

Female Patient Name: \_\_\_\_\_ Medical Record #: \_\_\_\_\_



CENTER FOR HUMAN REPRODUCTION  
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## INFORMED CONSENT FOR WASHED INTRAUTERINE INSEMINATIONS

We \_\_\_\_\_, being life partners, and desiring together the conception of a pregnancy, confirm our desire to undergo one, or more, washed intrauterine inseminations in attempts to achieve conception. Under this consent we authorize the performance of up to four (4) insemination cycles, as long as all inseminations are performed within one year of today's date. We understand that in this process the male partner donates sperm, which is then processed by the CHR laboratory, so that the sperm can be safely used for an intrauterine insemination (IUI). Sperm processing involves the repeated washing of sperm, which removes the seminal plasma from individual spermatozoa. Removal of seminal plasma also removes substances, which, otherwise, can make the uterus violently contract and cause severe cramping.

Sperm washing may not always remove all of the seminal plasma and/or its chemical ingredients and, on rare occasion, an IUI, therefore, still can lead to severe uterine cramping. Not every IUI will lead to pregnancy. Indeed, the average pregnancy chance per month of IUI treatment is only approximately 15%.

We also acknowledge that, like spontaneously conceived pregnancies, not all pregnancies conceived through IUI will continue normally, will lead to a normal delivery and will lead to birth of a normal child. Indeed, pregnancy complications and abnormalities in newborn occur after IUI like after spontaneous conception, including miscarriages and fetal/neonatal deaths. CHR has, therefore, not given any guarantees in regards to, nor shall be responsible for, fitness of the semen used for IUI( s) or for physical/mental characteristics of children born after IUI( s ).

We hereby confirm that the two of us are sexually active with each other and that we understand that CHR, therefore, has not tested the male's sperm for the presence of transmittable and/or infectious diseases, hereditary disorders and/or family traits. Indeed, neither of us has undergone, as part of this treatment, a complete screening for the presence of transmittable diseases. Because, as partners, we exchange body fluids, an IUI does not expose us to greater risk for sexually transmitted diseases than sexual intercourse does. We also understand that there are no tests, which could reveal whether either of us may be exposed to transmittable diseases in the future.

Semen for IUI(s) can sometimes be frozen and thawed out when the need for its use arises. CHR is not a licensed sperm bank and can, therefore, maintain semen samples frozen only during active treatment periods. An active treatment period is defined as the time up to 12 months from last patient/physician encounter. After three (3) months from the end of the active treatment period, CHR has either to dispose of stored semen samples or has to transfer them into long-term storage at a licensed semen bank. By signing this consent, we agree that CHR under such circumstances  DISCARD OUR SEMEN SAMPLE(s) or  TRANSFER OUR SEMEN SAMPLE at my/our storage costs (*cross one and initial on side a/page*).

**(Signatures on page 2 of this consent form)**

\*(a.k.a. American Infertility of New York, doing business in New York as Medical Offices for Human Reproduction)

