

www.uzleuven.be/lufc > Tel.. +32 16 34 36

AGREEMENT ON IVF (IN VITRO FERTILISATION) - ICSI (INTRACYTOPLASMIC SPERM INJECTION) WITH EMBRYO TRANSFER

Between Leuvens universitair fertiliteitscentrum,	and Ms	
UZ Leuven,	born on///	
represented by	Partner	
Prof. Dr. Karen Peeraer	born on///	
	residing at	
hereinafter 'the LUFC', on the one hand,	hereinafter 'the prospective parent(s)', on the other hand,	
the following has been agreed:		
• The prospective parent(s) gives (give) her (their) consent to the LUFC for vitro fertilisation treatment with egg aspiration and embryo transfer, with possible application of assisted fertilisation (IVF or ICSI) (hereinafter referred to as 'the treatment').		
• The prospective parent(s) declares (declare) that the possible side-effects of the treatment were discussed with her (them). She (They) include fertilisation failure with IVF (<10%), fertilisation failure with ICSI (<3%), infection (<0.3%), intra-abdominal bleeding (<0.35%), moderate ovarian hyperstimulation syndrome (<6%), severe ovarian hyperstimulation syndrome (<2%).		
• The prospective parent(s) declares (declare) that the advantages and disadvantages of IVF and ICSI were properly discussed with her (them) and she (they) is (are) aware that:		
 In a conventional IVF procedure, eggs and sperm are brought together and fertilisation occurs spontaneously. 		
In ICSI, a single sperm cell is inserted into each egg under a microscope. It is a technique that is often used in cases of severe male infertility where the chances of fertilising the eggs with a conventional IVF procedure are very small. There is always a possibility that infertility may be caused by a hereditary defect. This defect may be transmitted to any children when ICSI is used.		
The prospective parent(s) declares (declare) they consent with:		
 an IVF procedure and/or ICSI procedure an IVF procedure. The prospective parent(s) esplicity object to an ICSI procedure. 		



www.uzleuven.be/lufc > Tel.. +32 16 34 36

AGREEMENT ON IVF (IN VITRO FERTILISATION) - ICSI (INTRACYTOPLASMIC SPERM INJECTION) WITH EMBRYO TRANSFER

• The prospective parent(s) is (are) aware that during the treatment, eggs/sperm will be collected and embryos will be created. In certain cases, the human tissue produced during the treatment cannot be used for the treatment, for example in case of immature, unfertilised, or abnormally fertilised eggs, or embryos of insufficient quality. Similarly, during the treatment, only a part of the sperm sample will be used and the residual material will be destroyed. Subject to your consent this residual material may be used for training of personnel of the IVF laboratory, validation of procedures, innovation and optimisation of laboratory procedures. This residual material will not leave the IVF laboratory of the LUFC, in contrast with donation of material for scientific research, for which you need to consent using another form (see 'Informed Consent scientific research with gametes and/or embryos not for personal use').

The prospective parent(s) declares	(declare):		
They consent to the donation of residual material.They do not consent to the donation of residual material.			
for validation of procedures, training of IVF lab personnel and quality checks in the IVF laboratory.			
provided that certain criteria are for prospective parents' health insurance	ulfilled and subject to the approv e. Otherwise, the prospective(s) pa nts to € 1848,16, for non-Belgian pa	e mandatory Belgian health insurance al of the consultant physician of the trent(s) will have to pay the laboratory tients € 2798,04 (January 2024). These per of the previous year.	
Drawn up in duplicate in Leuven on $\sqrt{\ldots}$, whereby one copy is for the LUFC, the other for the prospective parent(s).			
	Name Ms	Name partner	
	born on//	born on///	
Decrock	P		
Prof. Dr. Karen Peeraer	read and approved	read and approved	
Administrator tissue bank LUFC	signature Ms	signature partner	
Diagon complete and sign this agreemen	at and return it to LUEC (contractor	andministratio' 117 Lauren Harastraat	

Please complete and sign this agreement and return it to LUFC, 'contractenadministratie', UZ Leuven, Herestraat 49, 3000 Leuven or via Mynexuzhealth.