



Pacific
Fertility Center
Los Angeles

Modern Guide to Family Building





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considering
parenthood.*

Modern Guide to Family Building

PACIFIC FERTILITY CENTER LOS ANGELES, 2020

Many couples can't wait to start a family and begin a new milestone. Yet, the [Center for Disease and Control Prevention](#) found that one in eight relationships face heartache because they are unable to conceive. This results in millions of couples and single intended parents, especially members of the LGBTQIA+ community, dreaming about having children without the ability to do so on their own.

For intended parents (or IPs) not quite sure where to begin your family building journey, you've come to the right place. Your dreams can become reality, and there are many different options for couples and individuals considering parenthood.

Fortunately, Assisted Reproductive Technology (ART), such as In Vitro Fertilization (IVF), can lead intended parents toward their dream of bringing new life into the world and creating a lifelong bond with their child.

However, the process of going through ART can be overwhelming and intimidating. Questions abound. Difficult choices must be made. Where do you start? Should you freeze eggs or embryos? How do you pick the right egg donor? How do you choose a surrogate? Intended parents (IPs) face two fears dominating their every discussion: will it work, and can we afford it?

Even after deciding to pursue ART, how do intended parents navigate the legal, medical, and financial landscapes? What recourse do LGBTQ+ members have? What about matching the ethnic backgrounds of donors? Above all, which is the best clinic or doctor to guide IPs through what can be an emotional, expensive, and complex journey?

In this guide, you will learn about:

- [Causes of female and male infertility](#)
- [Family building options for straight and same-sex couples](#)
- [How to identify the right egg donor and surrogate](#)
- [Financial considerations when starting your fertility journey](#)
- [Next steps for building your family](#)

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Understanding The Fertility Journey

...when experiencing problems with infertility, it's crucial to seek a fertility specialist who provides compassionate care and outlines the different ART options that are available for you .

Everyone's fertility journey, pregnancy, labor, and delivery are unique. That's why there is no one-size-fits-all fertility treatment or plan for the path toward parenthood.

For this reason, when experiencing problems with infertility, it's crucial to seek a fertility specialist who provides compassionate care and outlines the different ART options that are available for you .

According to the Center for Disease and Control Prevention, about 12% of women between 15 and 44 struggle with infertility, and almost 9% of men aged 25 to 44 report seeing a doctor for advice, testing, or treatment for infertility during their lifetime.

Many people struggle with infertility and seek help to become pregnant. It's often possible to identify the source of infertility and work around this. And for same-sex couples that can't conceive on their own, there are many ART procedures that can bring your new family member into this world.

However, when understanding the unique obstacles standing in the way of your journey toward parenthood, everyone will have a different treatment path.

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Getting Started with Assisted Reproductive Technology

Learning that you may be struggling with fertility issues can evoke many emotions and a sense of loss. However, there are many fertility options available for you. Rest assured that many couples and individuals of all backgrounds that struggle with infertility go on to grow the family they desire.

The first step to confronting infertility in a healthy manner is first understanding it for what it is.

For same-sex couples unsure of how to proceed, selecting a surrogate and egg or sperm donor will be important to ensure your procedures go smoothly. There are men and women around the world who are carefully screened and vetted for these positions, so your fertility journey will be an experience you share with your surrogate and partner. Trust and communication with your third party surrogate or donor is a challenge many experience when using a surrogate, but your fertility specialists and doctors will guide you throughout the process.

Before we get into the different paths toward parenthood for different couples (and individuals), let's cover some of the basic definitions and language around your journey toward parents.

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DEFINITIONS OF TERMS

Fertility lingo to know

Assisted Reproductive Technology (ART)

ART encompasses fertility treatments that require assisted monitoring and manipulation of embryos for successful implantation and healthy pregnancy.

Conventional IVF

This three-week treatment is the most effective ART and entails using fertility medications to stimulate egg production for a successful egg retrieval procedure. Once retrieved, the eggs are manually fertilized by sperm to create embryos. The embryo(s) are then placed within the intended mother's uterus to achieve pregnancy.

Mini IVF

A form of IVF that requires less fertility medication and stimulates smaller egg production. This is another highly popular treatment due to its reduced cost. However, mini IVF is not as effective as conventional IVF.

Reciprocal IVF

This is a variation of IVF that caters to lesbian or trans male couples. The embryos are created from one partner's eggs and a sperm donation, while the other partner receives the embryo transfer and carries the pregnancy. This allows one partner the opportunity to be a biological parent, while the other partner can bond with the baby through pregnancy.

Intracytoplasmic Sperm Injection (ICSI)

ICSI is used in most modern IVF cycles, and improves success rates. It is a procedure that helps sperm penetrate an egg if there are problems with the egg's outer layer or sperm mobility. This lab procedure works by manually injecting one sperm into the egg's center during IVF before it is placed within the woman's uterus.

Sperm Donor

Using a sperm donation to become pregnant is a great solution for individuals or couples experiencing male infertility, whether it be low sperm production, count, or mobility. Sperm donations are also required for single women or lesbian couples looking to become pregnant with their biological child.

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Intended Parent(s)
(IPs)

Refers to any couple or individual who is experiencing infertility, has health problems that would present a risk during pregnancy, or is without the means to become a parent, such as a single individual or same-sex couple. Intended parents may be attempting to become pregnant naturally, through IVF, or by a different form of treatment.

Gestational Surrogate

A gestational surrogate is a woman who has had previous successful pregnancies and has undergone thorough screenings to carry another couple's embryo through pregnancy and delivery. Surrogates are highly generous and altruistic women who strive to help intended parents have their biological child.

Egg Donor

The eggs are retrieved from a donor, as opposed to being from the patient or couple looking to become a parent(s). Once the egg retrieval process is complete, the embryo(s) will be created and placed within the patient's or surrogate's uterus, depending on the couple's needs from the service.

Embryos

The creation of an unborn human offspring still in early development made from the combined female egg and male sperm. This fertilized egg remains an embryo from the immediate conception until 8 weeks when it is then termed as a fetus.

Intrauterine
insemination (IUI)

An affordable fertility treatment where the most healthy and mobile sperm are evaluated and separated from seminal fluid, which provides a more concentrated transfer. The sperm is artificially inseminated into the intended mother's uterus, similarly to IVF, to facilitate an easier conception. This procedure can be combined with fertility medications and is an ideal solution to male infertility, infertility with no apparent cause, or problems with ovulation. The success rates are lower than IVF.

Third- Party

This refers to the use of eggs, sperm, embryos or a uterus provided by a third person(s) to support individuals as they become parents. This is often due to male or female infertility factors in the couple or individual hoping for pregnancy.

Now that you're a pro at fertility jargon, you're ready to explore your infertility treatment options. Let's jump into the different causes of male and female infertility, and learn about the paths available for intended parents.

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Understanding Infertility

In medical terms, infertility refers to the inability to conceive after twelve or more months of regular, unprotected sexual intercourse.

Infertility in men and women is highly common, with as many as one in eight couples experiencing trouble.

If after a year of trying to conceive without success for a couple under the age of 35, or 6 months of trying if 35 or over, it's time to consider consulting with a fertility specialist.

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Causes of Female Infertility

Female infertility can stem from conditions or abnormalities affecting the female reproductive organs, or from hormone imbalances that affect the menstrual cycle. However, the two can be heavily linked.

Women are born with an initial supply of between one to two million eggs in their ovaries. Over the woman's reproductive years, she releases unfertilized eggs during every menstrual cycle, until her egg supply slowly decreases.

Women need functioning ovaries, fallopian tubes, and a uterus to become pregnant, so some conditions impacting these organs can contribute to female infertility.

While these conditions may be disheartening, many of them are highly manageable and easily diagnosed by fertility specialists, who are also known as reproductive endocrinologists (REs). REs receive years of additional training past OB/GYN level education to accurately diagnose and treat the fertility issue at hand.

When meeting with a fertility specialist, conditions that can be tested and issues that can be discussed include:

- [Endometriosis](#)
- [PCOS \(Polycystic Ovarian Syndrome\)](#)
- [Ovulation problems](#)
- [Repeated miscarriages](#)
- [Abnormalities of the uterus, fallopian tubes, and/or ovaries](#)

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Causes of Male Infertility

Infertility can also stem from male conditions, such as problems with sperm production, function, and mobility, which accounts for up to 40% of all male infertility

Whereas a woman has a finite supply of eggs, a man produces sperm continuously after puberty, which means infertility can arise at different stages throughout their life and they may be candidates for more fertility treatments.

Causes of male infertility or sperm dysfunction include:

- Problems getting or maintaining an erection
- Ejaculation problems
- Groin injury or surgery
- Testicular tumors, cysts, or cancer
- Adult contractions of mumps
- Undescended testicles
- Common illnesses such as diabetes, thyroid disease, or heart disease
- STDs that can cause infertility if left untreated, such as chlamydia or gonorrhea

However, it's also common for a low sperm count to simply be the result of poor health or lifestyle. To prevent or in some cases correct this low sperm count, it's recommended that men follow these guidelines: :

- Abstain from drugs and smoking
- Limit or abstain from alcohol
- Talk to your doctor about medications that can impact sperm count
- Maintain a healthy weight
- Limit exposure to high-stress environments
- Avoid pesticides, heavy metals, and other toxins
- Avoid heat (jacuzzis, saunas, hot tubs)

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Using Fertility Medications

During IVF, it's common for fertility doctors to prescribe various [fertility medications](#) to their female patients as part of the treatment process.

These fertility drugs are meant to trigger the release of various hormones to regulate ovulation. By doing this, women are in essence made more fertile during the procedure, which improves the chances of pregnancy.

Common fertility drugs that may be prescribed include Follicle-Stimulating Hormones (FSH), Human Menopausal Gonadotropin (hMG), Human Chorionic Gonadotropin (hCG), and Clomid or Serophene (Clomiphene).

The exact medications and types of drugs required for your treatment will be determined during the consultation process. Keep in mind that some of these medications can be taken orally while others will be administered through injections. All fertility visits must also be completed on schedule to ensure optimal results. Unfortunately, the improper dosage or administration of a fertility drug can result in a failed IVF cycle or reduced potential for a successful pregnancy. Because of this, it's important to consult with doctors and IVF clinics that have proven track records of success.

No matter the medications a patient requires, their effectiveness will require precise timing based on a patient's ovulation cycle. As difficult as it may be, in order to see the best results, patients should take their fertility drugs as directed by their fertility specialist. This is a difficult process, and you're not going through this alone.

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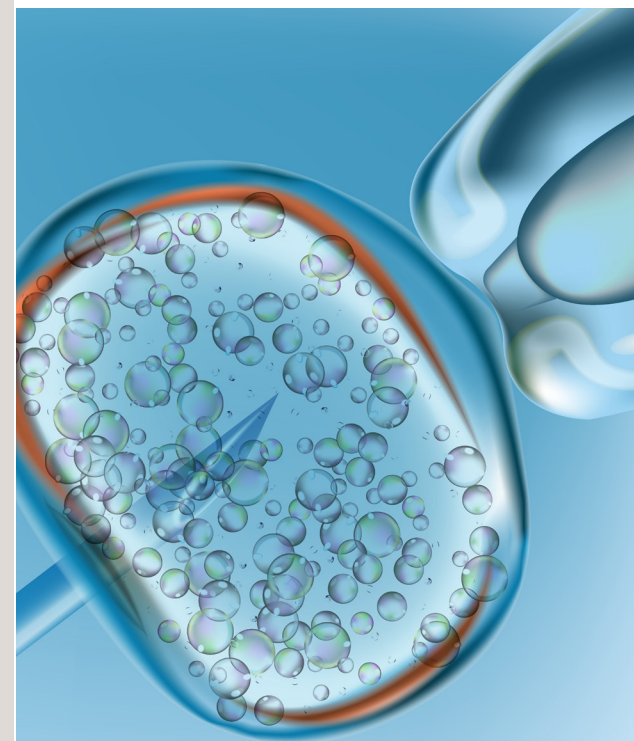
FAMILY BUILDING OPTIONS

Assisted Reproductive Technology (ART)

Advanced Assitive Reproductive Technologies offer new tools and approaches to increase the likelihood of a healthy pregnancy. Because every individual facing infertility has a different set of obstacles and roadblocks, your fertility specialist will recommend the best path forward for you.

Throughout the 20th century, many important realizations and medical discoveries led to modern-day ART. The Center for Disease Control and Prevention reports that since the first successful birth through IVF in 1978, In Vitro Fertilization has played a role in 99% of ART during 2015 alone.

As the most effective path toward pregnancy, IVF can play an important part in your journey toward fertility. However, many different methods of insemination and pregnancy also prove to be effective.



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Understanding In Vitro Fertilization (IVF)

[In Vitro Fertilization \(IVF\)](#) success rates have greatly improved throughout the years. In standard IVF, harvested eggs are fertilized with sperm in a fertility clinic, and the resulting embryos are transferred to the uterus of the patient.

For some individuals, a gestational surrogate is also part of the process. For many, specifically LGBTQIA+ patients, IVF can be accomplished with the assistance of egg donation, a sperm donor, or in some cases, donated embryos. Female patients can undergo artificial insemination, IVF, or use a third-party surrogate and egg donor.



Candidates for IVF

IVF has helped many individuals with fertility issues successfully conceive, and may be right for you if you have or experience:

- Damaged, blocked, or removed fallopian tubes
- Ovulation disorders, uterine fibroids, or premature ovarian failure
- Decreased sperm count or decreased sperm motility
- Unexplained infertility

When to use IVF as Infertility Treatment

The Society for Assisted Reproductive Technology reports that approximately [99 percent of ART cycles performed include IVF](#). Since the introduction of IVF into mainstream medicine in the 1980s, nearly 5 million babies have been born.

However, it's also important to understand that IVF does not guarantee a pregnancy. Some patients require multiple IVF cycles to achieve a successful pregnancy, while others, unfortunately, may never achieve it.

[Good candidates for IVF](#) include:

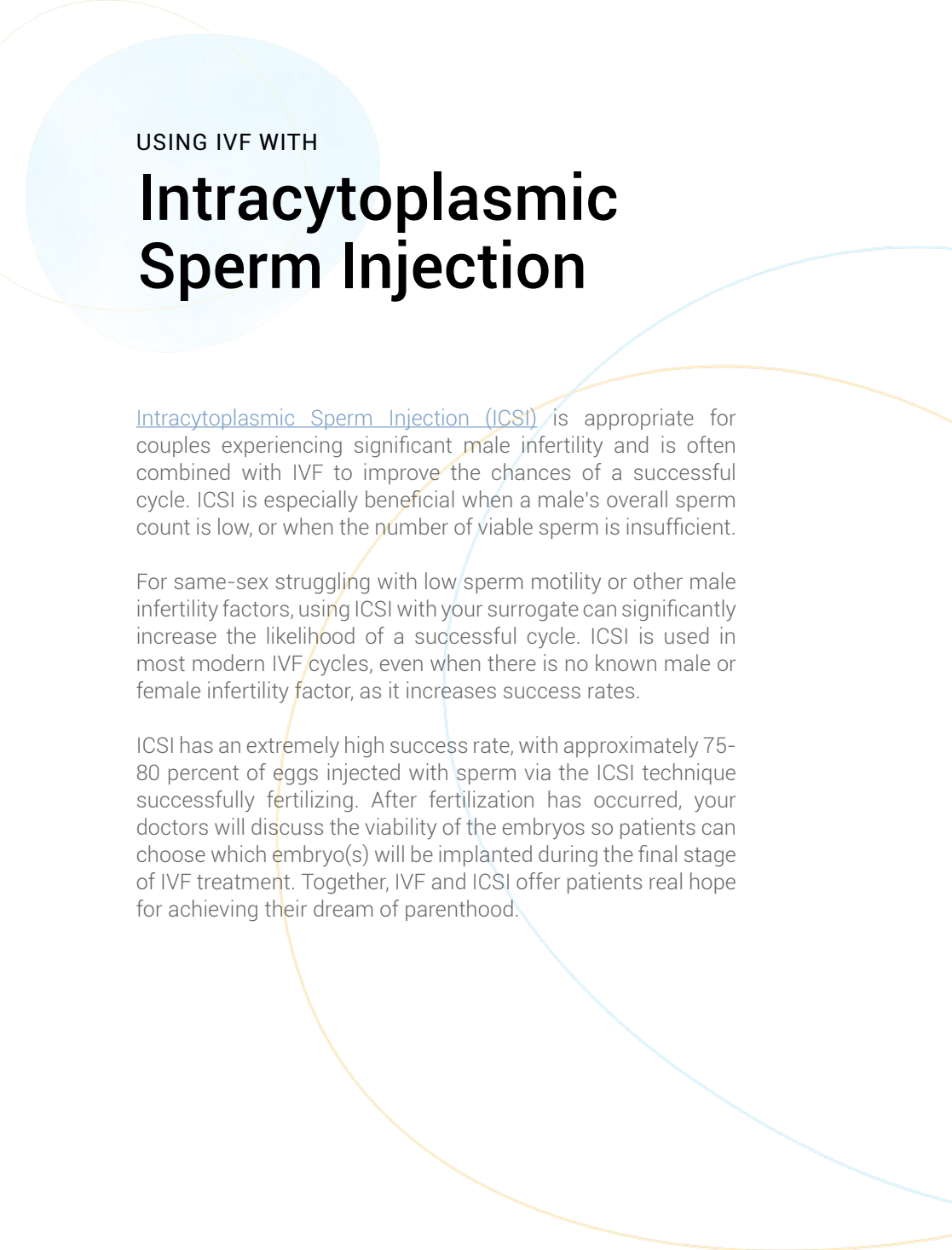
- Anyone who has been trying to conceive for 6 months without success
- Women with [blocked fallopian tubes](#)
- Women with an infertility disorder ([Polycystic Ovarian Syndrome](#))
- Women with irregular cycles of ovulation
- Male factor infertility

IVF might not be as effective for:

- Women over 37 years of age (if you are, you must act quickly for IVF or fertility preservation)
- Women with trouble producing healthy eggs
- Women with no interest in getting an outside donor

Because IVF is unique to each patient's situation, there is no "one-size-fits-all" approach to fertilization, and fertility specialists can help you navigate all its forms for a personalized treatment that is right for you.

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USING IVF WITH

Intracytoplasmic Sperm Injection

[Intracytoplasmic Sperm Injection \(ICSI\)](#) is appropriate for couples experiencing significant male infertility and is often combined with IVF to improve the chances of a successful cycle. ICSI is especially beneficial when a male's overall sperm count is low, or when the number of viable sperm is insufficient.

For same-sex struggling with low sperm motility or other male infertility factors, using ICSI with your surrogate can significantly increase the likelihood of a successful cycle. ICSI is used in most modern IVF cycles, even when there is no known male or female infertility factor, as it increases success rates.

ICSI has an extremely high success rate, with approximately 75-80 percent of eggs injected with sperm via the ICSI technique successfully fertilizing. After fertilization has occurred, your doctors will discuss the viability of the embryos so patients can choose which embryo(s) will be implanted during the final stage of IVF treatment. Together, IVF and ICSI offer patients real hope for achieving their dream of parenthood.

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Other fertility options: Intrauterine Insemination (IUI) and Mini IVF

Using IVF, even with ICSI, is not always successful, and can become costly for many intended parents hesitant about the path ahead. Whether you're unsure of the financial commitment or would like to try a less invasive procedure before IVF, there are different options for your needs.

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Mini IVF

Because of its lower costs and potentially broader candidacy, [mini IVF](#) is sometimes used by among patients at Pacific Fertility Center who have had difficulty conceiving on their own. This form of IVF is similar to traditional IVF but uses a reduced amount of fertility medication to stimulate egg production, resulting in fewer eggs being released from the ovaries.

Because this process is often less effective than IVF, many individuals and couples pursue conventional IVF to increase their chances of success.

Mini IVF allows you to avoid daily injections of hormonal medications, which can increase the risk of ovarian hyperstimulation syndrome (OHSS). Mini IVF may also be recommended for patients who have not been successful with other fertility treatments. Many patients who are opposed to traditional IVF treatment for personal or religious reasons may also prefer the low-dosage approach of mini IVF.

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Intrauterine Insemination (IUI)

[Intrauterine insemination \(IUI\)](#) is often performed to address unexplained infertility when couples are otherwise healthy and seem to exhibit no obvious signs of infertility.

Good candidates for IUI are women who are of good health and have had problems conceiving through natural means. Women must have a good ovarian reserve, which refers to quality eggs that are viable and healthy. IUI is also helpful when a man suffers from poor sperm motility and/or low sperm count. Placing sperm closer to the egg boosts the chances of pregnancy. For lesbian couples seeking pregnancy, you can use a known or anonymous sperm donor. Consult with your fertility specialist and doctor to hear about what's best for you.

While gestational surrogacy uses IVF to fertilize an embryo, traditional surrogacy (which is not frequently done anymore) uses IUI to artificially inseminate the surrogate using the intended father's (or donor's) sperm. IUI is less complicated, less expensive, and offers fewer medical procedures than IVF.

Once the IUI procedure has been completed, patients will be asked to wait about two weeks after treatment before they use an at-home pregnancy test and should offer some signs of potential pregnancy. Keep in mind that the at-home test is not an official confirmation of pregnancy. Two weeks after the at-home test, patients will take a blood test to confirm pregnancy.

If a patient does not become pregnant after their first round of IUI, the procedure can be attempted again. Should additional IUI procedures prove ineffective, another fertility treatment option can be considered.



Family Building Resources for LGBTQIA+ Couples

Advances in ART have allowed fertility centers to help LGBTQIA+ couples experience the joys of pregnancy, childbirth, and building a family of their own.

There are many things you and your partner should consider when starting the process of IVF as two men or two women

The factors you'll weigh and assess when trying to set yourself up for the ultimate success include financial investment, embryo selection, and the number of children desired.

Gay male couples and trans women seeking parenthood will need an egg donor, a surrogate, and potentially an embryo or sperm donor. Female patients can undergo artificial insemination, IVF, or use a surrogate. In some cases, patients may also need third-party egg and sperm donors.

Let's cover in-depth the various paths to parenthood for different intersections of identity.

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PARENTHOOD OPTIONS FOR

Lesbian Couples and Trans Men

Lesbian couples and trans men have several options to consider when choosing to build a family together. Do both partners want the experience of carrying a baby?

If so, there are two important decisions to make:

- Which partner will try first?
- How will you choose the sperm you'll use?

Many couples work with a surrogacy and egg donation agency to choose sperm from the same male donor, and each plan to have a child with their eggs throughout their lifetimes. This is a great option for many, as it is the most cost-effective and requires the least amount of medical intervention.

In some cases, one of the partners is not able to carry a baby or would prefer not to carry a baby, but would like to form a genetic connection with the child. One increasingly popular option for lesbian partners wishing to have a child is **reciprocal IVF (also known as partner IVF or co-maternity)**.

In this fertility treatment, one partner provides the eggs and the other partner carries the pregnancy. This is an attractive solution to many couples because it allows both women to be physically involved in the pregnancy, which can facilitate feelings of emotional involvement and connection to pregnancy.

Otherwise, **Traditional IVF is available for lesbian and trans men with a known or unknown sperm donor involved.**

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How Reciprocal IVF differs from Traditional IVF

Once you've decided to use **reciprocal IVF**, the intended parents will begin a process almost identical to standard IVF. Like other forms of reproductive assistance for lesbian couples or trans men, one of the first things to consider is sperm donation.

Once the couple chooses a sperm donor, they will begin a process of synchronizing their menstrual cycles by taking oral contraceptive pills:

- The partner who is donating eggs will also take medications to stimulate egg production.
- The partner who will have the embryo implanted will take medications to help prepare the uterus for implantation.

In simple terms, **one mother carries the fertilized egg of the other mother** so the child will have the genetic makeup of one parent and be carried to term by the other. In this way, each woman gets to experience both childbearing and having a biological connection to each child, and the children themselves are biologically half-siblings.

If both partners in the couple don't require a biological connection to their children, traditional IVF is an option. Delivering a successful conception and pregnancy is a beautiful and exciting experience many couples dream of, and the Pacific Fertility Center of Los Angeles offers LGBTQIA+ patients assistance with every aspect of their quest to form a family.



PARENTHOOD OPTIONS FOR

Gay Couples and Trans Women

Gay men and trans women have a special set of circumstances when preparing to have a child through IVF. When two men are starting the process of IVF, the chances are high that they will each want a biological child

This encourages them to pursue having twins after splitting the egg retrieval and fertilizing half with each partner's sperm. If preferred, the same male couple's sperm can be split between two separate egg donors.

Splitting the egg retrieval **lowers the egg yield per person and will result in fewer embryos per father.** However, this doesn't mean gay couples and trans women aren't having multiple children all the time. With advanced technology and a great donor, you can fulfill your dream of having a child from each intended father or mother.

When undergoing IVF in gay couples or trans women, you will need the following for IVF:

- An egg donor
- A surrogate
- And a sperm donor

If you or your partner struggles with low sperm mobility or other forms of male infertility, you may want to discuss involving a sperm donor. With this in mind, you and your partner should be on track for a happy and healthy pregnancy with IVF and the care of the best fertility clinic.

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Intended Parents' Financial Considerations



Costs of IVF

To make the cost of IVF treatments affordable for all patients, many fertility clinics offer discounted program prices for low-income families. However, at a minimum, patients will have to cover the cost of the IVF treatment cycle. This includes the cost of:

- Ultrasounds
- Blood tests
- The egg retrieval
- Lab fees
- The embryo transfer
- Cryopreservation of viable embryos
- One year of embryo storage fees

Individuals undergoing IVF with third parties should

anticipate spending anywhere from \$25,000 to \$50,000 (excluding surrogate and donor compensation).

The cost of fertility medications is often not included in the cost of the IVF cycle (make sure to clarify this with your clinic to know the true costs!). Depending on the amount of medication required, this can increase the cost of treatment. When undergoing natural IVF, patients do not use any fertility medications during the IVF treatment. This makes natural IVF the most affordable option. However, it is not the right solution for all patients.

Mini IVF requires some use of fertility medications, making it a more moderately priced option.

Finally, traditional IVF uses the highest amounts of medication to encourage the production of more eggs and give you the best chance of getting pregnant, a benefit that does inquire a higher cost.

There are many different paths toward fertility, and your fertility specialist will accommodate you and your needs. Don't let financial worries stop you from proceeding forward with your path toward parenthood, but critically assess if you're ready and prepared for the financial considerations of bringing a new life into this world.

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The Costs of Obtaining an Egg Donor

While introducing a third-party into your fertility journey can be stressful and scary, your support systems and medical staff are there to reassure your worries. Through patience, time and the right resources, individuals seeking an egg donor can achieve a happy, healthy pregnancy delivering your newest family member.

However, it's important to know the process of egg donation can get expensive, costing anywhere from [\\$40,000-\\$65,000](#) from start to finish (including the cost of IVF). As intended parents, it's up to you to cover all the fees associated with the process. However, despite financial concerns and worries surrounding who to pick, your clinic and doctor are there for you every step of the way. They've done this before, and their expertise can help guide you through the complicated uncertainties throughout your path toward parenthood.

Here's a breakdown of what you can expect to pay for an egg donor, and why:

01 Agency Fees

Finding a donor through an egg donation agency offers advantages that you may not have otherwise: access to many donors, background checks, and the option to choose between shared or solo cycles.

Agency fees cover the agency's costs to connect a donor with the intended parents. When working with an agency, make sure you know their refund policies. It's important to know exactly what happens if the egg donor backs out, doesn't pass her evaluations, or fails to produce any eggs.

Most egg donor agencies will refund some amount if the process hasn't started yet. But if the donor backs out halfway through the process, only a partial refund -- or no refund at all -- will be given. Make sure you are familiar with the agency's policies before you commit.

02 Legal Services

To protect all parties involved, [legal agreements](#) will need to be drafted and addressed.

The legal agreement between the egg donor and intended parents includes:

- The egg donor's voluntary relinquishment of all rights to the eggs
- The egg donor's relinquishment of all parental responsibility on any children created using those eggs
- The timeline of how and when the eggs will be retrieved
- Medical cost and travel expense coverage
- Compensation
- Fee determination for canceled cycles
- And the level of contact required between the donor and the intended parents

The legal service fees will be determined based on the time it takes to make up the individual contracts that all parties must agree on.

03 Insurance

Intended parents will cover the medical expenses of the egg donation, but in addition to the clinical costs, they may also be required to buy accidental egg donor insurance if the agency does not provide this.

This additional insurance will protect the intended parents if there is a medical problem with the egg donor, so they are not stuck paying outrageous medical bills. Some agencies will have an in-house policy or a preferred insurance company they use, so be sure to ask about this information.

04 Psychological Evaluations

Every egg donor must go through a psychological evaluation. These evaluations are used to gather detailed family history and personal information. The information collected will help determine if there are behavioral patterns that should be noted.

These evaluations will also ask questions about the donor's education experiences to determine any signs of learning disorders.

Another reason for psychological evaluations is to determine if the donor is fully aware of this critical decision. If the donor isn't fully cognitively developed, she may not understand the long-term effects of this decision.

05 Donor Compensation

Egg donors need to be compensated for their generous donation. This price can vary between donors and agencies. Typically, donor fees start around \$8,000 but increase with prior donation experience and other special qualifications. While \$10,000 - \$12,000 is fairly typical, very highly accomplished donors can demand much higher compensation, sometimes even over \$100,000 (though this is very rare).

06 Genetic Assessment

Both egg and sperm donors are required to go through screenings to determine if there is an increased risk of passing on a [genetic condition](#). This is an essential step because the combination of genes could impact the health of the child. Individuals expecting genetic assessments such as preimplantation genetic testing (PGD) should expect to pay around \$6,000 for this procedure.

Genetic assessments are not to scare you away from having a baby. Rather, it is to provide you with excellent information so you can make the best decision possible for your family. The more you know about your baby's genetic make-up, the better prepared you will be.

07 Escrow Account

Escrow accounts are often set up to distribute the funds during the egg donation process. Having an escrow account allows the agency to have access to the money available to pay for clinics, travel expenses, and medications without having to call the intended parents over and over again.

Costs Surrounding Surrogacy

The truth is, having a child through IVF includes many steps, moving parts, and costs. However, with a lot of love and a little patience, a child will ultimately result from this process. Though at times it can seem overwhelming, your IVF clinic will do its best to eliminate unnecessary costs or processes.

A [generous, loving woman](#) who is going to lend you her womb for 9 months to help you have a child will require special care and comfort during her pregnancy. This will benefit both you and your growing little one.

Here are a few things that are covered for a surrogate with the surrogacy costs:

01 Compensation

Surrogacy, although highly altruistic, requires compensation for the time, effort, emotional investment, and inherent discomfort that occurs during the pregnancy and delivery of a child. On average, surrogacy compensation in the state of California for a first-time surrogate is \$45,000 with an additional \$5,000 per live birth. In states that legally recognize surrogacy outside of California, the cost of a first-time surrogate is \$40,000 with an additional \$5,000 per birth.

You have the opportunity to thank your [surrogate](#) through compensation. Surrogates often experience missed work, need help with their other children, and sometimes require downtime. Compensation also goes towards helping with these aspects of surrogacy.

02 Maternity Clothing

To keep your surrogate comfortable during her pregnancy, she is going to require a maternity wardrobe. Individuals compensating surrogate donors with maternity clothing should anticipate spending anywhere from \$500 to \$1,000 per pregnancy, or anywhere from \$50-\$100/month.

Though the allotted allowance from your surrogacy costs dedicated to covering maternity clothes isn't huge, it will ensure your surrogate can move about and stay healthy and active during the pregnancy.

03 Insurance Premiums

Based on the kind of insurance your surrogate has, you may need to pay into her insurance for certain premiums. A careful analysis of your surrogate donor's insurance policy will help you figure out what the best plan option is, and how much it will cover.

Some insurance plans cover IVF but not the accompanying medications women require, while others cover the medications but not the IVF treatment. Some plans cover limited attempts at certain infertility treatments, and some do not cover IVF at all. Things like deductibles and copays are things you will need to cover as well.

However, many plans do not cover services received by your surrogate, so her out-of-pocket healthcare costs may be your responsibility. Insurance price can also vary lots depending on whether a surrogate is carrying twins, and other factors.

04 Monthly Allowance and Surrogacy Costs

Things like parking for appointments, local childcare, and local gas/mileage are all things that will be covered by your surrogate's monthly allowance. This is an important part of surrogacy costs, and you should prepare to spend about \$200/month relative to cost of living and other expenses.

Instead of reimbursing the surrogate for every receipt related to travel or pregnancy-related medical appointments, a general monthly allowance will make things easier.

05 Legal Fees

One of the more costly aspects of surrogacy is legal fees, which typically cost around \$15,000 per birth. However, this is money well spent. A great legal contract will give you peace of mind that all your parental rights are established, and this is well worth the cost.

Contracts will also let your surrogate know exactly what her responsibilities are, the dates of your contract execution, the people from which the gametes originated, the identity of the Intended Parents, and the process for any necessary pre-birth or parentage orders. This is the best way to ensure that everyone is on the same page as you work together to build your family.

Because gestational surrogacy is legally recognized in some locations and not in others, it's very important to ensure that you have legal parentage wherever you reside and your surrogate will not become the legal parent. Make sure you use an agency with many years of proven experience to avoid any legal complications.

Choosing the Right Fertility Matches for your Journey

Selecting your Egg Donor

When **intended parents** must turn to another woman, most often look for a stranger, who will play such an important part in the makeup of their child, they are anxious to stack the genetics in their favor, believing in the likelihood that traits of the donor will show up in their child.

If one or both partners have difficulty becoming pregnant due to egg quality, the couple may use donated eggs from another woman. Choosing a reputable egg donor agency helps match patients with a wide variety of donors from diverse backgrounds.

Patients can decide to choose a donor who is anonymous, semi-known, or known. An anonymous donor is one you will never meet, a semi-known donor is one who shares limited information, and a known donor can be a friend, relative, or stranger chosen through an agency, but will meet within agreed-upon boundaries.

Some intended parents throughout this process are scientific, exacting, and detailed in choosing an egg donor. Some even use spreadsheets and percentages, but we always recommend choosing a donor you feel good about in your heart.

Remember, genes are a bit like playing roulette: You can tip the odds, but you do not know where the ball will land. This goes for all types of intended parents throughout the process, so remember to trust in the process and your doctors.

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01 Physical appearance

Many people want their egg donor to match their ethnicity and their appearance. A donor's physical appearance is important because it cannot be changed by nurture. You cannot predict, control, or change how your child will look. But skin tones, body type, facial features all play a part in determining the child's physical appearance.

02 Intelligence

There are many things in our donors' profiles that signal intelligence: SAT scores (verified), Grade Point Average, educational degrees, occupation, parent and sibling occupations, academic awards, favorite books, essays she writes. Some of the child's innate intelligence may come from the donor but the biological father and environment are also contributing factors in shaping intelligence.

03 Family health history

No family is perfect but a reasonable health history free of mental health problems is important in egg donors. Hatch (previously known as the The Egg Donation and Surrogacy Program) works with one of the top geneticists in the country to provide a detailed medical report on the donor's family as well as an assessment of the risks. Also, many genetic tests are available to donors to assess their carrier status.

04 Special talents

Athleticism, artistic or musical talent, singing, dancing, or any particular accomplishment can set egg donors apart from others. Again, people dream that their child will possess the characteristics of their donor.

05 Personality

Depending on the individuals selecting for surrogate candidates, personality may or may not be an important element to consider about your donor. This is profound and a bit mysterious because it is the same inexplicable attraction we feel when we fall in love and when we choose our partners with whom to procreate.

Mother Nature (and perhaps Cupid) inspires us and our animal friends to mate with a certain partner, and Intended Parents are sublimely affected by certain connections they make with their donors. If an Intended Parent has a gut feeling toward or away from specific surrogate donors, it's always a good idea to follow their intuition.

Selecting your Surrogate

Simply put, next to choosing the right agency, the decision of how to choose a surrogate is one of the most important decisions you will make during this process. So what criteria should you consider?

There are generally far more intended parents in need of help than there are eligible surrogate mother candidates, and this is good to keep in mind when weighing what qualities are a must, and what preferences are flexible as you navigate this process.

Your clinic or agency will help you locate and select appropriate candidates for egg or sperm donation or [surrogacy](#), and your physicians carefully screen chosen candidates to rule out medical or psychological problems.



Here are a few things that are covered for a surrogate with the surrogacy costs:

01 Health

Of course, the most important thing when you [choose a surrogate](#) is that your surrogate is healthy and that she can be medically cleared to proceed. But how do you define healthy? Some of the criteria that medical offices will examine include height, weight, age, pregnancy history, and delivery history.

02 Body Mass Index/BMI

Every medical office will use slightly different criteria, but surrogates can typically have a Body Mass Index (BMI) anywhere between 19 and 33 (in special cases, BMI can be up to 35). BMI is important as a gestational carrier because a too-high BMI has been associated with pregnancy and post-birth complications, and a too-low BMI has been associated with an increased risk for preterm delivery and small-for-gestational-age (SGA) babies.

Additionally, if your surrogate's BMI is too high or too low, becoming pregnant can take anywhere from twice to four times as long. This means more used embryos, transfers, money, and time spent waiting for news of the outcome.

However, some may be more flexible with regards to the surrogate mother's gestational carrier's BMI, especially if she had healthy pregnancies at a similar BMI in the past. Weight is not always the best indicator of health, and other factors should be taken into consideration.

03 Age

On average, surrogates are between 21 and 37 years old. Although many intended parents instinctively ask about young surrogates, age is not always the best factor to determine whether a candidate is a great fit.

A younger surrogate in her twenties may live a busier active lifestyle, while an older surrogate in her thirties or even very early forties might be more stable, responsible, and calm. Bear in mind a gestational surrogate does not use her eggs, so her age is not as important as her overall pregnancy history in determining whether she is a good candidate.

04 Pregnancy/Delivery History

Delivery history tends to be the criteria that most intended parents prioritize, and rightfully so. In many cases, you cannot become a surrogate without a previous pregnancy because there is no proof that surrogates can carry a pregnancy safely and successfully to term and give birth to a healthy child.

A good previous pregnancy history is reassuring for future pregnancies, but what does a good pregnancy history look like?

Some surrogate may have had c-sections in the past and are still wonderful medical candidates, assuming they recovered well from the procedure. When selecting a surrogate, discussing their past pregnancies will be an important part of your conversation. It's important to ask questions around the physical and emotional history of their past pregnancies, and ensure they're not vulnerable to any pregnancy conditions or complications.

While a healthy pregnancy history is important, there are many varying degrees of normal when it comes to pregnancy and childbirth, so it is best to defer to a doctor to make determinations on whether a candidate is medically suitable, and whether any past concerns are likely to recur.

05 Location

Intended parents often want to choose a surrogate who resides near to them, or in a major city near an airport for easy travel. Most surrogate candidates are in other [surrogacy friendly states](#), so it's important to know where surrogacy is legal to ensure Intended Parents have full parental rights to their child (or children) resulting from third-party IVF.

Realistically, when it comes to choosing the location of your potential surrogate, some travel will likely be required. It can be just as easy to fly out of state as it can be to fly to smaller areas of the world that aren't near major airports.

Technology also enables close contact regardless of distance and helps overcome location barriers. Intended parents enjoy staying connected with their surrogate by text, video conference, phone, and traveling to visit in person for milestone appointments.

06 Relationship Status

Surrogate moms are, after all, moms themselves and their own family dynamics can come in all shapes and sizes. Some gestational carrier are married or in committed relationships, which provides a partner as their support person for the process.

Others may be single moms who rely upon family and friends for their support system. The more important factor when you choose a surrogate is that she has a solid support system for the process and that the people she surrounds herself with offer positivity for her fertility journey.

07 Lifestyle

Some intended parents feel very open about the surrogate's lifestyle with the understanding that they are committed to living a healthy lifestyle that is conducive to pregnancy.

However, some intended parents have special requests such as eating organic or adding/limiting certain foods to the surrogate's diet. This can be a possible arrangement as long as the expenses for the requests are covered, such as a food allowance for the costs of eating organic.

Make sure the agency knows your requests upfront, so they can advise if there is a surrogate candidate who is comfortable with making the requested lifestyle changes.

08 Your Connection

Sometimes, the most important part of identifying your surrogate is the intangible, hard-to-define aspects of someone's personality. Notice the way each potential surrogate makes you feel, if they remind you of someone else, or carry similar traits to your own.

While difficult to pinpoint, sometimes, a gut feeling or your intuition is the most important element to consider. Make sure you're engaging with someone you feel comfortable around, enjoy talking to, and feel confident in.





How to Find the Right Fertility Clinic

The path toward parenthood is filled with many ups and downs, and having the best care possible is what can make your fertility journey exciting. While there are many different considerations to be made--from selecting procedure to third-party members--your fertility clinic will guide you with their experience and knowledge.

Be careful and analytical when selecting your fertility clinic but, as with most things, trusting your gut is very important here. Choosing a doctor that can help you achieve your dreams of pregnancy is the top priority of any patient, but remember that you're not only selecting a doctor--you're also selecting their fertility clinic.

Once you narrow down your search to reputable, competent doctors and fertility clinics with high success rates the real work begins.

Factors you may want to consider when choosing a fertility specialist team are as follows.

- 01 Fertility Clinic Staff
- 02 Facilities and Services
- 03 Communication Level
- 04 Fertility Pricing Options
- 05 Accessibility

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01 Fertility clinic staff

From nurses to front office and billing, everyone in this environment should make you feel excited and hopeful. While the doctor is an important aspect of fertility medicine, even the greatest doctor in the world is only as good as her/his staff. Patients must rely on the office staff to schedule appointments, carry out the doctors' orders, coordinate treatments, facilitate testing, and monitor progress.

Also, knowledgeable staff can help patients avoid dangerous complications and improve their chance of success. Not to mention, good staff improves the entire "feeling" of a clinic. Never underestimate the mood or energy you feel.

02 Facilities and services

Just as a doctor is only as good as their staff, pregnancy rates can only be as good as the embryology laboratory. Who is the head embryologist? Does the lab have modern equipment like lasers and current incubators? Is the lab adequately staffed? Can the lab perform all the necessary procedures or do they have outside experts come in for procedures like PGD (preimplantation genetic diagnosis)?

Additionally, ensuring you're selecting a clinic with the right services for you is a must. From fertility testing and diagnosis to IUI, IVF, and fertility preservation, remember to review these services at your clinic and make sure you'll be able to reach your goals with the clinic you select.

It can be hard to find out information about a laboratory, but if you ask a doctor, they should be able to tell you about all the details of their lab.

03 Communication level

Communication is the most critical component of a great fertility practice. Is the doctor available to answer your questions? Do you get the run-around when you call the office? Do staff answer your emails? Do they remember who you are? If you call someone, do they call back?

Furthermore, when you talk to the doctor, does she/he make an effort to help you understand the process? Good communication is a sign of a functioning organization. Ultimately, you want to trust your care and embryos to a well-functioning agency and clinic.

04 Fertility pricing options

Fertility treatment is expensive, there is no doubt about it. However, finding a clinic that is "reasonably" priced can mean the difference between being able to, or not being able to, access care for some patients.

It becomes obvious when a clinic's top priority is making money as opposed to making babies. Does your clinic offer payment plans or financing options? Do they accept insurance? If money seems more important than care, the clinic's priorities may not be in the right place.

05 Accessibility

Is your doctor accessible for appointments? Can you make an appointment around your schedule, or are you supposed to stop your life and fit it into their schedule? Fertility treatment is hard enough, your clinic should not make it harder with impossible hours and inflexible appointment times.

Usually, location should not be the determining factor when selecting a fertility clinic. Traveling is common when undergoing IVF and other fertility treatments, and it's well worth visiting someone farther away for a better chance at fertility.

However, Covid-19's impact on the world has made travel across state and country boundaries more difficult. Because of this, consulting with different fertility clinics to hear about their processes will be important to determining the right clinic for you.

Quality trumps location here--when making such a commitment, the potential outcomes must be considered. Because surrogacy and egg donation are not legal in some states and countries, most fertility clinics will accept patients from anywhere in the world. IVF treatment requires patients to be near the clinic for 5-10 days, so many people travel across the world for their IVF treatment.

To prepare for travel during Covid-19 for fertility treatment, consult with your fertility clinic or research about [how to best prepare](#).

06 Success rates

Every clinic is required to report annual IVF cycles and pregnancies to the Center for Disease and Control Prevention, so you can see into the treatments performed and success rates of the clinic's history.

However, it's important to know that certain fertility clinics don't report unsuccessful or complicated fertility cycles, or simply turn away patients with extremely low chances of fertility to keep their success rates high. Because of this, publicly available success rates aren't the most reliable factor when picking your fertility clinic and you should always consult with the IVF clinic's staff and doctors throughout this step.

Success rates are important, but comparing one clinic's success rates to another's isn't an apples-to-apples comparison since you don't know what goes on behind closed doors or how accurate their success rates actually are.

To find success rates for clinics, visit the [Society for Assisted Reproductive Technology](#).



What's Next: Start your Fertility Journey Today!

It's gratifying that advanced reproductive technology can help so many different people who aspire to be parents. However, the process can be both complicated, emotional and expensive.

Our best advice is to consult experts and gather information for informed decisions.

Your doctor can discuss the different types of treatment that may work best for you. It is also important to understand the various success rates and know what your insurance will or will not cover.

While it is an exciting time, the process may also be stressful. There are emotional issues to consider along your path to parenthood too. Most clinics have a counselor on staff who specializes in fertility issues or can refer you to professionals they recommend. They can also refer you to the best agency to help with donor eggs, embryo, surrogates, and sperm.

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About Pacific Fertility Center Los Angeles

For 30 years, people have been choosing the Pacific Fertility Center in Los Angeles. Established in 1991, PFCLA is one of the leading fertility clinics in America. With success rates that are among the best in the nation, we've been a part of over 7,000 happy, healthy births.

Whether through IVF or using an egg donor or surrogate, we specialize in guiding intended parents—including LGBTQ+ members—through what can be an emotional and complicated process. Our patients, including celebrities and royalty, come from more than 75 countries to take advantage of our exceptional treatment, support, and discretion. We work with the top egg donor and surrogacy agencies in the country, leading to ideal, curated match recommendations for our intended parents. Simply put, your dreams are our passion. Everything we do is to ensure you have the most rewarding experience possible.



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