot	Speech delay/lisp/stutter
Deaths under 50, including childhood deaths	Spina bifida
Depression	Stroke prior to age 50
Epilepsy or seizure disorder	Uterine cancer (other than cervical cancer)
Extra or fused fingers or toes	Tourette syndrome
Genetic disorder	Vision problem
Hearing problem/deafness prior to age 50	Vitiligo/pigment disorder