

Sperm Donors: initial questionnaire

Thank you for considering becoming a Sperm Donor at Cambridge IVF. To be a sperm donor you need to be between the ages of 18 and 45 years old and have no serious medical conditions.

You can visit our website to find more information www.cambridge-ivf.org.uk/services/Donor-sperm/.

Please complete this questionnaire and send via email to: cuh.civf.spermdonation@nhs.net

1. How old are you? Please state below

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2. Please state below which country you are living in at the moment

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3. Which race/ethnicity best describes you? Please choose only one

White

Asian

Black

Mixed/Any Other Ethnicity (please state)

4. Are you adopted or donor conceived? Please state below

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5. Do you have any medical conditions? If yes, please state below

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6. Has any member of your family (biological parents, siblings, grandparents, children) been diagnosed with any serious medical condition? E.g. cancer, mental illness, genetic disorder, diabetes. If yes, please state below

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7. Are you taking any medication? If yes, please state below

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8. Are you taking any recreational drugs? If yes, please state below

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9. Do you (or your partner) currently have multiple sexual partners, or intend to have multiple sexual partners during the sperm donation period?

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10. Have you (or your partner) had any history of previous Sexually Transmitted Infections (STIs)? If yes, please state below

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11. Do you smoke? If yes, please state how many cigarettes per day

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12. Have you ever been a smoker in the past? If yes, please state when, and for how long.

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13. Do you drink alcohol? If yes, please state how many units per week

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14. Do you agree to provide a blood and semen sample (or more than one), and undergo a physical examination at Cambridge IVF to assess your suitability as a donor? Note: the semen sample must be produced by masturbation and at our dedicated facility.

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15. Have you ever donated sperm elsewhere? If yes, where did you donate and when?

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16. In a few sentences, please state your motivations/reasons for donating sperm to others

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17. I declare that I have answered these questions honestly and to the best of my knowledge

- Yes
- No

Thank you for taking the time to complete this questionnaire. Please provide your personal details below. Please rest assured, all your answers and personal details will be kept strictly confidential.

Title:

Full Legal Name:

Preferred Name:

Date of Birth:

Home Address:

Postcode:

Country:

NHS Number:

Email Address:

Phone Number:

Please send the completed questionnaire via email to:
cuh.civf.spermdonation@nhs.net

We will contact you within 3 working days. If you meet our essential criteria to become a donor, you will be invited for a telephone appointment. If the essential criteria is not met, we will unfortunately not be able to consider your application any further.

Donation is purely on a voluntary basis and no payment, other than compensation for reasonable expenses incurred, is allowed to be made to individuals who kindly decide to donate.