

CRYOGENIC LABORATORIES, INC. (CLI)

3/2016	DSR Facebook Page
I contacted them (CLI) several times to let them know of health concerns of my son and they never contacted the donor siblings. On top of that, they never had it recorded that we had 4 offspring with this donor, something I called and reported myself.	
6/20/13	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/15672
I used a "Canadian" bank but found out later that my sperm was imported from Cryogenic Laboratories. I actually found out because CLI sent me a newsletter out of the blue announcing their Family Forums.	
8/18/12	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/15272
<p>I agree with Dawn, if you have your donor number search yahoo groups or google it. I have a yahoo group for other parents that used the same donor my kids are from (CLI). While some of them found me thru the DSR, quite a few found the group just by googling the donor number. My kids' sibling group is currently at 25 known siblings (all under 3.5) and we know there are more out there. The bank told one of the parents in the group that there were at least 30 families. Interesting since they were supposed to limit to 25. I am sure there are probably closer to 35 or 40 families since I know several of the parents in my group didn't report their child's birth.</p> <p>Also, if the bank won't give you the information you are looking for since you are the donor, would one of the families you have found be willing to call and get it from the bank? It could take several calls, sometimes one person answering the phone will tell you something that another won't.</p>	
6/23/12	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/15224
<p>Cryolab and Fairfax both have Family Forums which include private forums for purchaser's of specific donors (so one separate private forum for each donor) which function as a sort of sibling registry. We have found about half of our daughter's donorsibs on the forum (the other half on the DSR). If your donor had a CLI number, you should be able to register for the private forum for that donor. The forums are at http://www.cryolab.com/forums/index.php and http://www.fairfaxcryobank.com/forum/. The forums are free to join.</p>	
6/23/12	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/15223
My donor was on the ReproMed list for a number of years but did not originate in Canada. The vials were shared by CLI out of MN in the U.S., and I found the donor profile on the ReproMed list a number of years ago (with the same donor number). I emailed ReproMed to see if those children can also be registered, the answer was no. I am sure my kids have Canadian siblings we will never find.	
5/22/12	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/15180
I got the same kind of response when I called Cryogenic Lab in MN to find some additional medical info. Apparently, my daughter's donor info is in a cardboard box in an offsite building, and it would cost a couple hundred dollars just to get someone to go over there and open the box.	

2/2/11	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/13930
<p>I am sure Wendy would have more insight into the different bank's policies but I had used both Fairfax and CLI and while they did have limits, they are ridiculous and you have to read your clinics policy closely. Theirs were 25 offspring per population of 600,000. Then the donor becomes geographically restricted. I am in the Phoenix area. The population of PHX is 1.5 million, not including surrounding cities. This means the bank would allow up to 50+ offspring in the Phoenix area and more in surrounding cities just 15-20 miles away. And as someone mentioned, these restrictions and inadequate as they are, are only as good as parents reporting births back to the banks.</p>	

9/24/10	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/13634
<p>Regarding your question about choosing a donor: We asked our fertility doctor to recommend a sperm bank and he recommended Cryogenics (the branch in Minnesota is the one we used). We started by looking at ethnic background, education, and then personal qualities. We wanted someone who was intelligent and articulate. Then we looked at physical features, health history, and family history for health, education, and interests. Most important then, to us, was listening to the 30 minute interview. Most were eliminated here, because there was the impression that they were holding back on their responses - this was especially true of those that were lawyers - or some other negative that came across.</p> <p>The man we chose is from European stock (English, Swedish) and is a college graduate. He was very articulate, very open in his responses on the audio interview, has a well-educated family, who are basically healthy, has interests that appealed to us, etc. And as a bonus, his appearance was perfect - 6 foot 3 inches, light red hair (redheads run in my family). He is intellectual, very articulate, athletic, and has just the interests we like.</p> <p>We have three children from him - a 2-year old girl and 7-week old boy and girl twins. We found (through this registry) two half-siblings in other parts of the country, who are also 2 years old, and both of them are beautiful and sound wonderful. We could not be happier.</p> <p>He is an anonymous donor. I do wish we would be able to contact him one day - that was the only drawback. But we chose him primarily by his personal qualities. We did not find a donor who was as good and who was willing to be identified eventually.</p>	

9/15/10	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/13625
<p>To the parents of offspring from Donor ####:</p> <p>Donor #### has is a carrier of alpha 1 antitrypsin deficiency. This is a condition, not a disease and can be managed, but it needs to be identified so that it is not misdiagnosed or mistreated. Donor #### is Phenotype Pi-MZ, which means that he has one normal gene (M) and one deficient gene (Z), either of which has an equal chance of being passed to his offspring. For information, go to http://www.alpha-1foundation.org/. In order to get tested for free (and w/o health ins. knowing) you can participate in a research project at the University of South Carolina . Go to the website, www.alphaoneregistry.org, email alphaone@musc.edu or call toll free, 1-877-886-2383. They will send you free test kits with instructions.</p> <p>It is very important that all offspring from Donor #### are tested for the presence of this genetic condition as healthy life style choices are imperative for alpha 1 carriers. I am the mother of three offspring from Donor #### and I am also an alpha 1 carrier. I am an MZ, like the donor. All three of my children received the donor's Z and mine, making them Pi-ZZ. Despite this, they are doing well.</p>	

9/8/10	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/13592
<p>I have the lifetime photos for my ID release donor thru CLI (sister company to Fairfax). The document I had to sign before getting the pictures does state that I cannot share them or post them publicly. I have a yahoo group for families that have used my donor and others have posted the lifetime photos there. I personally did not want to post them because I didn't want to do anything that might jeopardize my</p>	

kids being able to get his ID info when they are 18. While it might not be likely that the bank would find out if I posted them to DSR or a private yahoo group, I wasn't going to take the chance. I do not recall Fairfax or CLI having the same policy with the childhood photos, just the lifetime photos.

5/3/10 | <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/13195>

Re: [DonorSiblingRegistry] Sperm Bank "ID Consent and RELEASE form"

I don't remember if it was the same form but I had to sign one very similar for CLI. I don't recall feeling like I had any issue with it when I read and signed it. And the fact is that if I hadn't signed and sent it, my kids wouldn't have been able to try to make contact at 18 which was the whole point of using an ID release donor. I believe that CLI did have their form available online to read prior to buying vials.

10/5/09 | <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/12175>

Over the years, I have heard many stories from donors, recipients and adult donor conceived people that just can't get their donor numbers from banks like Fairfax, CLI, Idant and NECC. Sometimes they just refuse, sometimes they say that they can't find the records, and sometimes they say that the records have been destroyed. I just do not understand how they can deliberately keep people from making mutual consent contact. It is incomprehensible to me that they deliberately keep people from sharing medical information.

8/31/09 | <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/12109>

Cryogenic Laboratories Donor Reactivation Agreement and Fees
CLI tells parents that it could take up to a month to locate former donors. They have the name and all contact information on the donor- A month?! And these fees?

Fee Schedule:

search fee (non-refundable) \$ 300.00

search fee is applied towards the first specimen if donor is located and chooses to participate

Specimens

1st specimen \$ 3,768.00*

each additional specimen \$ 1,000.00

if it has been longer than 90 days between specimens then each additional specimen is \$ 2,000.00

if it has been longer than 180 days between specimens then each additional specimen is \$ 3,000.00

Storage (includes 7 months of storage) \$ 280.00

Donor Travel

extensive travel \$ 1,000.00; limited travel \$ 500.00

travel fees subject to change without notice once donor is located and travel expenses determined

*These fees (minimum of \$5,048.00) must be paid upon initiation of search. All fees except the initial \$300.00 are refundable if we are unable to locate the donor or if the donor chooses not to participate.

3/28/09 | <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/11763>

Re: Donor Numbers

Even now, Fairfax and CLI refuse to give donors their numbers. This is extremely distressing for donors who want to make contact through the DSR as well as the families who then can not be updated and share important medical or genetic information. They have told me on the phone that they do not believe that a donor has the right to his own donor number. This is actually prohibiting mutual consent contact. Whose best interests are they thinking of?

2/18/09	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/11639
<p>RE: [DonorSiblingRegistry] Lifetime photos You receive a series of photos, usually 6-10, of the donor from birth to current adult pictures. CLI offers them too. They are not cheap so I had planned to only order them once I was pregnant so I would have at least those photos to share with my children. Of course once I knew for sure what donor I was going to use I gave in to curiosity and bought them early. -----Original Message----- From: DonorSiblingRegistry@yahoogroups.com What is the "lifetime" photo option at Fairfax?</p>	

10/6/08	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/11228
<p>Re: Message from Representative from GIVF Update: I would like to update the GIFV (Fairfax) Director's "corrections" to our list: His item #2: "2. CLI is not able to confirm the statement that the same donor had previously donated at Zygen Laboratories and California Cryobank." This is accurate. We have confirmed. His item #10: "10. CLI has NEVER distributed California Cryobank (CCB) donors and likewise CCB has not distributed CLI donors." We have also heard from a parent who purchased her sperm from California Cryobank, but her donor list has a CLI heading, and she now matches with other moms who actually purchased their sperm from CLI. His Item #9: "9. CLI has NEVER had any donors listed on the Biogenetics donor catalogue." We have a donor who is indeed on both Fairfax and Biogenetics lists. We also have a donor on both Fairfax and NECC lists.</p>	

10/1/08	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/11216
<p>The Director from GIVF Cryobanks (Fairfax Cryobank and Cryogenic Laboratories, Inc.) has different information than we show on our clinic list (which was compiled from former clients). It's easy to see why there is so much confusion! I have agreed to post his information, as follows: 1. The Genetics & IVF Institute's (GIVF) main office is in Fairfax, VA. GIVF no longer has offices in Ashburn, VA and Gaithersburg, MD., where clients seeking infertility treatment were seen. GIVF is made up of Divisions, that specialize in infertility, genetics, sperm sorting, cryobanking, infectious disease testing, and pre-implantation genetic testing. Certain divisions have locations in various states (TX, CA, MN, PA) and internationally (China and Mexico) however not all divisions and services are represented in those locations. Please refer to our web site for additional information regarding our products and services: www.givf.com 2. CLI is not able to confirm the statement that the same donor had previously donated at Zygen Laboratories and California Cryobank. However, if the donor number from the CLI donor in question is forwarded to CLI management they will follow up with the donor. 3. CLI has NEVER changed any donor numbers. It cannot be done. Donor numbers are written on the vials that contain the semen. Once frozen, the numbers cannot be changed without thawing the vials and then refreezing them. Such a process would render the semen unacceptable for distribution. CLI is also AATB accredited and this practice would be in direct violation of the AATB standards which require that a unique identifier be assigned to each donor. 4. CLI was acquired by GIVF from John Olson in 2002. The 2000 numbers were from donors that were recruited following the acquisition and were not from other banks. Some donors with pregnancies listed are b/c they have children of their own and have created pregnancies as their samples were used.</p>	

5. CLI, IC and Follas have NEVER used ReproTech Ltd. as a freezing facility. In fact, ReproTech Ltd. an independently owned company does not operate a freezing facility they are a storage facility only.
6. ReproTech Ltd. was located in the same building as CLI in Roseville, MN until 2007. In 2007, they moved to a new location in Minneapolis/St. Paul.
7. CLI and ReproMed Ltd. were both started by John Olson. CLI donors and ReproMed donors were shared with distribution in the US and Canada. The first ReproMed donor was donor #3000. The CLI affiliation with ReproMed Ltd. was discontinued in 1999. ReproMed Ltd. is currently independently owned and operated. There are currently no shared donors between CLI and ReproMed Ltd. ReproMed and CLI have one donor (# 3040) in common on both catalogs currently. All other donors that CLI and ReproMed had in common are sold with ReproMed.
8. CLI has and continues to distribute semen produced by some of the following banks. Supplies of these donors are limited and once they are gone, there will be no additional units available from CLI. Clients interested in future specimens on these donors will have to contact the original bank to check availability. InternationalCryogenics , Inc. (ICI), Follas Laboratories, and Park Avenue Fertility (PAF), Reproductive Resources, University of Nebraska (currently out of business), Washington Fertility Study Center (currently out of business). (NOTE: The sperm banking division of Follas Laboratories was sold to General BioTechnology LLC and is currently doing business as Genome Resources). Donors from the other banks, were/are distributed with the same donor number as the originating bank. The CLI profiles on the donors were created with information supplied by the originating banks.
9. CLI has NEVER had any donors listed on the Biogenetics donor catalogue.
10. CLI has NEVER distributed California Cryobank (CCB) donors and likewise CCB has not distributed CLI donors.
11. Fairfax Cryobank DID NOT purchase Follas Laboratories or any other bank (see above). GIVF of which Fairfax Cryobank is a division, owns CLI. GIVF has not purchased any other cryobanks.
12. Each cryobank has its own donor numbering system. Therefore, several banks can have the same donor number on a past or current catalogue, however, they are not the same person.
13. Can Am Cryoservices, Inc. in Hamilton, ON distributes donor semen throughout Canada produced by Fairfax Cryobank and Cryogenic Laboratories, Inc. The samples are produced in the US and imported into Canada. All donors and their samples must meet strict Health Canada regulations regarding screening and infectious disease testing. Some donors are distributed both in the US and Canada at the same time. They would have the same donor number in both the US and Canada.
14. GIVF egg donor program is separate from Fairfax Cryobank sperm donor program. In addition, Fairfax Cryobank sperm donor program is separate from the CLI sperm donor program. Likewise, egg donor screening is different than sperm donor screening. All three programs are FDA registered and FDA inspected.
15. CLI NEVER had an affiliation with the University of Utah for donor sperm.

8/4/08 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/10956>

This part (from prior post) was changed because Genome Resources is now selling Follas' sperm on their website, along with CLI:

WAS:

- > Fairfax bought out a bunch of smaller clinics and sperm banks in 2002. One was Follas,
- > which no longer has a working sperm donor website (Pathology Associates purchased
- > Follas Labs and no longer sells sperm), and the F numbers are listed under CLI (which
- > Fairfax bought out but they are keeping both separate facilities and they have separate
- > donors for each list, it seems).

NOW:

Follas merged with Pathology Associates (abbreviated PA) in 2006. Follas' old website is now defunct. Their new website (<http://www.palabs.com>) no longer sells semen; they only store it for cancer patients. Genome Resources has the former Follas donors listed on their donor list that is on their website, (<http://www.genomeresources.com>). Genome Resources is a subsidiary of General BioTechnology LLC (GBT). GBT was founded in 1997 by former Indiana University School of Medicine researchers, but they started selling semen in 2006 (archives go back that far). Follas and Genome donor numbers start with an F and have four numbers behind the F. Some of the Genome numbers are from the former Follas donor lists, others are new. Some of these same donor numbers have also been sold through CLI out of MN.

The Samaritan Institute of Reproductive Medicine, which is connected with Good Samaritan Hospital in Phoenix, AZ used only CLI sperm at one time, at least. From someone who used that clinic: "There were a number of physicians connected to the clinic and I seem to recall a lot of interns, etc as it was a teaching hospital. From what I remember at the time, CLI was all that they used. When I picked my CLI donor from the CLI catalog, I was told that I was "lucky" because they already had vials of his semen on hand in their clinic in Phoenix. I was told that he was one of their more "popular" donors, and that for the more requested donors they kept semen on hand at the clinic, therefore I wouldn't have to pay extra to have it shipped from CLI. Based on that I would guess it is highly likely there may be other kids from my donor in Arizona."

8/4/08

<http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/10954>

A member recently wrote to ask about Fairfax Cryobank and which other clinics they have bought up or sold sperm for. Here is the information that we've collected about who shares/sells/buys sperm:

- The Genetics & IVF Institute has main offices and laboratories are located in Fairfax, Virginia, with additional offices in Ashburn, Virginia and Gaithersburg, Maryland. Genetics & IVF also owns medical or laboratory facilities in diverse locations including Texas, Minnesota, California, and China.
- Dartmouth Hitchcock Hospital, Lebanon, NH used CLI sperm in the 1990's. It used to be known as Mary Hitchcock Memorial Hospital.
- Zygen and CCB donor (different numbers at each bank) retired and showed up at CLI as a new donor, under a new number.
- CLI did not list any 2000 donor numbers until 2003, and then they all had pregnancies reported. Those seem to be the ones that are changing numbers so maybe they are coming from somewhere else.
- CLI, IC, and Follas all use ReproTech Ltd. a freezing facility located at the same address as CLI in Roseville (it opened in 1990). CLI of MN and ReproMed Ltd. of Canada have some of the same numbers (they do not change from list to list). Seem to be 3000 and 3100 numbers. A donor that originated from CLI (was on lists for sure from 1986 until 2002) was found to be on Repromed's 1993 until 2002 lists, so they share some donors.
- Original CLI donors do not have letters, but some of those that come from other sperm banks that are sold through CLI do have letters in front of the donor number. CLI has its own donor profile. and the logo changes on profile (it will say CLI instead of the originating sperm bank).
- CLI of MN and International Cryogenics (part of Michigan Sperm Bank) of MI have some of the same numbers (don't change and IC ones start with letters). CLI donors don't have letters in front of the number.
- Follas, CLI, and IC have some same (they start with F, which I think are all Follas)—same numbers.
- University of NE 5000 and 6000 numbers are from CLI (they keep the same numbers).
- CLI has listings on Biogenetics (these change numbers). CCB has listings on Biogenetics and Zygen (these change numbers).
- CCB of CA sells CLI sperm (same numbers), donor profile actually says CLI. Recipient pays CCB.
- Fairfax and CLI interchange but keep the same numbers. Each link to the other on their websites. Donors with the same numbers at both Fairfax and CLI are often NOT the same donor, they just used the same donor number.
- Fairfax lists offices donated as Austin, TX, Edison, NJ, Fairfax, VA, and Roseville, MN (CLI).
- Fairfax bought out a bunch of smaller clinics and sperm banks in 2002. One was Follas, which no longer has a working sperm donor website (Pathology Associates purchased Follas Labs and no longer sells sperm), and the F numbers are listed under CLI (which Fairfax bought out but they are keeping both separate facilities and they have separate donors for each list, it seems). CLI donors with all the letters before them are some of the donors that were bought out from other banks, and also some other donors that do not have a letter in the donor number. Some of those banks are still operating in separate buildings and kept their old name, others just had the inventory shipped elsewhere (to another bank within the Fairfax purchased banks) to sell there. The donors are still separate from Fairfax numbers, so crossposting does not have to be done to the Fairfax list.
- ReproMed, a Canadian sperm bank, shares some of its numbers with CLI. These are usually the ones that are the ones in the 3000 and 3100 ranges, sometimes 3200 and older 1000 ones. CLI and ReproMed were both connected to John Olson in earlier years, so they are probably both a part of Fairfax/CLI now.
- Reproductive Resources donors are also sold at CLI.
- A donor conceived person who's mom used NYU in the 1970's was told by them, as well as Idant, that there were only about 3 or 4 places that were even in business and serving as sperm donors in NY in the early 1970s. CLI (yes, formerly known as Genetic Labs) was one of them. I spoke to someone at CLI as well, and they

confirmed for me that they indeed were shipping specimens to NY in the early 1970s and that they still do maintain records from the 1970s.

-Some CLI donor numbers are shared with International Cryogenics, ReproMed, Ltd. (Canada), Reproductive Resources, Follas, and University of Nebraska. CLI started out as Genetic Laboratories in 1970 and was the first private sperm bank in the U.S. (founded by John Olson). It changed to Cryogenic Laboratories in 1976. Archives mention that they were able to freeze sperm in the 70's. A former donor remembers seeing pins stuck in a map with the locations of where the sperm was shipped back in the early days, and the pins were all over the map, throughout the whole U.S. and maybe more. Even

Alaska. In March of 2002, CLI was bought out by Genetics & IVF Institute Family of Cryobanks, the owners of Fairfax Cryobank, but it still has its own facility.

-University of Utah had some sort of agreement with CLI and/or Center for Reproductive Medicine of MN, according to someone who used them (they told her that it was CLI sperm she was getting). Numbers less than 1000 are University of Utah.

7/26/08 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/10906>

"When obtaining photos years after the donor has retired, both the donor and recipient have to sign the consents that promise that neither party will look for the other. In my opinion, this just puts fear into donors who might otherwise be very open to mutual consent contact. It sounds like Fairfax might now acknowledge the importance of siblings to connect (but they will not facilitate any mutual consent contact and ignore all requests), but what about the donors (who might not even know their donor number) and the offspring who want to connect? If it is MUTUAL between donor and recipient or offspring that they want to connect, there should be NO problem whatsoever. It should be UP TO THE DONOR TO DECIDE IF HE WANTS CONTACT OR NOT, NOT FAIRFAX OR CLI. I have seen it mentioned where other sperm banks let the donors come back later and change their status from unknown to known. Is this just about money? (Known donors' semen costs a lot more, and they can't go back to all those who already have children from that donor to collect more money if the sperm is already bought and used.) I feel that they are not looking out for their customers, the innocent kids that are born, or the donors. They are looking out for their pocketbooks. I have NO PROBLEM if my donor wants to stay anonymous, but let HIM make that choice, don't force it upon him. People DO change their minds. MUTUAL CONSENT SHOULD BE ALLOWED IF BOTH PARTIES AGREE. I don't care if it was before 2005 or not. PEOPLE SHOULD BE ALLOWED TO CHANGE THEIR MINDS, ESPECIALLY WHEN IT HAS TO DO WITH CHILDREN AND BIOLOGICAL FATHERS."

7/25/08 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/10903>

The recent discussion on this group has me thinking that the only way Fairfax or CLI will update the health history of a retired donor (one no longer donating so he can't update his health info) is if someone who has a child with him pays Fairfax the non-refundable \$300 to find the donor to get that information (at the same time Fairfax will ask the donor if he will provide more, like photos or updated profile, for Fairfax to sell to parents--there was a post a sometime last year that told the exorbitant prices of items that might be obtained from a retired donor). \$300 plus more money to purchase the additional information that might come out of finding him. And, when they get this updated information, they don't contact the others who have a child with this donor to offer them the supposedly "free" updated health profile, they probably wait till someone asks them about new information. Then they offer to sell them everything. How are people supposed to know it is even out there to ask for if Fairfax doesn't let them know? I think that if the sperm banks do happen to get updated health histories, they should make an effort to find the parents to see if they are interested in updating the medical history. I don't see that happening without the extra money involved, yet the health histories are supposedly "free."

7/25/08 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/10884>

RE: From Fairfax and CLI Websites

- > This information was taken from both the CLI and Fairfax websites.
- > ..when an anonymous donor changes his mind about connecting with families, he is not allowed
- > to know his donor number. Fairfax and CLI will not release donor numbers to their former

- > donors. So if a donor wanted to share important medical information (or just connect) with their
- > offspring listed on the DSR, the bank would prohibit this from happening. "Protecting families"?
- > I think not. Protecting themselves...I think so.

What possible justification can there be for this?! Surely the donor should have the right to decide FOR HIMSELF whether or not he wishes to:

- * remain anonymous or change his mind at a later date to become ID release
- * know his OWN donor number
- * share important medical information
- * use the DSR (or any other facility) to connect with offspring &/or parents

> From the sites:

- > Today, we ask all new donors if they want to be known. If they agree, they become an ID
- > Consent donor. If they decline, they will remain anonymous. All donors who began donating
- > prior to 2005 signed an agreement with us in which we agreed to keep their identifying
- > information private. Many families were created with the understanding that their specific donor
- > would be anonymous forever, and they very much want this information to stay private.

Why should it matter to these families whether or not the donor later decides to make some/all of his info available? No one is forcing families to make contact with the donor, or to have THEIR info released to the donor.

- > We have very specific understandings with donors and families that we will protect the
- > information of not only the donor's identity but also the identity of the families who used that
- > sperm donor. Our policy is that once a donor is designated as an anonymous donor or an ID
- > Consent donor, his status cannot be changed, e.g. from an anonymous donor to an ID Consent
- > donor, or vice versa. Therefore, for our anonymous donors, we are not mediating contact
- > between families and their donors.

IMHO, there is absolutely NO justification for this rationale, other than the desire on the part of the sperm banks to retain absolute control for the sake of their own VESTED (i.e. \$ & power) interests. This is a patronizing, patriarchal & repugnant approach to dealing with the – perfectly understandable -- emotional needs & desires of human beings:

- * of offspring to know more about themselves, where they came from, who they are related to, what medical issues might lie ahead for them & for the children they (will likely) have
- * of donors to change their minds about info-sharing (either identifying or non-identifying) as they mature & (likely) have kids of their own, to know something about the children they helped to create, to pass on important medical information that arises after the date of donation, as they & their parents age & medical issues arise.

- > ...half siblings who are interested are able to connect with each other via various sites third
- > parties set up for this purpose on the web. Although the donor may be unknown, half siblings
- > often find shared traits that they determine are likely from their biological fathers. This discovery
- > of sibling relationships, along with the extensive information already available on the donor,
- > may help some children as they seek to learn more about their genetic heritage.

So these sperm banks even admit that:

- * 1/2 sibs are seeking each other out via '3rd party websites;
- * it's ok & even important for offspring to have contact with 1/2 sibs because this 'may help help some children as they seek to learn more about their genetic heritage'

BUT it's not ok for these same sperm banks to allow those donors who change their OWN minds later on & want the ability to CHOOSE to be known to be given their OWN donor number by the banks in order to facilitate this???!!!

- > It is highly unlikely you would ever meet another one of your half siblings randomly, (i.e.,
- > someone who was conceived with the exact same donor). It is rare for one of our donors to

> have more than 20 reported offspring."

How on earth can they LIE so boldly like this?!!!

7/25/08 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/10877>

This information was taken from both the CLI and Fairfax websites. It was sent to me by a member. I question a few things....4-5,000 children born each year from DI? All other estimates hover around 30,000-40,000. How in the world is anyone getting any numbers that they then present as truth?! And they think it's rare to have more than 20 siblings for any given donor? As the DSR is a small sampling of donor families, I think we've shown that to not be the case. Also, we have heard several times of women meeting up in a park, or party and discovering that their kids were half siblings. It does indeed happen. Donor siblings can connect from "various sites that third parties set up..."? If you knew how many times I have called these sperm bank directors to have them please tell their clients about the DSR. Also, when an anonymous donor changes his mind about connecting with families, he is not allowed to know his donor number. Fairfax and CLI will not release donor numbers to their former donors. So if a donor wanted to share important medical information (or just connect) with their offspring listed on the DSR, the bank would prohibit this from happening. "Protecting families"? I think not. Protecting themselves...I think so.

From the sites:

"The typical family who uses donor sperm is changing. Originally donor insemination was offered exclusively to married couples who were experiencing infertility. Today, infertile couples are still helped by donor sperm but other types of families are as well. Single women are increasingly choosing to have children on their own with the help of donor sperm. Same sex couples are, too. Where 20 years ago it was easier to keep the donor sperm story a secret, it is now much more obvious when a father is not around while a child is growing up. Children born from donor sperm are learning about the circumstances of their conception in ever increasing numbers. We estimate that now about 4,000 to 5,000 children a year are born in the US as the result of anonymous donor insemination.

Today, we ask all new donors if they want to be known. If they agree, they become an ID Consent donor. If they decline, they will remain anonymous. All donors who began donating prior to 2005 signed an agreement with us in which we agreed to keep their identifying information private. Many families were created with the understanding that their specific donor would be anonymous forever, and they very much want this information to stay private. We have very specific understandings with donors and families that we will protect the information of not only the donor's identity but also the identity of the families who used that sperm donor. Our policy is that once a donor is designated as an anonymous donor or an ID Consent donor, his status cannot be changed, e.g. from an anonymous donor to an ID Consent donor, or vice versa. Therefore, for our anonymous donors, we are not mediating contact between families and their donors.

There is a considerable amount of information we do have on our donors, both anonymous and ID consent, that is extremely valuable in learning about the donor as a person rather than a cold statistic. Donors today have audio interviews recorded, childhood photos, some have adult photos, and all have detailed medical and personal histories. Their ethnicity, talents, interests, and even their favorite color and song are presented. Donors who are no longer donating also have information saved. (See more about donor information at this webpage about donor information.) In addition, half siblings who are interested are able to connect with each other via various sites third parties set up for this purpose on the web. Although the donor may be unknown, half siblings often find shared traits that they determine are likely from their biological fathers. This discovery of sibling relationships, along with the extensive information already available on the donor, may help some children as they seek to learn more about their genetic heritage.

Donor sperm from one donor usually results in several pregnancies over many years. Some families store units from the same donor in order to have biologically full siblings, so the age range of all the children from the same donor may be considerable. In accordance with the guidelines set by the American Society of Reproductive Medicine (ASRM), we strictly limit the number of donor units sent to the same geographic area. But since donor sperm is shipped all over the US and several other countries, the donor usually sells out before he reaches our distribution limit. It is highly unlikely you would ever meet another one of your half siblings randomly, (i.e., someone who was conceived with the exact same donor). It is rare for one of our donors to have more than 20 reported offspring."

7/22/08 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/10848>

Not sure if this is the case with you, but someone who was born in 1987 is listed on the Cryogenics Laboratories, Inc. list under an unknown donor number (she is not listed under the U of N Medical Center), and she says her mom's doctor (from Omaha, NE) got the semen from CLI. Your mom should be able to request her medical records to see if there is a note in there as to where the sperm came from, possibly even a donor number (there should be a donor number because someone born in 1983 who is listed under U of N Medical Center has one, and CLI also had donor numbers during that time period). They are your mom's records so she is the one who probably has to request them (because of the privacy thing). Some of those who are under the U of N list have donor numbers that are shared with CLI but they showed up at CLI later, when the U of N Genetic Semen Bank closed and CLI bought the inventory. Could be that the person who posted under CLI is mistaken about it being a CLI donor (it would make more sense that it was a U of N donor first, then became a CLI donor later), or U of N and CLI shared donors even before the U of N sperm bank closed. But then, private OB/GYN's might have used a sperm bank other than the one in Omaha, like CLI.

5/9/08 | <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/10593>

Re: Limiting number of children born per donor...Why again?
None of this matters if a single donor is donating at several different labs. Each and every lab can impose their own rules about limiting the number of offspring per donor, but like in our case, where our donor donated at 3 different major labs (CCB, ZYGEN, CLI), then there is absolutely no way of tracking how many 1/2 sibs there actually are. (We are still unsure if these labs shared our donor's samples with one another or if he actually donated at them--the labs all say he was THERE in person!)
And that goes without saying how many parents are not reporting their pg's and live births to their labs. I think that there is no way to track 1/2 sibs at this point without serious change and process!!!!
I am sure the actual numbers of 1/2 sibs with certain donors is ASTONISHING!!!

4/29/08 | <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/10527>

Two years ago I dealt with a similar situation. CLI sold one of my last two vials. They said that they were having computer glitches at the time. They were not helpful at all. These vials were from the same donor that I conceived my first child with. I was devastated. We went back and forth for months and finally I got an attorney involved and their disposition changed immediately. They found the donor, asked him to come in and donate again. (They wanted me to pay for his transportation, which I didn't.) He agreed to come in and donate. In the meantime they gave me another person's vial of the same donor. Once the sperm came out of quarantine they reimbursed the other person with another vial. It was a mess. I would encourage you to not let this pass by.

3/14/08 | <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/10249>

Here's an old article (I don't have a link that works) where John Olson, former owner of Cryogenic Laboratories, Inc. talks about 20 year old frozen sperm successfully used:

Minnesota
Medicine
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Life On the Cutting Edge
By Kim Palmer

The rewards of helping infertile couples build families have drawn biologist John Olson and attorney Judith Vincint to the cutting edge of assisted reproduction. Working on the frontier of assisted reproduction, where the technology races far ahead of the law and public acceptance, brings unique frustrations and rewards. John Olson, executive director of Cryogenic Laboratories, and Minneapolis attorney Judith Vincent, both 55, have experienced that firsthand. Olson, a biologist, runs a Roseville-based sperm bank that was the first of its kind when it opened in 1970. He helped establish many of the standards that now govern the industry. Vincent, who specializes in adoption and surrogacy law, is trying to launch the state's first center for surrogate births. Both of these pioneers have encountered critics and skeptics. But both have found the criticism a small price to pay for the rewards of helping infertile couples create families.

John Olson

Pushing the Scientific Envelope

John Olson, M.S.T., was a biology teacher in his 20s, fresh out of graduate school, when he began the series of experiments that changed the course of his life. He and a couple of friends were experimenting with freezing dog kidneys at the University of Minnesota's St. Paul campus. "It was a fun thing to do," Olson says in a matter-of-fact tone that implies that freezing animal organs is just an ordinary, everyday activity. Olson and his friends talked with a world-renowned expert who'd developed a technique to freeze animal semen. "We said, 'Let's try it for humans,'" Olson recalls. The early experiments showed promise, so Olson's friends, Art Beisang, a local biologist, and Robert Ersek, M.D., now a cosmetic surgeon in Austin, Texas, formed a company, Genetic Laboratories, in 1970. It was the first private sperm bank in the country, Olson says. "There was one other sperm bank, at the University of Iowa, but it was a research facility."

The new company marketed its services to physicians, targeting their male patients who were about to have vasectomies and might want to bank their sperm in case they changed their minds. Olson, who was still teaching, was hired to open offices in other cities. "I would build labs and train people to work in them," he says. "I'd get on a plane Friday afternoon, build a lab, come back on the red-eye and teach school Monday morning."

The business was not an immediate success. For one thing, few vasectomy patients seemed interested. "They didn't want any more kids," Olson says. The company recruited a few donors in hopes of marketing to couples who did want children, but most inseminations at that time were done with fresh rather than frozen sperm. The medical community doubted the viability of frozen sperm. "A paper came out saying you could freeze sperm for only 30 months—then it went bad," Olson says. "We had to fight that battle." The company also battled public opinion, mainly articles and letters to the editor claiming that artificial insemination was unethical because it was unnatural. Genetic Laboratories was ahead of its time.

By 1973, the partners were trying to diversify into more profitable areas. They bought a small Pennsylvania-based business that harvested pigskin to treat burn patients. Olson was dispatched to Philadelphia, where he packed the equipment in a truck and brought it to Minnesota. He then developed a process to sterilize and freeze the skin so that it could be sold to hospitals around the country. The process revolutionized the industry, Olson says, and Genetic Laboratories finally took off.

Two years later, Ersek saw a need for an arterial vascular shunt that wouldn't roll out of place once it was inserted in the patient's body. Olson created a shunt from a human umbilical cord with tiny "hairs" cut into the surface, which helped lock it in place. "Now Genetic Laboratories had three businesses: the skin bank, the vascular shunt, and the sperm bank," Olson says. The sperm bank was by far the least successful, and the partners decided to close the satellite offices. Olson spent another series of weekends flying around the country to shut down the out-of-state labs.

By 1976, Olson's partners were looking to get out of the frozen sperm business entirely. "Art said [to me], 'This sperm bank is becoming an albatross. Want to buy it?'" Olson recalls. He did, although he continued to work around his teaching schedule, often getting to the lab at 5 a.m., then heading to his classroom. He made enough money from sperm storage fees to pay the rent on his facility, which had been relocated from Minneapolis to Roseville, but not enough to pay himself a salary. His former wife, Janice, and their children, Kristin and Erik, helped out on weekends. The company, now called Cryogenic Laboratories, was still tiny. "I had no great visions of it being big," Olson says. "It was sort of a hobby."

Demand Grew

But in the 1980s, the landscape began to change. For one thing, the pool of adoptable babies in the United States was dwindling, as unwed motherhood became more socially acceptable and abortion became more common. Without babies to adopt, infertile couples were demanding treatment, and the medical profession had to come up with options. As demand for sperm donors increased, Olson developed a catalog listing donors and their characteristics, which he sent to doctors' offices so that patients could choose a donor. This was a departure from the standard practice at the time; typically, a physician would send a patient's characteristics to the sperm bank and the sperm bank would select a match.

Then the AIDS crisis hit. In 1985, the Centers for Disease Control determined that HIV could be transmitted through semen and that the virus could lie dormant for up to six months after infection. Instantly, frozen semen became a desirable alternative to fresh because donors could be tested for HIV six months after donating to make sure they were virus-free at the time of donation. (The CDC and the American Society for Reproductive Medicine now recommend frozen sperm as the standard of care because it greatly reduces the risk of sexually transmitted diseases.)

At the same time, insemination technology had progressed to the point that the optimal time for fertilization

was narrowed to a 12- hour window. Getting a fresh sperm sample and performing the insemination in that amount of time was problematic—which gave frozen semen another advantage, Olson says. Concerns about its viability had started to diminish. "We've got semen we've had here since Day 1 with no loss in viability if there's proper storage," he says. He notes that he has seen successful pregnancies result from sperm kept in frozen storage for 20 years.

By the mid-1980s, Olson had become a nationally known expert on cryopreservation of human semen; he lectured around the country and overseas. "There were no standards, so you had to set your own," he says.

Olson helped develop the standards now used by the American Association of Tissue Banks.

In 1988, Olson was able to leave his teaching job, but just to be on the safe side, he requested a five-year leave. He extended the leave five years later, and finally "retired" from the Roseville school district last year.

Cryogenic Laboratories, with offices in Toronto and New York City as well as Roseville, is now a \$1.5 million business. Still, Olson says, "It's not real profitable. There's so much overhead."

Olson's family is still involved in the business. Kristin works in the office, dealing with patients, and Erik is a lab assistant and works in client services in the urology division. Olson's wife, Lois J. Olson, is co-owner of the business and is proprietor of Recollections, an antique shop. His stepdaughter, Heather Hoglund, works in data management.

Declining Sperm Counts

Olson's biggest challenge today is finding suitable donors. Cryogenic Laboratories accepts fewer than 5 percent of the men who offer to donate. Donors are tested for more diseases, such as cystic fibrosis, than in the past.

But the majority of donors are rejected because of inadequate sperm count. "Sperm counts are significantly reduced," Olson says. "It's scary." He attributes the drop to stress, environmental pollutants, and food additives. Some specialists believe that by the year 2010, only 5 percent of men will meet the sperm-count standards required to be a donor. Several national organizations are researching this subject. "I've got records that nobody in the world has," Olson says. "The CDC wants our sperm for research, and we happily provide it. The NIH has contracted for us to hire someone to tabulate our data, and we'll be publishing something shortly."

About one-fourth of donors are college students trying to make a little extra money, Olson says. (Donors receive \$150 to \$250 for four to six appointments.) The rest are professional men, motivated less by money than by a desire to help others bear children. The maximum age for donors is 40, Olson says. "We prefer them to be under age 38 because we want time to spend with them. We invest almost a year before we can use them." Cryogenic Laboratories continues to work on the cutting edge. Olson has launched two new affiliated businesses: ReproTech, which stores frozen embryos for IVF centers and will help provide couples with donor embryos; and CryoTech, which freezes and stores umbilical cord blood, the cells of which can be used for autologous transplants for some cancer patients. Olson is working on a new procedure to cryopreserve testicular tissue so urologists can use it to perform inter-cytoplasmic sperm injection (ICSI), a procedure that injects one sperm cell into an egg. "The conception rate [with ICSI] is extremely high," says Olson. He points out that the new technology offers hope to paraplegics and other men who may not be able to ejaculate. (See related article, page 27.)

Olson hopes to get his message of pretherapy semen cryobanking to more physicians. One survey showed that a majority of hematologists and oncologists don't inform their male patients that they may become infertile as a result of radiation or other treatments and might want to bank their sperm. "This is an education process that I've failed at," Olson says. "One of the most disheartening things I've ever experienced in my life was having a booth at an oncology conference. The nurses thought it was exciting. But the oncologists walked by and laughed." Only six doctors stopped at the booth during the three-day conference, he says.

Fortunately, there are plenty of rewards. "When I sit under the apple tree and contemplate life, it's majorly exciting that what I do today will be here until the end of time," Olson says. "A child is born. That child will beget children. That to me is a great reward."

Judith Vincent

Doing Battle for the Babies

Minneapolis attorney Judith Vincent once took the MMPI (Minnesota Multiphasic Personality Inventory) as part of a college course. "All my scores were in the normal range, except that it said I tended to be a conformist," she says wryly.

So much for MMPI scores. Today Vincent is a lightning rod in the storm surrounding surrogate motherhood. Her announcement earlier this year on a public radio show that she intended to open the state's first surrogacy center led to an explosion in the Legislature, she says. Critics, likening surrogacy to "baby-selling," introduced a bill to make paid surrogacy illegal in Minnesota. Vincent and her supporters countered by lobbying for a bill

requiring that surrogacy centers be licensed, similar to adoption agencies. The issue will be debated in Legislature during the next session. "It's hard to judge what will happen," Vincent says. "If I was going to give odds, I'd say our chances are 50-50." Vincent wasn't surprised at the negative reaction to her plan. "I was expecting it; I've been through this before," she says. "I know what's going to be thrown at me." Nine years ago, a bill making it illegal for attorneys or others to arrange adoptions for a fee and banning all ads for adoption made it to the floor of the House, but was killed in the Senate. "It was a firestorm," Vincent recalls. "You're on the cutting edge, and you're going to have opposition. I have to take [this issue] on as a crusade." She may be ready for battle but she doesn't relish it. "I hate lobbying," she says.

The problem, as Vincent sees it, is that today's medical technology is light years ahead of the law. Minnesota is not among the 14 states that have passed laws regulating surrogate births. "In Minnesota, if you give birth, you have parental rights," says Vincent. "If the intended parents back out, it's [the mother's] problem." Courts in other states have looked at "intent to parent" when determining parental rights, but to date, no cases in Minnesota have tested the law.

That's not to say there haven't been surrogate births. Vincent handles 10 to 15 surrogate birth adoptions each year. About half of those involve women who are personally involved with the adoptive parents, such as a sister, cousin, or close friend. The other half involve strangers who are paid to carry a child for an infertile couple.

Vincent sympathizes with some of her critics' arguments. "People say, 'There are so many kids already who need homes. Why create more?' It's a legitimate issue." Vincent adopted her own two children, David and Lara, in the 1970s for that reason; she has not experienced infertility firsthand. "The problem is, a lot of these kids now are not available for adoption," she continues. Many children born into less-than-ideal homes don't become available for adoption for years, until they're 4, 5, or 6 years old, Vincent says. "The system takes so long. Most people want a baby so they can have control over its early environment."

Vincent sees a great need for a surrogacy center, which would match surrogate mothers with infertile couples and provide all the nonmedical services associated with the pregnancy and adoption. "We would provide professional safeguards for all the people involved," Vincent says. "One of the key problems is that people get hooked up over the Internet with someone they don't know. They are matched with a surrogate, then the psychological testing is done. That's backward. They should do the testing first. The surrogate could turn out to be off the wall, but the parents are still tempted to go ahead—to them, that's a baby, and they don't want to give it up."

Screening works both ways, Vincent notes. Surrogate mothers want to be assured that the child will be raised in a good environment. The center also would offer ongoing counseling. During adoption, birth mothers typically receive counseling and support. But there's no such requirement for surrogate mothers. "Once pregnancy is achieved, you're on your own," Vincent says. "Studies show that if there's ongoing counseling, there are fewer problems with people changing their minds."

Financial arrangements would also be administered by the surrogacy center. A couple typically pays a surrogate \$10,000 plus money to cover expenses such as health insurance and maternity clothes. The center would help ensure that intended parents aren't charged for inappropriate expenses, Vincent says, and would protect the surrogate as well: "Once you're pregnant and the money doesn't show up, you can't be unpregnant and go back to work. [The center] would provide some security."

From Classroom to Courtroom

Vincent, who was born in Buffalo, New York, and graduated from the University of Buffalo, began her career as a teacher in 1965. "In those days, women didn't go to law school, or if they did, they were hidden away writing," she says. "What I enjoy is working with people." She taught high school history for about 10 years and developed an interest in alternative education. With her husband and another couple, Vincent helped start an alternative private school in Minneapolis called Second Foundation, which both her children attended. "We wanted to get away from the rigidity of public education," she explains. Rather than forcing children to learn prescribed lessons, she wanted to create an environment in which children want to learn. "We don't want them to lose their curiosity, their eagerness to learn," she says.

Shortly after Vincent began law school at the University of Minnesota in 1975, her interest in family law emerged. "I was most interested in people-oriented law, things that affected families," she says. "I liked juvenile court. I felt I could make a difference in cases involving abuse and neglect."

As her adoption practice grew, she found herself gradually handling more surrogacy cases. By the time couples come to Vincent to arrange a surrogate birth, often they're exhausted from years of infertility treatments. Others seek surrogacy before undergoing the full range of infertility treatments because they want to invest in a more likely outcome than in vitro fertilization.

Sometimes women who want to be surrogates contact Vincent. "Surrogates tend to fall into two categories," she says. "Some are motivated solely by money. Others have altruistic motives—they want to help a couple. Those are the surrogates everyone wants. I wouldn't advise anyone to work with [those motivated by money]." She explains, "How much money is enough? Some of them try to take advantage of the couple. They keep asking for more money: 'If you don't want me to smoke and drink, pay me more.'"

Many surrogate mothers are recruited over the Internet; others through newspaper ads. Surrogates generally must be between 21 and 35 and have had at least one successful pregnancy, Vincent says.

Calling on Doctors to Join the Debate

Vincent would like to see the medical community, particularly fertility specialists, get more involved in the surrogacy debate. "They need to be in the discussion or they'll be cast as the villains," she says. People who oppose artificial methods of facilitating birth sometimes see medical professionals as amoral technophiles willing to do anything to advance research. "Doctors need to show that they're intelligent and ethical, not mad scientists," Vincent says. "There's a backlash against the medical community in this area. They're not seen in the same light as cancer researchers. They need to be in the debate to show, 'We are good people. We are concerned.' They also have the technical knowledge to tell us where we're going. The Legislature looks at the here and now. It rarely considers the 'what ifs?'"

What keeps Vincent motivated to continue fighting on behalf of surrogacy? "The babies," she says softly. "When you're working with a family who wants to parent, you've helped create that family. Wanting to parent is such a basic human desire."

Traditional adoption is bittersweet, she says. "Usually the pregnancy is unplanned, and the [birth] mother has mixed feelings. She feels wonderful about giving her baby to people who want to be good parents, but there's some sadness. With surrogacy, it's planned. The mother has gone into it trying to get pregnant for that couple. The majority of [surrogate mothers] say, 'I can't tell you how satisfying it is to do that for parents.' In the vast majority of cases, it's a happy outcome. It's the happiest area of law. I don't know what else you could do that would be so rewarding."

Kim Palmer is a Twin Cities-based free-lance writer who frequently writes about health care issues.

3/14/08 <http://www.startribune.com/stOnLine/cgi-bin/article?thisSlug=CRYO14>

Melissa Levy / Star Tribune

John Olson remembers that his son and daughter dreaded those days when teachers asked what their father did for a living. Their first response: "He works at Cryogenic Laboratories."

But they weren't off the hook. Without fail, the teachers always wanted to know what that business did.

Olson's hand covered his smile as he imitated his children mumbling, "It's a sperm bank."

In 1970, Olson helped start a business to freeze and store the sperm of men who were about to have vasectomies. It was the nation's first commercial "sperm bank" -- a phrase that the company trademarked in 1972.

Today, Roseville-based Cryogenic Laboratories Inc. is one of the largest sperm banks in the United States, with annual revenue of about \$1.6 million.

The privately held business is about to triple the size of its local office and may expand to Mexico. It also has affiliate sperm bank operations in Toronto and New York City.

Cryogenic ships about 800 vials of donor semen to doctors each month, helping countless women become pregnant. The company also freezes and stores sperm for men who are having cancer treatments or vasectomies.

"There's no other business where what I do today will be here forever," said Olson, Cryogenic's executive director. "If I sell a can of beans, somebody eats it and that's done -- big deal. If I sell a piece of furniture that's guaranteed never to wear out, it's going to wear out and you can buy another one. But what I do . . . it's going to be here and I take that pretty darn seriously."

These days, there are fewer whispers and jokes about sperm banks and more debate about whether the field should be regulated by the Food and Drug Administration (FDA). And some are pondering the ethics of genetic manipulation and sperm banks that market donor semen on the basis of beauty and brains.

Consumers are becoming more aware of alternative fertility methods. Most major sperm banks, including Cryogenic, publish their sperm donor catalogs online. The Cryogenic Web site (<http://www.cryolab.com>) also features a price list and a virtual tour of the Roseville facility.

In years past, doctors placed most of Cryogenic's orders for donor semen vials. Now it is just as likely that the woman wanting to become pregnant will choose her donor and have the order shipped to the doctor. Because

there is very little formal oversight of sperm banks, it is difficult to know exactly how many there are in the United States.

The American Association of Tissue Banks accredits about a half- dozen sperm banks, including Cryogenic. The FDA -- which has considered regulating sperm banks for several years, but has yet to do so -- said in a recent report that industry data showed 110 U.S. sperm banks in 1996.

According to Olson, Cryogenic and California Cryobank Inc. control most of the market. Los Angeles-based Cryobank, which would not reveal its revenue, is considered the largest sperm bank in the country.

When discussing sperm banks, Cryogenic "is one of two labs you think of in the United States," said Dr. Jon Pryor, director of the Center for Men's Health and Infertility at the University of Minnesota's Fairview-University Medical Center. "We're really fortunate to have them here."

Olson, a former Roseville high school science teacher, is known in the industry as a sperm banking pioneer. Doctors and competitors alike praise his values and strict attention to sample quality and safety.

"They're thought of very highly," said Dr. Charles Sims, co-founder and medical director of California Cryobank. "I think the way they do business is the way you should do business."

Olson, a self-described religious man, doesn't see his job as "playing God." He frowns on genetic manipulation and those who recently have made highly publicized efforts to sell the reproductive tissue of models to the highest bidder.

"I'm giving an option to people to have children who would not have any other option," Olson said, explaining why he has been in the sperm banking business for nearly three decades.

Olson and two friends had the idea for the business that would become Cryogenic in 1970, shortly after Olson finished his master's studies in North Dakota.

One day at the University of Minnesota, the trio began chatting with a staff member who was an expert in the field of freezing animal semen. Olson, who volunteered at the St. Paul campus during school vacations and weekends, and his friends wondered whether the same procedure would work with human sperm. There was evidence it would: A baby was born through use of frozen semen for the first time in 1953.

About 600,000 men were having vasectomies in the United States each year at that time. The trio thought they could have a successful business if at least 10 percent of those men wanted to freeze and store their semen for possible future use.

"This was going to be the most revolutionary thing ever," Olson said.

The business -- named Genetic Laboratories Inc. -- was launched in August 1970 and went public about a year later. Olson soon helped set up sperm banks in Chicago, Los Angeles, New York and San Francisco.

But the business partners found little demand for their service, because most men having vasectomies were doing so because they did not want to have more children. The partners moved most of their national operations back to Roseville, and began to focus on other businesses -- such as freezing and storing pigskin for use on burn patients.

Although the sperm bank was floundering, Olson bought that part of the business from his partners in 1976.

He named his venture Cryogenic Laboratories. Cryogenic began to thrive in the next decade, as fewer babies were offered for adoption and people who had problems conceiving began to explore fertility options.

The major boost to the sperm banking business was the discovery of the AIDS virus. Rather than using fresh semen for artificial insemination and assisted reproductive technology, doctors began to demand frozen specimens that had been properly quarantined and tested to be sure they did not carry the AIDS virus or other disease.

"From that point on, it went crazy," Olson said. "We didn't jump on the bandwagon; we were the bandwagon."

In 1993 in the United States, 267 in vitro fertilization (IVF) centers attempted 31,900 conceptions. That number grew to 335 IVF clinics and 71,826 attempts in 1997, the most recent industry data available.

Cryogenic currently has about 90 men on its sperm donor catalog. The pages read like singles ads, with headings for race, education and hobbies, along with criteria such as blood type and bone size. The business accepts less than 5 percent of donor applicants, Olson said. The reason: There are stringent genetic and health testing requirements. Donors also need to have "above average" sperm counts to make up for losses during the thawing process. Donors must make their deposits in person and submit to a detailed interview and monitoring process. The minimum commitment at Cryogenic is weekly visits for at least a year.

"It's the most difficult problem I've ever faced in all of my years, and it's still the No. 1 problem -- finding quality donors," Olson said.

To meet nationwide demand from doctors, Cryogenic has contracted with four other U.S. sperm banks for additional inventory. Olson said that one of the reasons his company opened the first commercial sperm bank

in Canada was to get more diverse donors -- such as black, Jewish and East Indian men. Those kinds of donors are more difficult to find in the Twin Cities area, he said.

To further boost its donor supply, Cryogenic has acquired the inventory and equipment of former sperm banks in Chicago, Omaha and Washington, D.C.

Because many people want donors with a high level of education, Cryogenic advertises in the Minnesota Daily - the student newspaper at the University of Minnesota -- and distributes fliers at local colleges.

"You put a guy on there that says 'M.D.' and you can't keep him in stock," Olson said.

Cryogenic's primary source of new donors is its listing in the Yellow Pages. Olson long ago fought with U S West to get a "sperm bank" category. It is the only business listed there.

While the majority of Cryogenic's business is shipping donor semen to doctors, it has been trying to boost its sperm storage business.

For example, men who need cancer treatment or surgery -- which may leave them infertile -- can store sperm before the procedure. They can make their deposits in person, or ship specimens via the "CryoFly" kit that Olson developed several years ago. The kit includes a preservative fluid that protects the semen during shipment.

But even though cryopreservation technology is available, many doctors don't think about recommending storage to patients.

"It's an ongoing struggle to get the word out to make people aware that this option is possible," said Erik Olson, John Olson's son and Cryogenic's client service representative for the Urology/Oncology division. John Olson's daughter and two stepchildren also work for the company.

Before a vasectomy is an ideal time to store semen, sperm bank officials said. Even men who don't plan to have more children may change their minds after remarriage or some other life adjustment.

"When we buy fire insurance, we don't do it with the expectation that our house will burn down," said Sims of California Cryobank.

In the past decade, John Olson has formed a number of businesses related to Cryogenic. Reprotech stores human reproductive tissues from other facilities. Cryotech freezes and stores umbilical cord blood.

Gambriotech hopes to work with freezing eggs. Cryo International plans to distribute donor semen to foreign markets.

Cryogenic hopes to establish a sperm bank in Mexico within a year, which will serve that country but also become a "major shipping point" to South America, Olson said.

Olson hopes that the FDA will get involved in regulating sperm banks, closing down those that don't meet what would become the industry standard. "They are going to help us eliminate competition," he said.

Olson's wife of nine years, Lois, is half-owner of the 15-employee Cryogenic business. While her primary business is running an antique shop, the two consult frequently. That will become easier when she moves her shop to the front of what will be a 12,000-square-foot office.

A part of the Cryogenic building expansion -- to be completed by the summer -- will be adding basement storage to better protect the sperm specimens stored in numerous tanks of liquid nitrogen.

Some of the samples are 30 years old -- and irreplaceable. "I've got a lot of futures back there," Olson said.

3/13/08

<http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/10246>

Well, I think my kids' sibling numbers just increased a lot, from the 24 that we know about (all in the U.S.) because of geographical restrictions to a lot more (although the 24 number was probably a lot higher already because not all people report their births). I used CLI, and he was available there from at least 1986 until 2002. I knew he was on the Repromed 2002 list, but I just found him on the Repromed 1993 list, too. I think I remember something a while back being said about Canadian patients not getting any information on the sperm bank used or the donor himself. Anyone who used any clinic and was not told where the vials came from should seriously consider doing the DNA testing at CaBRI. I have both my son and daughter's DNA they got from our donor on file there, also my son's is at Family Tree DNA. Others have put their kids' DNA on file too, so maybe there is a match out there you Canadians don't know about (and a donor number and sperm bank used). I know that Repromed started in 1990, so anyone who conceived after that and doesn't know where the vials originated, please consider contacting CaBRI, being you can't get any answers from your clinic or doctor. This would probably also pertain to the other sperm banks that are in Canada, depending on when they started and if the secrecy (not telling patients where the vials came from) was around during that time.

3/13/08

<http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/10245>

A Repromed 1993 donor list was just uploaded to the files section here on the Yahoo Group. There are quite a few CLI numbers on it. CLI recipients and Repromed recipients may want to look at both lists.

2/26/08 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/10170>

The agreement I had to sign (below) to receive the lifetime photos does say that the recipient and the offspring will not try to track down the donor. It is an interesting question as to whether posting on the DSR is in violation of either the donor or recipient contract. I would think that if I posted about my child because I wanted to make contact with siblings and the donor happened to see the posts and want to make contact it would be assumed that it was of mutual interest. And if the donor was the one to make contact or make himself available via a posting, who would be the one to complain? The agreement below is to protect the donor's identity but if he chooses to give that up by posting on the DSR he is giving up his own rights to remain anonymous. Who is the sperm bank to tell him he can't do that? Most of the donors I have seen that have Lifetime Photos available are ID consent anyway so they know their identity will be revealed at a future date. I actually purchased my donor thru CLI but they are owned by the same company as Fairfax so it is the same form. CLI charges \$75 for a baby + adult or \$100 for the lifetime series. Fairfax makes a ton of money on the baby photos, audio interviews and long profiles. I find it interesting that while owned by the same company, Fairfax charges for all of this stuff and CLI makes it available at no charge as a download on their website. Fairfax is more expensive for their samples as well.

PATIENT CONSENT AGREEMENT

We, the undersigned recipient (and her partner if applicable) understand and agree that we have chosen to participate in the Donor Photo Program of the Genetics & IVF Institute Cryobanks Division (hereinafter GIVF Cryobanks) for Donor # _____ (Donor). We understand and agree to the following conditions:

1. We understand that we must sign and return this consent and release form to GIVF Cryobanks before GIVF Cryobanks will ship photograph(s) of the donor. If we are requesting photographs on multiple donors, we understand we must sign and return a separate consent and release form for each donor.
2. We, on behalf of ourselves and any Offspring, hereby irrevocably and unconditionally release and discharge GIVF Cryobanks and its past, present, or future directors, employees, and affiliates, and the donor from any and all claims, actions, liabilities, charges, costs, demands, debts, obligations, and expenses (including reasonable attorneys' fees and legal expenses) of any nature that we or any of our Offspring, heirs or assigns now has, ever has had, or may in the future have related to the Donor Photo Program. We hereby agree that we shall, and shall cause our Offspring, heirs or assigns to refrain from bringing any legal or equitable action against GIVF Cryobanks or the GIVF Cryobanks' Affiliates for any reason in any way related to the Donor Photo Program.
3. We, on behalf of ourselves and any Offspring, agree to keep anonymous the Donor photo(s) received from GIVF and not publicize or otherwise publish the photos for any reason. We, on behalf of ourselves and any Offspring agree not to attempt to contact the Donor or attempt to discover the identity of the donor, including personal information about the Donor. We agree that we will, and will cause any Offspring to hold the photo(s) in strict confidence. We acknowledge that any attempts by us or Offspring to contact the Donor or publish the photos would cause immediate and irrevocable harm to the Donor and would be the basis for obtaining an immediate injunction.
4. I and my partner (if we are married) will be named on the birth certificate of any child born using a semen donation from the Donor. We understand that the Donor will have no legal relationship, rights or obligations to any child born using his donated semen.
5. This agreement shall be binding upon ourselves and our Offspring, assigns, heirs, executors and administrators. This represents the entire agreement between the parties concerning the subject matter; and there are no understandings, agreements, or representations other than as herein set forth. The agreement shall be binding upon the parties and their respective assignees, heirs, executors, and administrators. This agreement shall be construed in accordance with the laws of the State of Virginia, USA.

2/26/08 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/10167>

I wonder how registering, posting and making mutual consent contact on the DSR fits into this contract? How can they say that this contract is binding "...upon the parties and their heirs..." Not sure how children can be legally bound by this contract, if they never signed it.

DONOR PHOTO CONSENT AGREEMENT

I, (Donor), am a participating in the donor program conducted by Genetics & IVF Institute Cryobanks, and I agree to participate in the optional Donor Photo program.

I agree to provide (circle one):

1) Profile and head-on photographs of myself as an adult. These photos may be provided by myself, but if the quality of the photos is not satisfactory to the staff of GIVF Cryobanks, then photographs will be taken of me at GIVF Cryobanks' expense.

OR

2) A Lifetime Photo Portfolio with pictures of myself at the following ages: infant (under 6 months), toddler (2-3), 1st-2nd grade (5-7), junior high (11-13), high school (15-18), college (20-24), and adult. If the quality of the adult photo is not satisfactory to the staff of GIVF Cryobanks, then photographs will be taken of me at GIVF Cryobanks' expense.

I understand that the Genetics & IVF Institute Cryobanks may provide these items to potential recipients and their healthcare providers. I understand that there exists a risk that I may be recognized in public from one of the photos I provide and I accept that risk of having my identity known. I further understand that even though my physical likeness will be made available to potential recipients and their healthcare providers through the Photo Program, contact information including name, address, and telephone number will not be revealed to potential or actual recipients. Except for the release of the photo(s), all aspects of the semen donation are anonymous. I understand that my identity will not be released except as may be required by legal or judicial process.

I agree not to attempt to discover the identity of the persons for whom I am donating. I will not be named on the birth certificate of any child born using my semen donation. I understand that I will have no legal relationship to any child born, nor will I have any legal rights or obligations to any child born through my donation. In the same way any child born will have no legal relationship with me, no rights and no obligations to me. I will not pursue any parental claim to any child that may be born from my semen donation, including seeking knowledge or information about whether a child was born. I will not attempt to contact the child or children, or any recipients. I will not seek visitation rights, nor seek to establish a parent-child relationship with any child born as a result of my donation.

This agreement shall be binding upon the parties and their respective assigns, heirs, executors and administrators. This represents the entire agreement between the parties concerning the subject matter; and there are no understanding, agreements, or representations other than as herein set forth. This agreement shall be construed in accordance with the laws of the State of Virginia, USA.

I understand that if I have questions about the program, I may contact the cryobank staff at my donation site.

2/13/08 | <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/9988>

A donor conceived person who's mom used NYU in the 1970's was told by them, as well as Idant, that, "there were only about 3 or 4 places that were even in "business" and serving as sperm donors in NY in the early 1970s. CLI (yes, formerly known as Genetic Labs) was one of them. I spoke to someone at CLI as well, and they confirmed for me that they indeed were shipping specimens to NY in the early 1970s and that they still do maintain records from the 1970s."

2/13/08 | <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/9984>

Perhaps your experiences were more recent than some of the others. I know at the time that my son was born there was no website to report the information. That was in 2004. In early 2006 I called to try again when I had twins and again, was told that they dont take this information from recipients. Perhaps it has been some of the feedback from this very website (donorsiblingregistry.com) that prompted them to change how they handle this situation as I know we have discussed this topic before. I'd like to think they check for positive and negative comments from recipients!

2/12/08 | <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/9966>

I'm not sure why other people are getting this information. You can report a pregnancy and live birth on CLI through their website. I called to give them the info and they told me where to go on the website. No-one suggested it had to be done through the MDs office, and they were pleasant and thanked me for the info... Here's the link:

<http://www.cryolab.com/Default.aspx?section=postconceptionservices&page=pregnancyReport>

2/12/08 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/9962>

Fairfax and CLI are owned by the same parent company. Genetics & IVF Institute.

2/12/08 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/9957>

Frankly, CLI has not been a positive experience for me. They won't allow anyone but the Dr. Office report a birth. Beyond that however, when I was ready to try to conceive again from the same donor of my daughter, I called to have them send two of my already purchased samples to the Drs. Office and was informed after a bunch of phone calls that they had sold my vials to someone else. My donor was out of the program and had no more vials available. After getting my attorney involved, they finally had the donor come in and donate some more. Much to my dismay, they wanted me to pay for his transportation. I did not. Although he came back into the program specifically because of my lost Vials, they only offered to replace my lost ones and wouldn't let me purchase more until they exhausted the waiting list for this donor. Except for my beautiful daughter, the CLI experience was not a great one.

2/12/08 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/9955>

CLI refused to take my daughter's birth information too, stating it could only be reported by the doctor's office.

2/12/08 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/9953>

CLI mom (not registered on DSR) tried to register her 2 kids with CLI. They refused her saying that she didn't have a "order number". She tried on line, same thing - could not report without an order number. She ordered from them directly too. So, her kids are therefore not registered with CLI.

And another:

"CLI refused to take my children's birth information when I called to check in with them. I tried to push it with them as it had been over 6 mos since the twins were born and my Dr had not updated them but they insisted they receive the information from the Dr. Needless to say, the counts that CLI has for births from my donor will not be accurate which leads me to believe that other things might not be accurate either!"

2/12/08 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/9952>

CLI and Repromed refuse to give donors their numbers. (Some donors forget or never received their numbers). This makes it extremely hard to make themselves available for contact. I spoke with a CCB donor over the weekend who said he has tried several times to call California Cryobank to update his medical history, and no one will return his phone calls. I have many parents-to-be writing me to ask my opinions of sperm banks (more than 50 this past weekend). Issues like these are very important to pass along.

2/10/08 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/9894>

I mailed out more than 400 letters a few weeks ago to sperm banks, clinics, Reproductive Endocrinologists, and infertility doctors asking them if they would include a DSR information sheet in their "new client" packets. I only have ONE respondent- Xytex, who asked for 500 of the info sheets, to include in every new patient packet that they hand out or mail out. This information sheet tells people about the DSR and a child's possible curiosities in a very non threatening and friendly manner.

What does this tell you about the infertility industry? That they just do not want to acknowledge the needs of families post pregnancy. There is an industry meeting on March 28th, in Chicago, for further discussion on the "Feasibility of a National Donor Registry". There is not one donor conceived person that has been asked to speak or participate in any manner at this event. I am the only mother of a sperm donor conceived person asked to speak. (One egg donor mother as well) I hope that some of you will be able to attend this meeting so that the industry can hear your voices. It makes you wonder who's needs they are looking to serve in "self regulating". Certainly not the donor families....

10/21/07	Email to Wendy Kramer
<p>I used Cryogenics Labs (CLI) in 2007. I was very happy with my experience - was able to get all the info on the donors on the web for free (except for personality inventories) which allowed me to make a choice without having to narrow down before having all the information. It was a very smooth transaction and the two vials I used had good numbers.... It was a willing to be known donor.</p>	

9/14/07	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/8915
<p>Regarding availability of open/willing to be known vs. anonymous donors: My experience is very recent. I began working with a fertility clinic in February and am now eight weeks pregnant. The fertility clinic is large and reputable, and I trusted their choice of sperm banks. They work with four, including California Cryobank (CCB), Cryobiology, Cryogenic Labs, and Pacific Reproductive Services. Of these, CCB had a substantial number of open donors - maybe 25% of their large inventory. Even so, I had to get permission from the clinic to waive a medical concern - CMV status - to allow me to find a donor who was open and of the race that I wanted. Had my clinic not been willing to allow me to use a CMV-positive donor (I am negative), I would have been forced to choose between the donor's race and whether he was willing to be known. Race and openness are both choices that have a potentially huge impact on a child's life. It would have been very difficult to choose between the two. And CCB is one of the largest sperm banks around, with one of the largest inventories. As for the other three banks, Cryobiology had just eight open donors. This was not indicated in their catalogue; I had to e-mail them to find out. Cryogenic, like CCB, had a substantial number of open donors, as did Pacific Reproductive Services, and I imagine that my selection at those banks would have been similar to my options at CCB. About 80% of the population is CMV positive, so if my fertility clinic had been unwilling to allow me to use a CMV+ donor, I would probably have been similarly limited in my donor options at those banks, as I would have been at CCB. I was lucky enough to have a fair selection of open donors, though there were significant constraints within that selection. In addition, open donor programs appeared to be new, and one bank didn't have much of a program to speak of. I live in a large, liberal metropolitan area and had my choice of several fertility clinics, two of which are quite large. The clinic that I did work with used four sperm banks, so I had a range of options there as well. However, if I lived in a smaller, more conservative city, my options for fertility clinics, and thus sperm banks, might have been much more limited. And if I were doing this five or 10 years ago, my options might have been more limited still.</p>	

8/17/07	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/8824
<p>Dear Wendy,</p> <p>Thank you for giving me the opportunity to address your questions posed in your response below. Since my interesting out of office reply, I have received correspondence from group members who stated how much they appreciated my participation in DSR. Several mentioned how it must improve my understanding of the issues that are important to DSR members. I enjoy DSR correspondence and have been able to find additional ways to be helpful to clients who use donors to complete their families.</p> <p>Firstly, Cryogenic Laboratories, Inc. is glad that for donors that have been unavailable on our catalog for years, we can still attempt to provide updates to the medical and personal profiles including pictures. Our goal is to work with clients to provide this information. Numerous other sperm banks do not offer this service at all. Fees paid by the client are paid directly to the donor with only the search fee to be retained by the cryobank. Ideally we would like the donors to provide this information without additional compensation however we have found that without offering compensation they are less likely to reply to your requests. We have found through experience that these fees are a reasonable way to incentivize the donor to cooperate.</p> <p>Secondly, sperm banks keep detailed records about all aspects of their donors. It is important to remember however that some of the information requested could be from donors who donated over 20 years ago (CLI was founded in the early 1970's). Policies today are very different regarding donor contact from what they were years ago when these donors may have been donating.</p> <p>Thirdly regarding donor numbers, in order to protect anonymity it is our current policy not to provide donors with their respective numbers. However, if a donor truly wants to be found there are other resources available out there he can access, like DSR, even without his donor number known it is possible to connect with his</p>	

offspring. You can view CLI's privacy policy by clicking on Cryogenic Laboratories Privacy Policy. Wendy, after our last phone discussion several months ago I did take into account the items we discussed. The latest changes to our website, www.cryolab.com, are not about cost but rather about how to make the information more easily accessible. The "Just for donor offspring" is still under construction but check back shortly for its release. We have also provided a spot for children or parents to share their story as well. On the navigation tool bar, click "post conception services." Additional information is also available throughout our updated website.

Thank you for the wonderful service you provide to all and I look forward to assisting clients to the best of my ability.

Regards,

Amy Erickson Hagen

Cryogenic Laboratories, Inc

8/14/07

<http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/8815>

I agree, insanity. "If" they can locate the donor? I know that banks do not have accurate record keeping on the children born, but I am distressed to hear that they also do not necessarily keep track of their donors. This furthers my concerns about the lack of medical updating from donors.

CLI (Fairfax) is also a bank who will not release donor numbers to their donors who have misplaced or forgotten them. They make it nearly impossible for these donors to then make themselves available to families. These are donors who were one time anonymous who are now curious, or feel that making themselves available is the right or ethical thing to do.

Do other banks charge these fees as well? Can anyone else share information that they have on contacting donors or gaining medical information, updated donor profiles, pictures, etc. from other banks?

To the lurking sperm banks (please, CLI) would you care to explain as to why you feel these fees are necessary, fair and appropriate? Also, why you will not release a donor's number to him?

The way I see the CLI cost breakdown, the banks and the donors get to make more money, while the children are taken advantage of financially.

8/14/07

<http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/8813>

Since my last post to this group, where I told you all of how my daughter is really wanting to know more about her donor and maybe see his picture, and now she says hear him talk, I contacted the sperm bank we used, CLI. I found that it is possible to get an audio, some photos, an updated profile, a donor essay, some of the things that were not available back when my donor was active. But it costs an arm and a leg to do this, and I am not guaranteed anything, as the donor can say no. There is a non-refundable \$300 fee to the sperm bank just to get them to contact the donor. IF they find him, they will ask him for the things I am interested in. Then it will cost me these additional fees IF he consents to let me have them (they will only bill my credit card for whatever I end up receiving):

Paid to the donor:

personal profile w/essay \$200

essay \$100

audio interview \$200

childhood photo \$100

Lifetime Photo series \$500

Processing Fees paid to CLI:

personal profile, audio, Lifetime Photos \$150 per item

essay or childhood photo \$50 per item

I sure wish I had the opportunity to purchase these items back when he was active, as on the CLI website now, the Lifetime Photo series is only \$100, the audio CD is \$25, childhood photo by mail is \$14 (online is free), complete profile by mail is \$60 (online is free), and they offer just one adult and one child photo for \$75 on the website now, which is all I would really need (I am going to contact them to see if I can buy only the two photos instead of the series). Right now I am looking at \$1150 just for the essay, the audio, and the Lifetime Photo series. They will update the medical information for free. That is on top of the \$300 non-refundable fee. Now, if the donor would just find us through the DSR, I would not have to pay anything. How sad it that?

So, if you have lots of money or want to take out a loan, you can POSSIBLY get the more advanced options that

are available today at the sperm banks. And this is only if the donor is willing to provide what you want. It is so sad that the sperm banks kind of have us over a barrel, isn't it? It's kind of like, damned if I do, and damned if I don't, because of the outrageous fees.

11/17/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/8109>

This is on CLI's website:

How Many Pregnancies Does CLI Allow One Donor?

Because we are able to closely monitor each donor specimen shipped from our laboratory through the regularly scheduled survey of our physicians, donors that exceed one pregnancy per 100,000 population will be restricted from use in that geographical location. Donors who are geographically restricted are noted in the Semen Donor Catalogue. Please call us if you want further information concerning any restrictions your donor selection may have.

I also found this (which we have already discovered with the crossing over of some of the donor numbers):
Where Do Our Donors Come From?

Our donors come from all walks of life and have a variety of interests, values and skills. The upper Midwest has always been a great source of highly qualified donors. CLI also obtains donors from a small group of affiliates in Canada, the Midwest, the East Coast and the South, all of which are required to adhere to the same rigid standards CLI uses to recruit and screen donors. Just as important is our commitment to finding donors who are very bright, intelligent and personable people - the kind of people you want to be a friend, neighbor or associate.

11/16/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/8106>

I think if you go through the current donor list you will find more than one instance of it saying a donor has 0 pregnancies, but if you look at the profile provided it has geographical restrictions listed. I used CLI too, and on my donor's list of restrictions it says Twin Cities, MN, Milwaukee, WI, Sioux Falls, SD, Green Bay, WI, Duluth, MN, Rhinelander, WI, Fargo, ND, Grand Forks, ND, Eau Claire, WI, Brainerd, MN, Columbia, MO, Lebanon, NH, Hastings, MN, Marquette, MI, Marshfield, WI, Willmar, MN, Ames, IA, Chippewa Falls, WI, and Petoskey, MI. On my list I have two of the same that are on yours, Ames, IA and Lebanon, NH, so that makes me wonder if CLI was a provider for some clinic in those two towns (the recipients may or may not know where the sperm came from). The list seems to be chronological according to where the pregnancy occurs (I live in MN but used a clinic in SD so that is the restriction that is for my kids). So, unless you used a clinic in Mankato (I am assuming you are from the Cities), that probably is not your child's birth, it is probably an "extra" that didn't get recorded. We have found 2 of those from the DSR, one from AZ and one from TX. I think in the older days, the clinics would use a certain sperm bank, now it is getting to be that the prospective parents choose their own from whatever clinic they want. But then they know exactly what the donor number is and where the specimens come from.

11/5/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/8105>

Thanks to the fellow DSR member who alerted me to the fact that my donor was listed on the website with 0 pregnancies. I called to inform them of my pregnancy, and the 5 they told me about in 1994, plus the fact that I knew about two that were after that date. They said they would check into it, ha. They would not tell me when he started donating or ended (other than it has been a while) or how many children he had registered, but they did tell me about the geographical restrictions. Apparently my CLI Donor (lab located in the Roseville, Minnesota) is restricted in the following areas: Lebanon, NH--Mankato, MN--Ames, IA--Bismarck, ND. Is there anyone from these areas that hasn't thought to check under CLI?

8/3/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/7667>

We found out about these problems from the sperm bank after we asked question. This donor donated from at least 1986 (the first list he showed up on that I have--he may have donated before that even) and got pulled in 2002. He donated until at least 2000, I am not sure about 2001 and 2002. There were hundreds of vials left

that just "disappeared" so I think he must have donated longer than 2000. And the impression I got when talking to a couple people from there, the donor should not have been donating that long with that list of problems. He only got pulled because of the one sperm bank buying out the other one and going through all the donor records. The geographical restrictions we have from his profile (and a couple kids we know who are not listed on those restrictions) give us the 21 offspring number, those are the ones reported. We don't know about the ones who did not report their children being born. I am the mom of the autism spectrum disorder kids, and I know for a fact that I reported it in 1997 or 1998 and was told it was not hereditary but they would mark it in my file in case someone else had the same problem. Then it would be red-flagged. I found out about the cleft palate and the heart problems just recently (my kids are 13 and 15 now) when the latest sibling's mom found me through the story the Minneapolis paper did. She had just recently gotten her first health history on the donor (her child is 18) when she called the sperm bank to inquire about what was in the donor's health history. They sent her the profile they had. Whoever she talked to told her about the cleft palate, the autism, the Asperger's, PDD, and the heart problems. She let me know so I called to inquire about the heart issues to see if maybe our kids could have problems down the line. "Well, I don't know, I will have to have the geneticist call you back." When she called and I asked about the possibility of my kids or their kids having problems she told me the only way to be sure was to have echocardiograms done on my kids. She answered my questions, but only because I called and asked them. When I told my doctor of the latest developments he didn't think that my kids had any issues, as he never heard anything when examining them. So then I asked him about people who find out years later that they indeed had a small hole or other problem that wasn't caught until it got worse, he said that he would order echoes for both kids to be sure. I had to get in touch with the geneticist for her to send documentation for insurance and coding (they coded it as a family history of heart problems), and the geneticist e-mailed me a short note telling that a half-sibling was found to have heart problems, no further information was available. The one she referred to was discovered at age 7 to have an enlarged heart resulting from a small hole. I got the echoes done, and my son does have a problem they have to watch. He has to get another echo done in November (6 months after the first) to see if things have changed. He will have to be monitored for I don't know how long. Now if I had not found this sibling and her mom had not discovered the heart problems in siblings, I still would not have known about my son's problem. The sperm bank had all this information in their own notes on the donor, but it is nowhere in the profile. My profile that I got was sent to me in November of 2002 after I called to tell them I wanted a health history to see what else might be "lurking" in the future as far as health issues--and I repeated to them again about the autism and Asperger's affecting my kids. These problems (cleft palate, autism, Asperger's, and congenital heart) were already known to the sperm bank when I called in 2002 because the geneticist went back in the notes and was giving me dates of when they were reported. The whole problem is that they did not offer me any information at all until I asked just recently. How many of the parents of DI kids think they have to ask for information that should be sent to them being it has to do with their children's health? I am not angry or upset with the donor, I am glad I have my kids. I am a little upset at the sperm bank because they had valuable information they did not share with me that I really needed. How many more of these kids have a problem or problems that could be monitored if the parents and doctors knew of the possibility of their existence? I know with the Asperger's it is very hard to diagnose. I went 3 or 4 years knowing there was something going on (I picked up on it after my daughter was diagnosed with the autism at age 2 1/2 and saw similarities in my son's actions) and I was tired of hearing, "Oh, he's so smart and there is nothing wrong." Those dealing with Asperger's will know what I am talking about. It was a relief to finally get a diagnosis and know I was not crazy. Because they are thinking the Autism Spectrum Disorders may be inherited now, I am wondering how many (if any) of these siblings may be affected and if the parents are struggling to figure it out. That is why people should be notified. Not everything anymore is spelled out in black and white. And if you know about the possibility of something being there you will take the signs more seriously. Once we know about the problems though, the sperm bank was cooperative and answered my questions. It should not have taken me calling them to ask about something I didn't even know was a possibility of affecting my kids.

8/2/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/7664>

How shocking & sad to read about this case & the way it has been handled by CLI/Fairfax. Making matters worse is the fact that this man's sperm was being marketed for 20 years. Is it common practice to keep selling a donor's sperm for so long? It sure makes me wonder how many years he was 'donating' for! Moreover, it's hard to believe that there are only 21 pregnancies after 20 years. It seems likely that a great many more have resulted, & many more children & families have suffered as a result.

8/2/06	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/7662
<p>The offspring from Donor ##### have had enough problems (autism, congenital heart defects) that the donor's sperm was recently withdrawn from the market, after a run of nearly 20 years and at least 21 reported pregnancies in the Upper Midwest and elsewhere. Unfortunately, CLI/Fairfax is not voluntarily making an effort to contact the families of resulting offspring. In both the case of autism and some congenital heart defects, early detection is vital to a favorable outcome.</p>	

4/8/06	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6986
<p>I just wanted to publicly thank Amy from CLI for providing my 18 year old daughter and I with all the non-identifying information about my daughter's biological father that she had in his file. After a further exchange of emails between Amy and myself (related to my less than positive post here concerning my prior experience with CLI), we were able to figure out that some of the misunderstanding happened due to faulty batteries on cell phones on my end. For that, Amy, please accept my apologies. Amy was very sweet and understanding. My daughter and I now have a much better understanding of where she gets some of her talents and how much larger her family is. Though Amy was unable to tell us how many 1/2 siblings there are from this man's donations, she did ask if we had checked on the DSR website or posted there. To me that is very significant - I hope that becomes the normal practice of all sperm banks to refer people to the website. I also hope that it indicates that CLI will be posting a link on their own website to www.donorsiblingregistry.com soon. I think it would show any doubters how progressive they are becoming.</p>	

3/31/06	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6788
<p>I am a parent of two donor-conceived kids within the autism spectrum. I do not blame the donor or the sperm bank. Things happen in life, and I deal with them to the best of my ability. I could have had kids with another donor or with my husband if it had worked out that way, and there are no guarantees that they would have turned out perfect then either. Maybe we would have had to deal with something else, who knows? My gripe is this: even after the sperm bank has been notified that there are problems with resulting offspring, they still have not taken the effort to contact any of the recipients with valuable information that could be of help to the families that used this donor. They quit using this donor in 2002, knowing there might be some issues with resulting offspring. He has kids born from at least 1987, and the youngest was born in 2002. Have any of us who conceived with this donor ever been contacted? No. Only after I called them (after another mom who used this donor clued me in to other possible problems—she found this out when she contacted the sperm bank to ask about a medical profile which she had never gotten 17 years ago) did they give me information, and how many people think to contact the sperm bank when trying to figure their kids' problems out? It is easier to figure something out if you know what you are looking for, and they are not making it any easier for us parents who are trying to do the best for our kids. Now I am advised to get echocardiograms on my kids, and the doctor we see has no problem setting them up and can understand the reason for them, the only thing is the nurse told me I might need some sort of documentation from the sperm bank for the people who actually do the echocardiograms (they are done at the hospital). So, next week will be some more phone calls to try to get a letter from the geneticist I talked to who recommended we do this. It will be interesting, to say the least, to see if they will follow through and send me what I need.</p>	

3/30/06	http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6745
<p>It's not all about who is good or bad--my gripe is about how this bank knew of the conditions in resultant offspring and never even tried to notify the other recipients who had conceived with that donor (and there are quite a few). I am still very thankful to the donor and the bank for helping me conceive my kids, and even with the autism and Asperger's they are great kids. I would not change them for the world, as then they would not be themselves. And if there is other stuff that shows up later, so be it. At least I know now about the possible heart problems and can be on the lookout for them, but if I had not been told by another mom I wouldn't know about them. Sure, after I called the sperm bank and asked about them they were very helpful, and I appreciate that. But they should have let me know about them years ago (2002 if not before), instead of waiting for me to call them now. And the other parents deserved the same information so they could be made aware of</p>	

conditions in siblings (I am sure a lot of them do not know unless the sperm bank decides to notify them after all that is being written here). In this day and age when you bring your child to the doctor suspecting a problem it is sometimes easier to diagnose certain things if you know what you are looking for. And some conditions respond better to earlier treatment. I really don't cast blame on anyone, not the donor, not the sperm bank, for the way my kids ended up. They, I'm sure did not put the connections together until later and then at that time did not sell the specimens anymore. I love my kids and they are wonderful, intelligent, and witty. They have worked hard to get to this point but they have succeeded. I'm sure I might feel differently if they had life-threatening conditions, like some on this board. But I have learned that I cannot judge the way others think unless I have been in their shoes. And I am happy about the matches we have made here, and I am still looking forward to maybe meeting the donor some day if that ever happens. I would like to personally tell him, "Thank you for these gifts."

3/28/06 | <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6696>

I recently found out that our donor got taken off the available list after over 10 years of donating because there were offspring born with autism, PDD, Asperger's (I can vouch for those three, as they affect my kids and I reported them), cleft palate, and two cases of congenital heart problems. I found this out through another mom who had contacted CLI to ask for medical information on the donor—she had none at all and was one of the first to use him. CLI (or Fairfax because they have bought out CLI, along with a bunch of other smaller sperm banks who could not make it on their own, although they are still operating under their other names) gave her a copy of the donor profile because they still had one available. I called CLI and told them what I had learned and Dr. Poole told me it was true. I asked if they ever contact affected recipients when conditions arise in offspring and they are notified of problems. He said they don't update if the donor is no longer donating (kind of skirted around my question of why they don't let us recipients know). The problem is that Fairfax bought out CLI in March of 2002, and when they went through all the records they said this person should not have been used with the conditions in resultant offspring listed. They never sold any of his sperm when it belonged to Fairfax. CLI is the one who sold it, and Fairfax kind of inherited all the issues that are coming up now. I still think that no matter who owns CLI now, or any sperm bank for that matter, if they know of potential problems in offspring they owe it to the recipients to notify them of the problems so if they are in the other kids they can be caught earlier (especially with the autism spectrum disorders because the earlier you start working with them the better). I was worried about the heart problems so Dr. Poole had one of Fairfax's geneticists call me. She said anytime those kind of problems show up in a sibling there could be the possibility of the other siblings being affected. One was an enlarged heart from a possible small hole in the heart and that can show up later in a child so she advised me to have my kids' doctor do an echocardiogram just to be sure. She did not think these problems would be passed to the next generation but couldn't say for sure.

3/28/06 | <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6677>

What you have to understand is that my daughter was conceived 19 years ago. I don't believe that should make a difference with CLI but apparently it does. The only piece of information I received from my doctor's office (who ordered from CLI) was the list of donors from which I picked. When I recently called CLI, Joy was my point of contact - at the time I didn't know that CLI was part of Fairfax and that is where Joy is located. Joy told me that they no longer had my donor's file and then proceeded to give me the "if you want to spend \$300, maybe..." speech. There are some possible genetic conditions my daughter inherited so Joy told me to send her an email and she would forward it to their medical department - nothing received back to date. I followed up with an additional email when a friend from DSR told me that on CLI's website it specifically states that all donor/recipient files are kept indefinitely AND that CLI will make a reasonable attempt to provide any "non-identifying" information on the donor. There has been no response to that email either. The last phone call I made, I specifically asked to speak to someone because Joy was out of the office. I was told because my donor was from such a long time ago I would have to speak to Amy. I was put on hold for a few minutes and when I was connected was put directly into Amy Hagen's voicemail. Obviously, no one wants to speak to me because I left a detailed voicemail and no one has ever returned my call. It makes me sad but there is no point getting angry - wasted energy. I only wish I could give my daughter a little more information. She's 18 years old and has handled this newly acquired knowledge about her beginnings admirably.

When I read all the non-identifying information the banks provide now, I would be lying if I said I wasn't jealous. We all want the best for our children and I think it's a shame that there appears to be so little understanding on the part of some of these banks.

3/28/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6669>

Call Joy Bader at CLI. She is the director of Customer Service. Her direct dial number is 703-289-1753. CLI sold a vial of sperm to someone else out of sperm that I had purchased over a year ago. She has been relatively helpful in resolving this situation. Hopefully she can help you too.

3/28/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6667>

I've been lied to by Dr. Poole, and if you question them on anything, they will stop returning calls. They are not trustworthy at all (ime).

3/28/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6665>

I met Dr. Poole personally 2 weeks ago and he seemed very nice and sincere but you never know!!! He was the one who researched my donor because a lady called in the say that her child was having seizures. I hope there is no HIDING anything in this case.

3/28/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6660>

My daughter was conceived using a donor from Cryogenic Laboratories, Inc. - Fairfax is the "mother ship." I was told it would cost \$300 to MAYBE locate the donor and then additional money for each question he is willing to answer. I explained there were some possible medical issues and was told to send an email, which would be forwarded to the genetic/medical department. Never heard a word. I sent a followup email - nothing. I have since called again and get put into voicemail. (All of this has transpired in less than a month.) They are only interested in selling their product. Big business at its finest even when the business is human lives..

3/21/06 http://health.groups.yahoo.com/group/DSR_Discussion/message/1648

I have been trying to figure out how to handle this situation and I finally decided to ask a group of people who can relate to my situation.

I have a beautiful 15 month old daughter through artificial insemination. I am a Single Mother by Choice. (I think that is what we are called.) The bank that I used was Cryogenic Laboratories Inc (CLI). After deciding I might want another child, about 1 month after I had my daughter I called CLI and ordered two more vials from the same donor. I paid for the vials and the storage.

Let's fast forward to February 2006. I decided that I was ready for number 2. I called CLI and asked them to send one vial to my doctor. Because of some issues with my cycle, I called a day BEFORE they were to send the vial out and cancelled the order. Everything looked great in March so I called to have them send both vials out to my doctor.

At that point I was informed that they actually sold one of my vials that I had ALREADY PAID FOR, therefore I had only one vial left from the same donor. To add to the story, they informed me that he was done donating and there were no more of his samples in storage or quarantine. So the only way to get a full sibling for my daughter was wrapped up in one try. Needless to say, it didn't work.

So here is the question...what do I do? I'm devastated that I can't give my daughter a full sibling. I want another child. And I know that I will keep trying with another donor. I am looking for input. What do I do? Anyone out there have any thoughts on this issue????

Let me reiterate one thing. CLI SOLD A VIAL OF MY DONOR'S SPERM THAT I HAD ALREADY PAID FOR. SPERM THAT HAS BEEN IN STORAGE FOR ME FOR OVER A YEAR.

3/9/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6340>

Here is the link to the CLI donor list that appeared in Nov. 2002. This is the first list the 2000 numbers

showed up. As you can see, a lot of them are marked with a P, including your donor 2XXX, so they had to have come from another lab.

<http://www.cryogeniclab.com/search.cfm>

--- In DonorSiblingRegistry, ----- wrote:

- > I know that Zygen, CCB and CLI are all linked somehow.
- > Our donor donated (in person) at Zygen in 1994 and CCB in 1994 and
- > 1998. Now CLI reports he is a "newer" donor, meaning that they just
- > recieved his vials. I very much doubt he also donaetd at CLI, as he
- > ins in CA, as the other 2 labs are. I am guessing CLI "bought" the
- > extra vials from one of these banks.
- > My \$.02.
- >
- > ----- wrote:
- > > CLI did not list any 2000 donor numbers until 2003,
- > > and then they all had pregnancies reported. Those seem
- > > to be the ones that are changing numbers at another lab so maybe they
- > > are coming from somewhere else.

3/9/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6339>

I know that Zygen, CCB and CLI are all linked somehow. Our donor donated (in person) at Zygen in 1994 and CCB in 1994 and 1998. Now CLI reports he is a "newer" donor, meaning that they just recieved his vials. I very much doubt he also donated at CLI, as he is in CA, as the other 2 labs are. I am guessing CLI "bought" the extra vials from one of these banks.

3/9/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6338>

CCB donor #### (he is retired now, but you can do a search for him) CLI donor #### (active). Zygen donor ### (also retired now, but his profile is still on their homepage as a "sample" donor profile). All of the info is the same and the baby pics at CCB and CLI are the same--ZYgen didn't offer pics at the time!

3/9/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6335>

CLI numbers linked to other labs? CLI did not list any 2000 donor numbers until 2003, and then they all had pregnancies reported. Those seem to be the ones that are changing numbers at another lab so maybe they are coming from somewhere else.

3/6/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6285>

When I was going through the archives I found CLI from MN and International Cryogenics from MI donors that were on both. CLI and ReproMed Ltd. (Canada) also had the same donors listed. Follas, International Cryogenics, and CLI had some in common, although I figured out these were the ones with letters in front of the donor number CLI usually does not have the letter, I don't think, Follas has F in front of theirs, International Cryogenics uses letters in front of theirs). The connection they all seemed to have was that they all used ReproTech, a freezing place that opened in 1990 that is located at the same address as CLI in MN and is affiliated with them. These entries have all been using the same donor number and are easy to cross-reference at the different labs, the problem would be if the labs would start changing the numbers. Fairfax has on its website a place to click to go to its affiliate (CLI) for more donors, and the same is true about CLI having a link to Fairfax.

3/6/06 <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/6284>

I just found our donor's profile at a 3rd cryobank! All the information is the same, age, weight-a few pounds off at each, however, the health, occupation, ancestry, religion, fav animal, location raised, siblings, etc....all the same! His audio is the same too!

How can this be? Are cryolabs sharing samples? Two of the labs are in Ca, and this one is on the East coast....so I am absolutely stumped and stunned!
The 3 banks he is at are CCB, Zygen and now CLI!

9/14/05 | <http://health.groups.yahoo.com/group/DonorSiblingRegistry/message/5442>

I had earlier posted a message (#5389) about the same thing with ReproMed Ltd. And Cryogenics Laboratories. I got a response from someone who said they had gone through ReproMed and received the specimen from CLI through ReproMed. There might also be crossovers with these two labs.