

OFFICE USE ONLY

Name: _____

Date of birth: . . .

Patient number (if known): _____

Received by: _____ Date: . . .

Consent for disposal of sperm

I, (First Name): _____ (Surname): _____

Date of Birth: . . . Phone Number: _____

Address: _____ Postcode: _____

Email: _____ Partners name: _____

Consent to the immediate disposal of all sperm that are presently in cryostorage at Genea. This consent will mean that none of my sperm will remain at Genea.

Please sign below and attach a photocopy of current photo ID which shows your signature (e.g. driver's licence*)

*You may cover the driver's licence number but photograph and signature must not be obscured

Signature: _____ Date: . . .

Would you like your discard confirmation letter sent by: Email Mail Not required

Would you like us to notify your Doctor after sperm disposal? Yes No

Please contact Genea Andrology on (02) 9229 6445 for any further information on your samples.

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Embryology Admin

Site: _____ Tank: _____ Number of Batches: _____

BBS Updated/Signatures check by: _____ Date: . . .

Account adjusted by: _____ Date: . . .

Additional Information: _____

Andrology Lab ID Check: _____ Date: . . .

LRN/Accession(s): _____

Sample obtained from tank (details checked: name, freeze date, LRN/Accession): ID _____

Discarded by: _____ Witnessed by: _____ Date: . . .

Discard confirmation letter sent: Patient: _____ Doctor: _____

Updated BBS: _____ Updated Navision: _____ (regions please email city to update)

Sample Address: _____

OFFICE USE ONLY	
Name:	_____
Date of birth:	_____ . _____ . _____
Patient number (if known):	_____
Received by:	_____ Date: _____ . _____ . _____

OFFICE USE ONLY (CONT)	
Guthrie card disposal criteria	
No Guthrie card:	Transport TESE Guthrie Card Refusal
Guthrie card:	YES NO
Is the patient and/or partner:	
<ul style="list-style-type: none"> • Currently using the frozen sample(s) pertaining to the Guthrie card(s) in question? • Successful in any cycle, with the use of the batch of frozen sperm discarded with consent, in the creation of an embryo which is currently stored at Genea? • Successful in any cycle, with the use of the batch of frozen sperm discarded with consent, resulting in an ongoing pregnancy/live birth? 	
If the answer to ANY question is YES, Guthrie card(s) to remain in storage.	
Other reason for retaining Guthrie card: _____	
Guthrie card disposal criteria met (all answers are NO)	
Scientist ID: _____	Witness ID: _____ Date: _____ . _____ . _____
Guthrie card(s) ID checked/discarded	
Card total: _____	Card Location: Kent St Other: _____
Scientist ID: _____	Witness ID: _____ Date: _____ . _____ . _____
Notes: _____	

