

Specialists In Reproductive Medicine & Surgery, P.A.

www.DreamABaby.com • Fertility@DreamABaby.com

Excellence, Experience & Ethics



Therapeutic Donor Insemination (TDI) General and Monthly Consent Form

We, _____ and _____, being partners, authorize Dr. Sweet and his designated assistants to perform one or more inseminations on _____ with the sperm obtained from an anonymous donor(s) for the purpose of making her pregnant.

In addition to our input, we agree to rely on the judgment and discretion of Dr. Sweet and the company providing the samples in selecting an appropriate donor(s), whose characteristics are compatible with ours. We will never seek to identify the donor(s), nor shall the donor be advised of the identity of either partner. We understand and agree that it cannot be guaranteed that the same donor will be utilized for each insemination. We also agree that donor sperm that has been frozen (for storage purposes) will be used.

We understand that there is no guarantee that these inseminations will result in a pregnancy. We further understand that within the normal human population a certain percentage (approximately 4%) of children are born with physical or mental defects, and that the occurrence of such defects is beyond the control of physicians. We therefore understand and agree that Dr. Sweet does not assume responsibility for the physical and mental characteristics of any child or children born as a result of donor insemination. We also understand and accept that the donor insemination procedure carries with it the risk of sexually transmitted diseases including, but not limited to, gonorrhea, syphilis, herpes, hepatitis and acquired immune deficiency syndrome (AIDS). This agreement therefore is not a contract to cure, a warranty of treatment, nor a guaranty of conception. We do hereby absolve, release, indemnify, protect and hold harmless from any and all liability for the mental or physical nature of character of any child or children so conceived or born, and for affirmative acts or acts of omission which may arise during the performance of this agreement.

When applicable, we understand that, if a woman is inseminated with the consent of her partner (husband), the husband is treated, in Florida law, as if he were the natural father of a child thereby conceived.

(Where applicable) It is further agreed that from conception, I _____, as partner & husband, accept the act of donor insemination as my own and agree to the following:

- That such child or children conceived or born shall be my legitimate children and heirs of my body and
- That I hereby waive forever any right which I might have to disclaim or omit the child or children as my legitimate heir or heirs, and
- That such child or children conceived or born shall be considered to be in all respects, including descent and distribution of my property, a child or children of my body.

We have also read and understood the **Donor Insemination Patient Information Packet** and agree to the donor insemination process and have had our questions answered to our satisfaction before signing any of the signatures below:

Sperm Recipient's Signature

Sperm Recipient's Name (Please Print)

___/___/___
Date:

Partner's Signature

Partner's Name (Please Print)

___/___/___
Date:

Practitioner's Signature

Practitioner's Name (Please Print)

___/___/___
Date:

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