INTERVIEW NOTES: 4768

Donor 4768 is a self-described extrovert and we agreed with that assessment immediately. He is friendly and a good conversationalist. Donor 4768 has large, dark eyes, neatly cropped dark hair with a slight wave, and a golden complexion that speaks to his Iranian ancestry. He has a close cropped beard that accentuates his square chin and jawline. He has a beautiful straight nose that fits his face beautifully. He wore a navy polka-dotted bomber jacket and black rectangular framed glasses to his interview. When he spoke his face was very expressive and he used his hands for emphasis, resulting in a lively conversation with us.

The first 10 years of donor 4768's life were spent in Iran with parents and a younger sister who was not only his sibling but his closest friend. He remembers playing hide-and-go-seek at the local park and feeling very protective of her. He, his mom, and sister came to the US so that his mom could attend university, leaving behind his father. Donor 4768's strongest memories of growing up began after he immigrated to the West Coast. His father rejoined the family a few years later, changing careers from a dentist in Iran to selling dental prosthetics and equipment in the US.

His best subject in school became math as he explains, "numbers don't need translation." He started making friends by offering to tutor them in math. As he became more confident in communicating, his favorite subject shifted to the humanities, specifically history. Moving around a lot as a kid meant that he found most of his social outlets through school. In addition to tutoring and volunteer work, donor 4768 joined a few high school sports teams in order to make friends. He participated in swimming, cross-country, and wrestling, and commented he "wasn't any good but it was fun." He enjoyed being able to make friends from social groups he otherwise wouldn't have had the opportunity to interact with. He reflected on the experience saying that balancing practice and homework helped him learn effective time management.

Donor 4768 majored in the sciences during college, but added that the decision was based mostly on the field being easy for him. He took history classes for fun with Middle Eastern, European, and Latin America some of his favorites, and ultimately graduated with a minor in the subject. His first job out of college was as a behavioral therapist for children, before moving on to web development like many people living in a tech rich area of California. His role at his current job is in IT, which he says gives him the opportunity to use a good mix of technical and social skills. He describes himself as an organized person and enjoys making to-do lists. He also says he's the person in his family that ends up keeping track of little details like dates and where things are kept.

The pandemic and social media has made him aware of the different life he lives in the US than his friends still in Iran. His friends grew up under sanctions and have had a completely different experience with the pandemic than he has had. As an extrovert, the solitary nature of the pandemic has also been challenging for him. To relax donor 4768 reads, journals, bikes, and hikes (which he refers to as "bro-therapy"). He used to enjoy video games in his youth, but decided they were too addictive for him and decided to put them away for more constructive activities. He loves learning random facts and trivia. He has also recently started learning how to surf! If given 24 hours to spend \$1000, donor 4768 says he would call up his friends and to go surfing and get tacos, all on him.

Donor 4768 defines himself as duty-driven and family-oriented, "hopefully not in a toxic way but in a chill way." In five years, he hopes to have taken a step back from constantly working in order to take care of his family, whether that means his own nuclear family or caring for his parents and Grandmother.

Interviewed by Danielle L. and Kenya C. on 7/21/21

DONOR PROFILE: 4768

The past and current personal and family medical history, physical examination, and laboratory test results determine that donor 4768 is eligible and approved for semen donation at THE SPERM BANK OF CALIFORNIA. This profile was prepared in September 2021

PERSONAL INFORMATION

• Identity-Release® Program: Yes

• Month/year of birth: December 1988

• Education: B.S. Biological Science

• Current occupation: IT Support Engineer

• Ethnic origin: Iranian

Religion born into: Shiia IslamReligion practicing: None

PHYSICAL CHARACTERISTICS

• Height: **5' 11 ½"**

• Weight: **175 lbs**

Hair color: BlackHair type: Wavy

• Eye color: Dark brown

• Complexion: pale

• Body type: Ectomorphic (slim)

Blood group/Rh: O+

• Baby photo available: Yes

Other distinguishing features: Long eyelashes,

big expressive eyes

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: MA: Breast cancer at 60, treated with radiation and chemotherapy, resolved.

Gastrointestinal: MGF: Stomach ulcers as a result of drinking alcohol at 50, treated with hospitalization and stopping drinking, resolved.

Genital/Reproductive:

Heart: M: High cholesterol at 55, treated with medication, ongoing management. F: Mitral valve prolapse at birth, treated with surgically installed mechanical heart valve in 2003 at 47, ongoing treatment with blood thinners. F: High blood pressure at 47, treated with medication, managed. F: High cholesterol at 47, treated with medication, managed. MGM: Heart attack at 58, treated with hospitalization, survived. MGM: High

blood pressure at 58, treated with medication, managed. MGM: Stroke at 83, treated with hospitalization, medication, physical therapy, loss of motor skills on right side. MU#3: High blood pressure at 55, treated with medication, managed. MU#3: High cholesterol at 55, treated with medication, managed. PGF: Heart attack at 60, treated with hospitalization, cause of death.

Mental Health: MCo#6: Attention deficit disorder, autism (Asperger's) at 4, treated with therapy and medication, managed.

Metabolic/Endocrine: MGM: Type II diabetes at 70, treated with medication, testing and diet change, managed.

Muscles/Bones/Joints: D: Torn meniscus (right and left knee) at 22, treated with surgery, successful recovery. M: Osteoarthritis at 58, treated with physical therapy, exercise, managed. F: Rheumatoid arthritis at 60, treated with medication and occupational therapy, managed.

Neurological: F: Migraines, epilepsy in 20's, treated with OTC medication, no migraines or epileptic episodes since 2006

Respiratory (Lungs): MGM: Lung failure at 87, treated with hospice, cause of death at 87. MGF: Lung failure at 90, treated with hospice, cause of death. MU#2: Lung cancer (stage 4) at 71, treated with hospitalization, radiation and chemotherapy, cause of death. MCo#5: Asthma at 12, treated with medication, managed.

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

Cancer (see above): MA: Breast cancer. MU#2: Lung cancer (stage 4)

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 HTLV 1 & 2: Non-Reactive

Urinalysis: Normal Chem panel: Normal CBC: Normal

GENETIC SCREENING RESULTS

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

Expanded carrier screening for 268 autosomal recessive conditions was completed by Invitae and reported on August 6, 2021.

The results were POSITIVE for SLC26A4-related conditions (including Pendred syndrome) and WNT10A-related conditions (including odonto-onycho-dermal dysplasia (OODD) and Schöpf-Schulz-Passarge syndrome (SSPS)). Donor 4768 is a carrier for these conditions.

It is strongly recommended recipients who use this donor's sperm undergo carrier screening for SLC26A-Related Conditions (including Pendred Syndrome) and WNT10A-related conditions. WNT10A-related conditions are inherited in both an autosomal recessive and autosomal dominant pattern. The variant detected in WNT10A (c.682A>T; p.Phe228Ile) can cause a common condition called isolated tooth agenesis, which affects 2-8% of the general population. Tooth agenesis, also called hypodontia, is the absence of one or more teeth. It's estimated people who carry the variant are 2-3 times more likely to have one or more missing teeth. All offspring of donor 4768 have a 50% chance to inherit the c.682A>T WNT10A variant and be at increased risk for isolated tooth agenesis/hypodontia.

Testing was negative for the remainder of genes screened.

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

Disease	Result	Residual risk to be a carrier (based on Middle Eastern ethnicity)
Pendred syndrome and other SLC26A4-related conditions	POSITIVE	n/a
WNT10A-related conditions	POSITIVE	n/a
Cystic Fibrosis	Negative	1 in 4,400
Spinal Muscular Atrophy	Negative: 2 copies exon 7 c.*3+80T>G variant not detected	1 in 800
HBB Hemoglobinopathies & Thalassemia	Negative	1 in 2,700
Alpha Thalassemia	Negative	1 in 241

Please refer to the donor's Invitae expanded carrier test report for more information on the testing completed and the donor's results.

DONOR NARRATIVE: 4768

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.

My energy comes from being around people. In this regard, I can comfortably say that I'm an extrovert. I would describe my personality as very outgoing and social. I am easy to talk to and a good listener. I understand people and make friends very easily.

What are your interests and talents?

I really enjoy including people within social spaces and seeing how new interactions add to everyone's shared experience! To break the routine, I enjoy surfing. I find it to be a humbling experience and forces me to be present in the moment.

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

My immediate goal is to be the rock for which my family's foundation lies. The professional trajectory I find myself in coupled with new-found material wealth has equipped me to be a shepherd for my aging parents, support my sibling in their ambitions, and to nurture a family of my own. Within ten years I seek to establish enough passive-income avenues in order to dedicate quality time to raising my (future) children and care for my elders.

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

Math: Because I'm driven by stories, my favorite application of math was in undergrad physics and astronomy. For the latter, it was particularly fun since you could weave a tale of life emerging from space dust!

Mechanical: When household items break or need patching, I take my time to research fixes by reading or watching DIY tutorials. I'm a visual learner, and learning-by-doing is how I retain information.

Athletic: Remaining fit and healthy is ultimately a social experience for me. It's important that I organize time with friends and/or classes whether it's time at the gym, outdoor activities, or remaining consistent. The social element keeps me accountable.

Musical, Artistic, Creative: Playing bass in my high school and undergrad jazz band. It's so fun to be in sync with your fellow rhythm section drummer and watch the band lift-off!

Language (what languages besides English do you speak?): I remain proficient in Farsi due to my family continuing to speak it at home. The language "became my own" once I met Farsi speaking friends in a university setting.

Writing: Writing down my thoughts in a journal at the end of the day allows for healthy introspection. Our personal narratives change as we get older, so I find it helpful to flip the pages back to see the shift in my thinking.

Literature: Imagination is very important to me. Reading new fictional stories helps break the stagnant mold I may find myself in. Often, it helps with valuable perspective as fiction and science-fiction hold a mirror to society.

Science: Having a process and shaping a story out of it. That's what makes science fun and how I would approach teaching it when working as a tutor for math and biology.

Please list a few of your favorite:

Movies: Arrival, Battle of Algiers, The Spook Who Sat by the Door, Moonlight **Books/Authors**: Haruki Murakami, Bell Hooks, Toni Morrison, James Baldwin

Albums/Musicians/Performances: Fantastic Negrito, Opeth, The Coup, All Them Witches

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

The definition of family is expanding and that's beautiful. Non-heteronormative partnerships or individuals seeking to start families are increasingly part of the cultural discourse. A large part of my decision to become a donor was due in part to wanting these aspiring families to have options and access to diverse choices.

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

It's completely normal to seek the story of yourself and those that came before you. For younger adults, this narrative is a part of self-actualization. In that vein, I view the Identity Release Program as a door; a door that leads to answers and satisfied curiosity about one-self.

THANK YOU!

HEALTH PROBLEMS LIST DONOR 4768

DONOR

Problem/Diagnosis: Torn meniscus (Right and left knee)

Age of Onset: 22

Treatment: Running injury. Surgery to repair torn meniscus

Outcome: Successful recovery. Managed with stretching, icing and better form.

MOTHER

Problem/Diagnosis: High cholesterol

Age of Onset: 55
Treatment: Medication

Outcome: Ongoing management

Problem/Diagnosis: Osteoarthritis

Age of Onset: 58

Treatment: Physical therapy, exercise

Outcome: Ongoing management through exercise and physical therapy

FATHER

Problem/Diagnosis: Migraines, epilepsy

Age of Onset: 20s

Treatment: Medication (Excedrin)

Outcome: No migraines or epileptic episodes since 2006

Problem/Diagnosis: Mitral Valve Prolapse

Age of Onset: Since birth

Treatment: Surgically received mechanical heart valve in 2003 at the age of 47.

Outcome: Survived surgery. Started blood-thinner medication (ongoing).

Problem/Diagnosis: High blood pressure

Age of Onset: 47
Treatment: Medication

Outcome: Ongoing management

Problem/Diagnosis: High cholesterol

Age of Onset: 47
Treatment: Medication

Outcome: Ongoing management

Problem/Diagnosis: Rheumatoid arthritis

Age of Onset: 60

Treatment: Medication, occupational therapy

Outcome: Ongoing management through occupational therapy

MATERNAL GRANDMOTHER

Problem/Diagnosis: Heart Attack

Age of Onset: 58

Treatment: Hospitalization

Outcome: Survived

Problem/Diagnosis: High blood pressure

Age of Onset: 58
Treatment: Medication

Outcome: Managed with ongoing medication

Problem/Diagnosis: Type II diabetes

Age of Onset: 70

Treatment: Medication, testing

Outcome: Managed with ongoing testing and diet change

Problem/Diagnosis: Stroke

Age of Onset: 83

Treatment: Hospitalization, medication, physical therapy

Outcome: Loss of motor skills on the right side of the body. Partially regained through physical therapy.

Problem/Diagnosis: Lung failure

Age of Onset: 87
Treatment: Hospice

Outcome: Lung failure, passed away in hospice care.

MATERNAL GRANDFATHER

Problem/Diagnosis: Lung failure

Age of Onset: 90 Treatment: Hospice

Outcome: Lung failure, passed away in hospice care.

Problem/Diagnosis: Stomach ulcers as a result of drinking

Age of Onset: 50

Treatment: Hospitalization

Outcome: Forced to stop drinking, issue did not recur

MATERNAL AUNT

Problem/Diagnosis: Breast cancer

Age of Onset: 60

Treatment: Radiation, chemotherapy

Outcome: Survived. Complete remission of cancer.

MATERNAL UNCLE #2

Problem/Diagnosis: Lung cancer (Stage 4)

Age of Onset: 71

Treatment: Hospitalization. Radiation and chemotherapy.

Outcome: Deceased. Cancer had metastasized.

MATERNAL UNCLE #3

Problem/Diagnosis: High blood pressure

Age of Onset: 55
Treatment: Medication

Outcome: Ongoing management

Problem/Diagnosis: High cholesterol

Age of Onset: 55
Treatment: Medication

Outcome: Ongoing management

MATERNAL COUSIN #5

Problem/Diagnosis: Asthma

Age of Onset: 12
Treatment: Medication

Outcome: Continued medication and management

MATERNAL COUSIN #6

Problem/Diagnosis: Attention Deficit Disorder (ADD), Autism (Aspergers)

Age of Onset: 4

Treatment: Therapy. Medication.

Outcome: Ongoing management through therapy and medication

PATERNAL GRANDFATHER

Problem/Diagnosis: Heart attack

Age of Onset: 60

Treatment: Hospitalization Outcome: Deceased

CONCLUSION:

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).

As reported, DIS 4768's personal/family history is notable for mitral valve prolapse, epilepsy and rheumatoid arthritis, all affecting his father.

Mitral valve prolapse (MVP) occurs when the flaps of the mitral valve do not close smoothly or evenly. It is a common condition, affecting 2% of the population. It can be due to a congenital birth defect or acquired. It is considered mild but does require lifelong medical surveillance, as it can sometimes cause medical complications. Donor 4768's father was born with mitral valve prolapse and had surgery to correct the repair. The causes of MVP are typically multifactorial, including genetics, infections and environmental factors. Donor 4768 has no other relatives affected with the condition. First degree relatives have a ~5.4% chance to also be affected with MVP. The risk to second degree relatives (the degree offspring would be related) is not well studied, but would be estimated to be much lower. Given the family history, it is possible offspring of 4768 may have an increased chance to have congenital mitral valve prolapse when compared to the general population, but that risk is likely at or near the general population risk.

DIS 4768's father was also affected with seizures in his 20s. The cause of the seizures are not known, but have not recurred in more recent years. Empirically, the recurrence risk for epilepsy when a first degree relative is affected is 6%. The empiric risk to second degree relatives for epilepsy is not well established, but would be estimated to be lower and is likely at or slightly higher than the general population risk. Epilepsy occurs in 1% of the general population.

DIS 4768's father is affected with rheumatoid arthritis. RA is a multifactorial disorder that is relatively common in the general population (about 1%). The risk for first degree relatives to also be affected with RA is between 3-5% and may be as high as 10%. The risk is significantly lower for second degree relatives (the degree to which offspring are related), and begins to approach the general population risk.

Please also see this donor's Expanded Carrier Screening documents for results of screening for 268 autosomal recessive conditions.

Sincerely,

Janine Mash LCGC Certified Genetic Counselor San Francisco Genetic Counseling