



Saint Mary's Managed Clinical Service Division of Gynaecology

PATIENT INFORMATION LEAFLET

INFORMATION FOR PATIENTS CONSIDERING DONATING THEIR EMBRYOS

This leaflet is aimed at patients who wish to donate any embryos remaining after the completion of their own treatment, to other patients.

We would like to thank you for considering donating your embryos for the treatment of other patients. We really appreciate this as there are limited embryos available.

Firstly, to become an embryo donor, we will need to check that you both fulfil certain criteria which are stipulated in law to establish your suitability.

EMBRYO DONATION CRITERIA

AGE LIMIT

For embryo donation, the egg provider should be aged between 18 and 35 (this is a Human Fertilisation and Embryology Authority regulation - HFEA), and the sperm provider between 18 and 45 at the time the embryos were produced. In exceptional circumstances, we may be able to accept a donation outside this age bracket.

SCREENING

We undertake certain screening tests to reduce the risks to any resultant child. These will include blood and urine samples for:

- HIV 1 & 2
- Hepatitis B
- Syphilis
- Hepatitis C
- Human T cell Lymphotropic Viruses (HTLV 1 & 2)
- Cytomegalovirus (CMV)
- Chlamydia & Gonorrhea
- Karyotype (your genetic make-up)
- Cystic Fibrosis (to see if you are a carrier)

Other tests may be required depending on a potential donor's ethnic group. We will discuss this with you and inform you about which tests we require before screening.

CONSENT

It is a legal requirement that we obtain written consent from both of you to be able to donate your embryos. You will both be required to sign individual consent forms on the electronic platform fertility consents used by our department.

COUNSELLING

Implication counselling is mandatory for those who wish to donate their embryos and takes place with one of our fully trained counsellors.

During the counselling session, you will have the opportunity to discuss the implications of donating your embryos for yourselves, the recipients, and any existing children in your family.

We will also ask you to register as donors and to complete a donor information form. You will have the option of providing non–identifying information about yourself, which will be passed on to the recipients and any resulting child. This may include a description of yourself as a person and your reasons for donating. You may also wish to write a goodwill message for anyone born as a result of your donation.

REGISTRATION AND ANONYMITY

You should be aware that donors are no longer able to remain anonymous due to a change in the law.

From the age of 16, a donor-conceived child is entitled to access non-identifying information about you, such as your height, hair colour and hobbies.

From the age of 18, any child born as a result of your donation can apply for identifying information about you such as your name, date of birth and last known address.

These details will be held on a register at the (HFEA) and are accessible to a child born of donation from their 18th birthday.

FREQUENTLY ASKED QUESTIONS

WHAT WILL THE EMBRYO RECIPIENTS BE TOLD ABOUT US?

Only non-identifying information can be given. Physical characteristics such as height, hair colour and eye colour are given.

The recipients may also be given other non-identifying information about you, such as hobbies, interests, and other non-identifying information you provide on the donor information form.

CAN WE FIND OUT WHAT HAPPENED TO OUR EMBRYOS?

You can request to be informed whether a child has been born as a result of your donation. You can be told the sex of the child and the year of birth.

Please be aware we may be able to treat more than one patient with your embryos depending on how many you have in storage and your wishes. Current legislation in the UK means that there is a 10-family limit for donors.

This will be discussed in the clinic and agreed upon within your consent forms.

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CAN WE CHANGE OUR MINDS AFTER WE HAVE DECIDED TO DONATE OUR EMBRYOS?

You can change or withdraw your consent at any time up to the point at which the embryos are used in treatment. This would require signing a further form in the presence of a clinician.

CAN DONORS BE SUED FOR ANY REASON?

A donor-conceived person born with an abnormality could sue their donor for damages if it is proven that the donor had not told the clinic relevant facts about their or their family's medical history when they donated.

Therefore, it is important to tell us of any inherited disabilities, or physical or mental illnesses that affect you or anyone in your family.

Once again thank you very much for considering donating your embryos to our department.

LEGAL PARENTHOOD AFTER EMBRYO DONATION

THE CHILDS MOTHER

The woman who gives birth is always considered to be the child's legal mother. This is the case, even if the treatment involved the use of donated eggs or embryos. The law only recognises one person as the legal mother of a child.

THE CHILDS FATHER/SECOND PARENT

Where the woman who gives birth is married or in a civil partnership, her husband/wife will be the legal father/ parent of the child, unless it can be shown that he/she did not consent to their treatment.

When the woman giving birth is not married or in a civil partnership, the legal father or second parent of the child will be the person who is named on the 'consent to parenthood' forms. The forms are completed by the couple receiving your donated embryos prior to their treatment. Both the named person and the woman giving birth must consent to the second parent being recognised as the legal parent of the child.

TREATMENT OF A SINGLE WOMAN

If your donated embryo(s) is/are used in the treatment of a single woman, the woman who gives birth will be the legal mother of any resulting child.

However, the law is not as explicit in such cases about who might be the legal father and there is a clear legal risk that the man whose sperm was used in the creation of the embryo may be considered the father.

HFEA, therefore, advises that any man intending to donate embryos to a single woman should seek legal advice before doing so. In particular, they state that you should be satisfied with any potential to be recognised in law as the father of any child born if the embryo is donated to a single woman who does not have a husband or civil partner or has not entered into a parenthood agreement (a person who agrees to accept legal parenthood but with whom they are not in an intimate relationship) with another person.

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HFEA suggest that one way of avoiding this potential uncertainty is for a couple donating embryos (or a man donating embryos created during treatment with his partner) to consider placing a condition on the use of the donated embryo. The couple could, for example, state that the embryo should only go to a woman who is in a legally recognised relationship that gives legal parenthood to her husband or civil partner or who has consented to another person being the second parent to her children.

FURTHER INFORMATION

For current information surrounding donating your embryos please visit:

https://www.hfea.gov.uk/donation/donors/donating-your-embryos/

You may also want to contact the Donor Conception Network, a self-help network for families created with the help of donated eggs, sperm or embryos: www.dcnetwork.org

CONTACT DETAILS



0161 276 6000



https://mft.nhs.uk/saint-marys/services/gynaecology/reproductive-medicine/

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