UZ LEUVEN | GYNAECOLOGIE EN VERLOSKUNDE
Leuvens universitair fertiliteitscentrum

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AGREEMENT ON IVF (IN VITRO FERTILISATION) - ICSI (INTRACYTOPLASMIC SPERM INJECTION) WITH EMBRYO TRANSFER

Between Leuven university fertility centre,
UZ Leuven,
represented by
Prof. Dr. Karen Peeraer

hereinafter 'the LUFC', on the one hand,

and Ms .....
born on ...../...../.....
Partner .....
born on ...../...../.....
residing at .....
.....

hereinafter 'the prospective parent(s)', on the other hand,

the following has been agreed:

- The prospective parent(s) gives (give) their consent to the LUFC for vitro fertilisation treatment with egg aspiration and embryo transfer, with possible application of assisted fertilisation (IVF or ICSI) (hereinafter referred to as 'the Treatment').
- The prospective parent(s) declares (declare) that the possible side-effects of the Treatment were discussed with them. They include fertilisation failure with IVF (<10%), fertilisation failure with ICSI (<3%), infection (<0.3%), intra-abdominal bleeding (<0.35%), moderate ovarian hyperstimulation syndrome (<6%), severe ovarian hyperstimulation syndrome (<2%).
- The prospective parent(s) declares (declare) that the advantages and disadvantages of IVF and ICSI were properly discussed with them and they are aware that:
  - In a conventional IVF procedure, eggs and sperm are brought together and fertilisation occurs spontaneously.
  - In ICSI, a single sperm cell is inserted into each egg under a microscope. It is a technique that is often used in cases of severe male infertility where the chances of fertilising the eggs with a conventional IVF procedure are very small. The ICSI procedure has been used for more than 25 years. According to current scientific insights there is a slightly increased risk of chromosomal abnormalities and a potentially increased risk of congenital abnormalities. Detailed ultrasound testing is recommended around the 12th and 20th week of pregnancy and a prenatal foetal chromosomal analysis to detect chromosomal abnormalities. This can be done by means of chorionic villus sampling, amniocentesis or a NIP test.
  - There is always a possibility that infertility may be caused by a hereditary defect. This defect may be transmitted to any children when ICSI is used.

The prospective parent(s) declares (declare) they consent with:

- ☐ **an IVF procedure and/or ICSI procedure**
- ☐ **an IVF procedure. The prospective parent(s) esplicity object to an ICSI procedure.**

- The prospective parent(s) is (are) aware that during the Treatment, eggs/sperm will be collected and embryos will be created.

  In certain cases, the human tissue produced during the Treatment cannot be used for the Treatment, for example in case of immature, unfertilised, or abnormally fertilised eggs, or embryos of insufficient quality. In addition, during the Treatment, only a part of the sperm sample will be used and the residual materal will be destroyed. Subject to your consent this residual material may be used for training of personnel of the IVF laboratory, validation of procedures, innovation and optimisation of laboratory procedures. This residual material will not leave the IVF laboratory of the LUFC, in contrast with donation of material for scientific research, for which you need to consent using another form (see 'Informed Consent scientific research with gametes and/or embryos not for personal use').

The prospective parent(s) declares (declare):

- ☐ **They consent to the donation of residual material.**
- ☐ **They do not consent to the donation of residual material.**

for validation of procedures, training of IVF lab personnel and quality checks in the IVF laboratory.

- The costs for the laboratory phase of the Treatment are covered by the mandatory Belgian health insurance provided that certain criteria are fulfilled and subject to the approval of the consultant physician of the prospective parents' health insurance. Otherwise, the prospective(s) parent(s) will have to pay the laboratory costs. For Belgian patients this amounts to 1,557.54 euros, for non-Belgian patients 2,358.05 euros (1,557.54 euros plus 800.51 euros for the 'supplementary medical record fee') on 1 January 2018. This amount will be adjusted on the 1st of January each year in line with the health index of December of the previous year. (http://statbel.fgov.be/nl/statistieken/cijfers/economie/consumptieprijzen/ gezondheidsindex)

Drawn up in duplicate in Leuven on ✎……../……../……., whereby one copy is for the LUFC, the other for the prospective parent(s).

	Name Ms	Name partner
	……	……
	……	……
	born on ……. / ……/…….	born on ……/……/…….
Prof. Dr. Karen Peeraer Administrator tissue bank LUFC	✎ read and approved signature Ms	✎ read and approved signature partner

Please complete and sign this agreement and return it to LUFC, 'contractenadministratie', UZ Leuven, Herestraat 49, 3000 Leuven or contractenLUFC@uzleuven.be.