

## Consent to donating your sperm (including for use in pronuclear transfer)

**MD (including PNT)  
Gender-neutral version**

### About this form

This form is produced by the Human Fertilisation and Embryology Authority (HFEA), the UK's independent regulator of fertility treatment and human embryo research. For more information about us, visit [www.hfea.gov.uk](http://www.hfea.gov.uk).

### Who should fill in this form?

Fill in this form if you are donating sperm for the treatment of others (by artificial insemination or IVF) or for training purposes (to allow healthcare professionals to learn about, and practice, the techniques involved in fertility treatment).

In some cases the IVF process may also involve the use of a technique called pronuclear transfer (PNT) which can be used to allow women to avoid passing on an inheritable mitochondrial disease to her child.

### What is PNT?

PNT allows women who have mitochondrial gene abnormalities to create embryos containing their nuclear genetic material (the genes which make us who we are) and donated mitochondria.

There are two stages to the technique. A woman may need to use donor sperm for both stages of the technique (eg, if she does not have a partner who can provide sperm for her treatment), or may only need donor sperm for the second stage of PNT (eg, if the intended father is genetically related to the egg donor providing the normal mitochondrial).

**Stage one** - your sperm will be used to create embryos with the intended mother's eggs. Both your and the intended mother's nuclear genetic material will be removed and transferred into embryos created in stage two below. Once your and the intended mother's nuclear genetic material is removed, the embryonic material created in stage one will be discarded.

**Stage two** – your sperm will also be used to create embryos with donor eggs. The nuclear genetic material will be removed, discarded, and replaced with the nuclear genetic material from the intended mother and your sperm from the embryos created in stage one, above. These new embryos will be used in the treatment of others (embryo transfer).

If your sperm is used for both stages of the PNT process you will be genetically related to the child in the same way as if your sperm is used for IVF.

### What do I need to know before filling in this form?

Before you fill in this form, you should complete the 'Donor information form'.

Make sure that your clinic has given you all the relevant information you need to make fully informed decisions. This includes:

- information about:
  - the different options set out in this form
  - the implications of giving your consent
  - the consequences of withdrawing this consent, and

For clinic use only (optional)

MD inc PNT (gender-neutral): version 1; 3 April 2017

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HFEA centre reference

Other relevant forms

Date sperm were placed in storage

D	D	M	M	Y	Y
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Date sperm can remain in storage until

D	D	M	M	Y	Y
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Donor number



- how you can make changes to, or withdraw your consent.
- an opportunity to have counselling.

If you are unsure, or think that you have not been given all of this information, please speak to your clinic. There is a declaration at the end of this form which you must sign to confirm you have received this information before filling in this form. If you haven't your consent may be invalid.

If you are unable to complete this form because of physical illness, injury or disability you may direct someone else to complete and sign it for you.

### Why do I have to fill in this form?

By law, you need to give your written consent if you want your sperm, or embryos created with your sperm, to be used or stored (for example, for in vitro fertilisation (IVF) treatment).

If you are storing your sperm or embryos, you must also state in writing how long you consent to them remaining in storage.

### Why are there questions about using my sperm for training purposes?

There may be some sperm or embryos left after treatment. This form allows you to consent to donate sperm or embryos for training purposes, helping embryologists to learn about, and practice, IVF techniques.

### What if I want to donate my sperm for research?

Sperm can also be donated for research purposes, helping to increase knowledge about diseases and serious illnesses and potentially develop new treatments. This form only allows you to consent to donate sperm for the treatment of others or for training purposes.

Your clinic can give you more information about donating for research and provide you with the relevant consent form(s).

### What happens to my sperm or embryos if I die?

By consenting to donate your sperm or embryos, you are also agreeing to them being used and stored if you were to die or lose the ability to decide for yourself (become mentally incapacitated). If you do not want your sperm or embryos to be used for the purposes outlined in this form if this were to happen, you can state this as a restriction (at section 2.5 of this form). You may also state here that you only want your sperm or embryos to be donated in the event of your death.

Please note that the clinic can only act on these wishes if they are informed about your death or mental incapacity.

**When filling in this form, make sure you sign the declaration on every page to confirm that you have read the page and fully agree with the consent and information given. When you have completed the form you may request a copy of it from your clinic.**

Donor number

## 1. About you

First name(s)

Surname

Date of birth

D	D	M	M	Y	Y
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NHS/CHI/HCN/passport number (please circle)

## 2. About your sperm donation

### 2.1. Do you consent to your sperm being used for the treatment of others, without the creation of embryos outside the body, ie, using artificial insemination?

Examples of artificial insemination include intrauterine insemination (IUI) or gamete intrafallopian transfer (GIFT), a technique which a small number of clinics use.

Yes  No

### 2.2. Do you consent to your sperm being used to create embryos outside the body (eg, through IVF treatment) and for these embryos to be used for the treatment of others?

Yes  No

### 2.3. Do you consent to your sperm being used to create embryos outside the body (eg, through IVF treatment), for those embryos to undergo the PNT process (both stages one and two outlined above) and for resulting embryos (containing your nuclear genetic material) to be used for the treatment of others?

Yes  No

### 2.4. How many families may have children using your donated sperm?

The maximum number is 10 families. This is to minimise the possibility of two children from the same donor having a relationship with each other without knowing they are genetically related. It is also based on the perceived interests of donor-conceived people and their parents in maintaining a relatively small number of siblings. Consenting to 10 families will help the greatest number of families and maximise the potential of your donation. You should think about how many families you are comfortable donating to and the long-term implications of donation.

families may have children using my donated sperm.

Page declaration signature

Date

D	D	M	M	Y	Y
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Donor number

**2.5.** Do you have any restrictions that you would like to apply to any of your answers to 2.1, 2.2, and 2.3 above? You may want to put restrictions on who your sperm or embryos are used by, eg, a specified named recipient.

Yes - specify your restrictions below then continue to section 3.

No - go to section 3.

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### 3. Using sperm and embryos in training

**3.1.** Do you consent to your sperm being used for training purposes?

Yes  No

**3.2.** Do you consent to your embryos (already created outside the body with your sperm) being used for training purposes?

Yes  No

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### 4. Storing sperm and embryos

Sperm donated for the treatment of others needs to be stored.

**4.1.** Do you consent to your sperm being stored?

Yes  No

**4.2.** Do you consent to embryos (created outside the body with your sperm) being stored? Only complete this section if you answered yes to section 2.2 or 2.3. Please note that embryos can only be stored if the egg provider has also given consent.

Yes  No

If you have answered no to both 4.1 and 4.2, sign the page declaration on this page and then go to section five.

If you have answered yes to 4.1 or 4.2, or both, then sign the page declaration on this page and continue to the next page.

Page declaration signature

Date

<input type="text"/>					
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Donor number

### Sperm and embryo storage periods

In this section you must state how long you consent to your sperm and/or embryos being stored for. You may want to think about how far in the future you want others to use your stored sperm and embryos – ask your clinic if you are unsure.

You can store for any period up to 10 years but in some cases where you, your partner, or the person to whom your sperm and embryos have been allocated, is prematurely infertile, or likely to become prematurely infertile, you may store for longer, up to 55 years.

A medical practitioner will need to certify in writing that the medical criteria for premature infertility have been met for storage to continue for more than 10 years. When the criteria have been met, the storage period will be extended by 10 years from the date the criteria are met.

The storage period can then be extended by further 10 year periods (up to a maximum of 55 years) at any time within each extended storage period if it is shown that the criteria continue to be met. For more information about this, please ask your clinic.

**Once your sperm or embryos have been allocated to someone else's treatment, the patient (together with the clinic) will determine how long the sperm and embryos are stored for within the boundaries of what you have consented to in this form.**

#### 4.3. For how long do you consent to your sperm being stored? Only complete this section if you answered yes to 4.1.

10 years  55 years

A specific period (up to 55 years). Specify number of years

#### 4.4. For how long do you consent to embryos (created with your sperm) being stored? Only complete this section if you answered yes to section 4.2. Please note that the egg provider also has to give their consent to storage.

10 years  55 years

A specific period (up to 55 years). Specify number of years

The consent period will start from the date of storage. Remember you can always change the time period you consent to by completing this form again and specifying the new total time period you would like your sperm and embryos to be stored for.

For example, if you consented to five years' storage on the original form and wish to consent for a further five years (10 years in total), you would complete another copy of this form but tick the box for 10 years. This second form would supersede the first form you completed.

Page declaration signature

Date

D	D	M	M	Y	Y
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Donor number

## 5. Declaration

Please sign and date the declaration

- I declare that I am the person named in section one of this form.
- I declare that:
  - before I completed this form, I was given information about the different options set out in this form, and I was given an opportunity to have counselling
  - the implications of giving my consent, and the consequences of withdrawing this consent, have been fully explained to me, and
  - I understand that I can make changes to, or withdraw, my consent at any point until the sperm or embryos have been transferred, used in training, or have been allowed to perish.
- I declare that the information I have given on this form is correct and complete.
- I understand that information on this form may be processed and shared for the purposes of, and in connection with, the conduct of licensable activities under the Human Fertilisation and Embryology Act 1990 (as amended) in accordance with the provisions of that act.

Your signature

Date

## If signing at the direction of the person consenting

If you have completed this form at the direction of the person consenting (because they are unable to sign for themselves due to physical illness, injury or disability), you must sign and date below. There must also be a witness confirming that the person consenting is present when you sign the form.

I declare that the person named in section one of this form is present at the time of signing this form and I am signing it in accordance with their direction.

Representative's name

Representative's signature

Relationship to person consenting

Date

Witness's name

Witness's signature

Date