INTERVIEW NOTES: 5642

Donor 5642's calm demeanor lead to a relaxed and enjoyable interview. He arrived wearing a blue Top Dog t-shirt, gray pants, and casual slide sandals. He wore a headband in his curly, strawberry blonde hair. He has fair skin, a beard, and bluish-hazel eyes. As a child, he was told he resembled Justin Bieber and Shaun White. Throughout our conversation he was very thoughtful, laid back, and friendly.

Donor 5642 grew up on Northern California with his two older half-sisters, his younger brother, and his mother and father, until they separated. Because they lived near an elementary school, he recalls spending a lot of time playing basketball and football there. Both of his parents worked all day, which left a lot of time to play and explore with his brother and friends. His parents worked as landscaping contractors, and his mother, who used to be a high school teacher, also tutored on the side. Donor 5642 described his mother as the *boss of the family*, as she was *tough but caring*. His father was a *big softy* who would never get upset publically. His mother, who he mentioned was *very smart*, was the one to help him with homework while his father would take him to A's games. One of his sisters is a *sweetheart* while the other one is more *serious*. He described his brother as *very shy* but *really funny*, and also said he is very good at sports.

While school never really interested Donor 5642, he did well in all subjects. He explained that in elementary school he was quite fidgety, but once he was given a standing desk he performed much better. Math and science were his least favorite subjects, but he has always enjoyed writing. He recalled that throughout school his mother would not let him or his siblings fail any classes. He enjoyed history, and to this day spends a lot of time watching historical documentaries in his spare time. High school proved to be a time for personal development, as Donor 5642 became more social, joined the varsity baseball team, and started crushing on girls. He then went on to enroll in community college where he currently studies mass communication.

In the next couple of years, Donor 5642 would like to transfer to a four year university to possibly study radio, TV, or journalism. He enjoys writing mostly non-fiction and receives compliments for his work; he credits his mother for his excellent writing abilities. Currently Donor 5642 works with his father on maintenance accounts. In his free time he enjoys playing and watching sports and spending time in nature. With his friends, he goes hiking, plays video games, watches videos on YouTube, and plays baseball. Donor 5642 said that his friends would describe him as a *cat* because he values alone time, and prefers one-on-one or small group interactions with friends over larger groups. They would also say he is *silly, goofy, and funny*. Overall, he described himself as an *outdoorsy* person who is *really social* amongst friends, but otherwise introverted.

Donor 5642 likes to *gain new knowledge* and does so by watching documentaries, reading news and sports articles, and learning about politics. Though he mostly enjoys nonfiction content, some his favorite TV shows include *Family Guy, The Wire*, and *American Horror Story*. He enjoys all music, but especially rap & hip hop, jazz, and classic rock. Some of his favorite artists include Kendrick Lamar and Mac Miller. When it comes to food Donor 5642 will try anything, but favors pizza, burgers and fries, and Chinese or Indian food. In the future Donor 5642 wants to find a meaningful career, travel around the US, and have children of his own.

We are excited to have such an active, curious, and warm donor in our program!

Interviewed by Carmen C. & Michelle K. 8/10/2020

DONOR PROFILE: 5642

The past and current personal and family medical history, physical examination, and laboratory test results determine that donor 5642 is eligible and approved for semen donation at THE SPERM BANK OF CALIFORNIA. This profile was prepared in SEPTEMBER 2020

Personal Information

• Identity-Release Program: Yes

• Month/year of birth: 05/98

Education: Pursuing degree in Journalism

• Current occupation: Landscaper

• Ethnic origin: Dutch, English, Irish, Scottish

• Religion born into: Christianity

• Religion practicing: None

PHYSICAL CHARACTERISTICS

• Height: 6'

• Weight: 126 lbs

• Hair color: Medium/strawberry blonde

Hair type: WavyEye color: Hazel

Complexion: PaleBody type: Slim

Blood group/Rh: A+

Baby photo available: YesOther distinguishing features:

FAMILY MEDICAL HISTORY

KEY: D donor Ch child F father M mother S sister B brother

Co cousin A aunt U uncle MGF maternal grandfather MGM maternal grandmother

PGF paternal grandfather **PGM** paternal grandmother

Breast Cancer: MGM: Breast cancer at 63, treated with chemotherapy, cause of death in mid 70s

Mental Health: PCo#1: Attention deficit hyperactivity disorder at 10, treated with medication, managed.

PCo#2: Attention deficit hyperactivity disorder at 8, treated with medication, managed.

Metabolic/Endocrine: MA: Type 2 Diabetes at 52, treated with medication, dietary changes, and smoking cessation, managed.

Neurological: B: Dyslexia at 8, treated with school-based interventions, managed.

Respiratory (Lungs): PGM: Lung cancer in her 70s, treated with chemotherapy, cause of death in her 70s.

Sight/Sound/Smell: **D: R: 20/30, L: 20/25**

Skin: M: Melanoma at 46, treated with surgery, resolved. MGF: Skin cancer in late 60s, treated with chemotherapy, resolved. PGF: Skin cancer in mid 70s, treated with chemotherapy, contributed to death at 84.

Urinary:

Cancer (see above): Other: M: Melanoma. MGM: Breast cancer. MGF: Skin cancer. PGF: Skin cancer. PGM:

Lung cancer

DONOR LAB RESULTS

Chlamydia: Not Detected Gonorrhea: Not Detected Syphilis: Non-Reactive

HIV 1 & 2: Non-Reactive CMV total antibody: *Positive

Hepatitis B: Non-Reactive Hepatitis C: Non-Reactive HTLV 1 & 2: Non-Reactive

Urinalysis: Normal Chem panel: Normal CBC: Normal

GENETIC SCREENING RESULTS: ALL TEST VALUES IN NORMAL RANGE

Genetic screening tests can significantly reduce, but never completely eliminate, the chance that a person is a carrier for a particular disorder.

Cystic Fibrosis: (> 500 mutations) No mutation detected

Spinal Muscular Atrophy (SMA): Two copies of SMN1 detected

Hemoglobinopathies/Thalassemia: No abnormal hemoglobin detected (including sickle hemoglobin);

No evidence of thalassemia

DONOR NARRATIVE: 5642

The content of this narrative has not been altered by TSBC staff. It reflects the original written work of the Donor.

Describe your personality: introvert, extrovert, funny, serious, goal-oriented, curious, shy, etc.

I'm definitely more of an introverted person. I prefer to be alone and don't really like crowds. I can be very social amongst a small group of friends. A lot of my friends say I'm funny once I do decide to go out.

What are your interests and talents?

I really love sports. I was really good at baseball in high school and played a couple of years at my community college. I also love basketball and just love watching/talking sports.

What are some of your goals and ambitions in life? Where do you see yourself in 5 or 10 years?

In 5-10 years, I hope to have a degree in either broadcasting, mass media communications, or journalism. My ideal job would be in sports broadcasting but any job where I get to talk about sports would be great.

^{*}CMV IgM is negative/IgG positive. This combination shows a historic CMV exposure and donor is presumed to currently be non-infectious

How would you describe your skills and interests in the following areas?

Math: I was always terrible in my math classes. In high school I was always behind my peers, taking math classes like "Intermediate Algebra". Math classes could never hold my attention for long.

Mechanical: I love fixing things and trying to make improvements to things. Once I get in to it it's hard for me to lose focus and often waste hours on end messing with things like clocks or phones. When I was younger I found a way to hack Android phones to adjust screen displays and volumes and would charge my friends a small fee to customize their phones.

Athletic: I played Baseball and Basketball in high school and have always been athletically inclined. I love running and getting exercise. I'm very competitive and always want to win.

Musical, Artistic, Creative:

I'm not particularly musical or artistic but I'm definitely creative. I was a great writer in high school and was in "creative writing" classes and clubs in high school. My teachers would say I'm a good story teller and write in a unique way. When I was 13, my friends and I would go to a skate park and do tricks on camera. I would go home and edit the videos adding music and sound effects. Ultimately they are just stupid videos but at 13 I thought I was being really creative. Other than the creative writing and the skate videos I'm not very creative. I like to fidget with stuff and make improvements to things.

Language (what languages besides English do you speak?): N/A

Writing: I've always been a good writer. I think it's because my mom was a writer herself. She wrote a couple books when she was younger then went on to be an English teacher for a few years at a high school. At a young age she was always writing papers with me, showing me the proper way to structure essays and get my point across. She helped all my siblings with essays for school and would always tease me for the way I wrote the way I'd talk to you in person. A couple times in school I have had teachers tell me that I'm good at writing in a way that is persuasive and smooth like a conversation.

Literature: I can't say I read a bunch of books but I do like reading articles online about local news or worldwide news. I've definitely read all the Harry Potters and a couple of Stephen King novels like 'Misery'.

Science: I was okay in my science classes but it's never been subject that really intrigued me. Space and the universe are very interesting to me.

Please list a few of your favorite:

Movies:

I mostly like comedies, adventure, crime movies but most of all I love documentaries. I think of myself as a history buff and I love learning about new things. From WWII docs to "Super Size Me" I like to learn about any subject. However I absolutely hate horror movies. I'm constantly looking away and sometimes I get light headed seeing gruesome murders and what not.

Books/Authors: Harry Potters/ J.K Rowling, Stephen King

Albums/Musicians/Performances:

I love rap and hip hop. Really I love all genres, as a kid I used to listen to stuff from the Beatles or even Neil Young with my mom in the car. As I got older the popular music amongst kids was hip hop. I started listening to "modern" hip hop with then led me to take interest in older groups like OutKast or Wu Tang Clan. There was a time when I was younger where I really studied the roots of hip hop in New York and how it spread to become mainstream. I'd say some of my favorite artists today is: Kendrick Lamar, j Cole, Freddie Gibbs, Anderson Paa.k, Action Bronson but my all-time favorite artist is Mac Miller. He came out right as I was getting in to hip hop. I think a lot of who I am today is based off him. A lot of his underground stuff really spoke to me as a kid and when he passed in 2018 I was heartbroken.

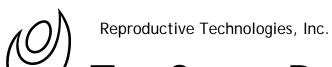
What are a few of your reasons for becoming a sperm donor?

I want to be able to help a couple or whoever get pregnant. I think giving birth and starting a family is the most beautiful thing in the world. I'm not in a position to start my own family so I might as well help someone else out.

You have joined the Identity-Release® Program . What appeals to you about this program?

I like the idea of the Identity Release Program because it keeps me anonymous to young children and parents but also gives any future children an option to get to know me after 18 years.

THANK YOU!



THE SPERM BANK OF CALIFORNIA

HEALTH PROBLEMS DONOR 5642

melanoma dyslexia	Diagnosis/age of onset: Melanoma/46 Treatment: surgery Outcome: resolved Diagnosis/age of onset: Dyslexia/8
	Treatment: surgery Outcome: resolved
dyslexia	Outcome: resolved
dyslexia	
dyslexia	Diagnosis/age of onset: Dyslovia/9
	piagnosis/ age of offset. Dysiexia/ o
	Treatment: Smaller class size, other school-based
	interventions
	Outcome: Graduated high school, employed. No
	other learning disabilities/intellectual disabilities
	present.
breast cancer	Diagnosis/age of onset: breast cancer/ 63
Treatment: chemothe	Treatment: chemotherapy
	Outcome: cause of death in mid 70's
skin cancer	Diagnosis/age of onset: skin cancer/ late 60's
	Treatment: chemotherapy
	Outcome: resolved, still living at age 93
iabetes (type 2)	Diagnosis/age of onset: Type 2 Diabetes/52
	Treatment: medication, diet change, smoking
	cessation
	Outcome: managed
skin cancer	Diagnosis/age of onset: Skin Cancer/mid-70's
	Treatment: chemotherapy
	Outcome: Died of infection (septicemia) related to
	skin cancer wounds at age 84
	skin cancer liabetes (type 2)

Paternal Grandmother (smoker)	lung cancer	Diagnosis/age of onset: Lung Cancer/70's Treatment: chemotherapy Outcome: Cause of death in her 70's
Paternal Cousin #1	ADHD	Diagnosis/age of onset: Attention Deficit Hyperactivity Disorder/10 Treatment: stimulant medications Outcome: managed well with medication
Paternal Cousin #2	ADHD	Diagnosis/age of onset: Attention Deficit Hyperactivity Disorder/8 Treatment: stimulant medications Outcome: managed well with medication

The above family medical history information has been self-reported by the donor. We work with each donor to obtain as complete and accurate information as possible, but we are unable to completely rule out the existence of other health information that is not known, or that remains unreported to us.

As a board certified genetic counselor, I have reviewed this donor's family medical history for identifiable patterns of inheritance that may place the donor or his biological offspring at increased risk for certain health problems. ("Increased risk" is risk that is greater than the risk in the general population).

Attention Deficit Hyperactivity Disorder: Donor 5642 has two paternal cousins with ADHD. These cousins are also cousins to each other (i.e not siblings and born to two different aunts). It is possible these cousins both developed ADHD due to underlying genetic predisposition. However, these individuals are fourth degree relatives to any offspring of DIS 5642. It is unlikely the risk for ADHD for offspring is increased over the general population risk due to the degree of relation to the affected individuals. The general population risk is estimated to be between 4-10%. Males are more likely to be affected with ADHD than females.

Skin Cancer: There are multiple individuals affected with skin cancer in donor 5642's family history. Most notable is his mother who was diagnosed with melanoma at age 46. Early melanoma is sometimes associated with BRCA2 mutations. It's notable his maternal grandmother had breast cancer. However, this family history, as reported, does not meet criteria for BRACA2 testing according to NCCN guidelines. It is also important to note the rates of skin cancer are higher in people of Northern European ethnicity. The risk for offspring of donor 5642 to also be affected with skin cancer in their lifetime is likely at or near the general population risk for people of Northern European ethnicity.

Dyslexia: Donor 5642 has a brother who is diagnosed with dyslexia. Dyslexia is a common condition that affects an estimated 5-10% of the population. This condition shows a multifactorial inheritance, meaning there are multiple genetic and environmental factors that contribute to its development. People with dyslexia often have a family history of the condition, but many do not. In this family there are no other reports of dyslexia in the donor's family history. Additionally, offspring will be second degree relatives to the brother with dyslexia. The magnitude of the risk to offspring to develop dyslexia is not known, but it's possible it could be slightly higher than the general population risk.

As reported, there does not appear to be a personal or familial medical health history that would confer an increased risk beyond the general population risk.

Janine Mash, LCGC Certified Genetic Counselor