Interview Notes: 5026

Donor 5026 came to our interview wearing a light blue button-down shirt, grey trousers and black loafers. In contrast to his professional clothing, he carries a simple blue backpack. His face is oval-shaped and topped by inky black hair styled upward with gel. His large, dark eyes are framed by chunky rectangular glasses that are slightly too big for his face. His facial hair is trimmed neatly, fashioned into a light goatee. When his full lips break into a smile, you can see his gleaming, straight, white teeth. His warm caramel-colored skin is perfectly smooth, and he has a tall and athletic build. He does, in fact, resemble Bruno Mars (as his Personal Questionnaire states) in that they both have big beautiful eyes and pretty much the same skin color. 5026 has a narrower face, less chiseled features and larger eyes.

Donor 5026 is a smart, diligent, optimistic, and idealistic young man. Born and raised in Nepal, his story reads more like a novel than a donor narrative especially when presented in his rich accent. As a child in the rural flatlands of Nepal, 5026 lived near a beautiful forest replete with fantastic creatures such as peacocks, rhinos, and monkeys. In the winter, schools would close knowing that the rhinos could come out of the forest looking for food. Neighboring communities were hours away and there was little to no access to buses, children played daily in the forest. Their community was an agricultural one. They subsisted on a mostly plant-based diet as meat was very expensive and hard to come by. Donor 5026's school was a half mile away from his home and on days when it rained heavily, the school was closed. 5026 had a friend who owned an elephant. When the he and his friends were good, they would get to ride elephant to school. His school was small and housed all ages in one institution; grades ran from kindergarten to 10th grade. 11th and 12th grade are considered secondary education and students at these levels are offered a variety of specializations such as physics, chemistry, biology, English, and math.

5026 emigrated from Nepal when he was 17 years old. His family was granted refugee status having survived the Nepalese civil war. Everything was new, everything was different. One thing that stood out very early was how much illness there is in the US. And that not only were there more sick people than he have ever seen but that the US government was making no effort to care for these people. He told me about seeing poor people living in front of hospitals, unable to access healthcare, and how disgusted he was/is that the strongest nation in the world is not people with dignity. These experiences are at the foundation him studying medicine and striving to become a patient centered doctor and surgeon,

Despite his initial culture shock, 5026 has adapted easily to life in the U.S. He thinks that *flexibility and adaptability* are important attributes and works hard at being both. He has the goal of finding ways to *fly on his own* and achieve his goals without the assistance of his family. Donor 5026 is fascinated by life and eager to experience as much of it as possible. He is a great addition to our donor program and I look forward to any updates he may offer in the coming years.

Interviewer: Anat Date: September 12, 2014

DONOR PROFILE: 5026

The past and current personal and family medical history, physical examination, and laboratory test results determine that donor 5026 is eligible and approved for semen donation at The Sperm Bank of California. This profile was prepared in October, 2014 and updated in May 2015.

Personal Information

• Identity-Release Program: Yes

• Month/year of birth: December, 1991

• Education: BA in Cell and Molecular Biology, pursuing M.D.

• Current occupation: Microbiology Lab Technician

Ethnic origin: NepaliReligion: None

PHYSICAL CHARACTERISTICS

Height: 5'10 ½"Weight: 153Hair color: Black

Hair type: StraightEye color: Black

• Complexion: **Light brown**

Body type: MediumBlood group/Rh: O+

• Baby photo available: Yes

• Other distinguishing features: Big eyes, small

dimples in cheeks while smiling, full lips

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

Gastro-intestinal: MU: Appendicitis at 32, treated with surgery, resolved.

Heart: MGM: High blood pressure at 63, treated with diet change, ongoing. PGF: High blood pressure at 65, treated with medication, managed. PGM: High blood pressure at 62, treated with medication, managed. MGF: Stroke at 66, treated with hospitalization, cause of death at 66.

Metabolic/Endocrine: PGM: Type 2 diabetes, at 65, treated with diet change, managed.

Sight/Sound/Smell: D: Right eye 20/200, Left eye 20/200.

Other: PGF: Cataracts, onset age 70, no treatment, ongoing. PGM: Cataracts, onset age 68, no treatment,

ongoing.

DONOR LAB RESULTS

Chlamydia: **Not Detected** Gor

Gonorrhea: **Not Detected**

Syphilis: Non-Reactive

HIV 1 & 2: Non-Reactive Hepatitis B: Non-Reactive

CMV total antibody: *Positive 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 mut

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: 5026

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

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

During my high school in Nepal, I was reputed for being one of the funniest guy in my classes. I have realized that it's a little hard to be funny in a different language as the way sentences are structured, the way we deliver comment and what's culturally accepted as jokes are different.

Regarding outgoingness, I am an extrovert. I like meeting new people and getting to know them.

Through hard work and dedication, I will achieve my goal of becoming a renowned physician. Curiosity and open-mindedness represents one of my strengths. It has motivated me to learn more about the field I am interested in and about the world in general.

What are your interests and talents?

Medicine underlines my primary interest. Other than that, I am interested in learning about the human mind though the study of psychology. I am talented in the sciences and mathematics. I have tutored mathematics and sciences for more than three years. Therefore, teaching and interpersonal communication represents my other talent.

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

As of now, I am starting my medical school and am geared towards becoming a surgeon. I want to be a patient centered physician who strives to keep his patients the top priority. In 5 years, I would be done with my medical school and would have started my residency. Residency is a training program for physicians who want to specialize in any medical speciality, for example psychiatry, neurology etc. As I am aiming for surgery, I might not have the luxury to pick of which part of USA I will be doing my residency in. Ideally, I would want to be in the

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

Bay Area. I might be married by then if I find the right person. In 10 years, I would be married, have a kid or two and would be working at a hospital. I would ideally want to settle in California.

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

Math: I am proficient in Mathematics. Throughout my 9th and 10th grade, a close circle of friends and I used to practice complex mathematics problem whenever we got a free time in school. Gradually, we became really good at it and I became a big fan of math. Just like going to gym makes our physical body stronger, math makes our mental muscle stronger. It teaches us to think critically and creatively. In math, there are multiple ways to solve a problem - same as our life. I really enjoy statistics as well. I have been thoroughly convinced that looking at data and average trends is one of the best way to make decisions.

Mechanical: I grew up in a middle class family in Nepal. I didn't have to do much mechanical work (wood cutting, lifting heavy loads etc) while growing up. In the USA, I learned to repair broken iphone screen. I am working hard towards becoming a surgeon one day. I am interested in mechanics of the body.

Athletic: Through my elementary and middle school, I was skinny and not very athletic. In Nepal, people get lots of exercise from walking a lot as we don't have as many cars. In college, I started to go to the gym only to quit after a month or two because I became too busy. It's been a year that I have been exercising regularly about 3 times per week at the gym.

Musical, Artistic, Creative: I took a piano class in college and can play very basic tones like happy birthday song and couple other popular songs. I can also read music but very minimally. I used to draw pictures when I was in middle school. The opportunity to improve my drawing skills was very limited in college as I was a busy premed student. About creativity, I think there's a creative energy that's involved when we try to solve problems in mathematics and sciences. That's my main creative arena.

Language (what languages besides English do you speak?): I can speak and write fluently in Hindi and Nepali. Nepali is my first language. I learned Hindi by watching loads of Indian movies while growing up.

Writing: As English is my second language, writing is a little challenging for me. I enjoy reading books. As I am in the field of medicine, I want to write to let other people know about the field. One of my goals is to improve my writing skills.

Literature: Nepal is a poor country, so people usually don't have the interest or luxury to spend time reading literature. As I came to the USA when I was 17, my exposure to English literature was very limited. Therefore, I am not too much interested in literature as a result of lack of exposure. I read popular fiction and non-fiction now and often though.

Science: Science underlines one of my biggest passion. If we think about the last 30,000 year or so of human evolution, we haven't changed significantly in our genetics and biochemistry. We have pretty much the same gene pool and level of intelligence. The modernization of lifestyle that happened in last 500 years occurred primarily because of advancements in science. Now, we have a very powerful tool in our hand (science), and a lot of people are not aware of it's potential or how to constructively use it. Extremely advanced technology and a scientifically illiterate population is a very dangerous combination and one day it will explode in our face.

Please list a few of your favorite:

Movies: Pirates of Caribbean is my all time favorite. Other than that, I like action thrillers movies like Wanted. 3d animated cartoon movies are my second favorite type.

Books/Authors: I am more into non-fiction books. Atul Gawande is my favorite author. Other than him, I really like Malcolm Gladwell and Nicholas Naseem Taleb. Taleb made me a huge fan of applying statistics to daily life. Gladwell's Outliers and David and Goliath book exposed me to many worldview altering ideas. The only fiction books I have read are Fault is in our Stars and Harry potter. Both those books are awesome.

Albums/Musicians/Performances: Albums/Musicians: I like country music, dubstep, Hindi and Nepali music. I don't have much free time so don't listen to music too much. I don't have a favorite album or musicians.

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

A child proves to be one of the most cherished gift for an individual. I feel very excited that I am able to contribute this happiness for the recipient. It proves an advantage for the recipient that you get to choose what features you want in your child by having the luxury to pick donor. Additionally, I get to spread my genes without contributing much.

| Did \ | you choose to | be an Identity | v-Release® P | rogram donor? |
|-------|---------------|----------------|--------------|---------------|
| | | | | |

 \boxtimes Yes \square No

Why did you make this choice?

If I were a child, I would want to know about my biological parents out of curiosity. Therefore, I want to provide the future offspring the same chance that I would have wanted.

Is there anything else you would like to share with participating families and offspring?

I want to thank the recipient a lot in that she contributed in spreading my genes to future generation with very little investment from my side. It's a great feeling of awe and wonder that the future child shares both of our genes equally but we might not ever know each other. You (the recipient) and I are deeply connected. Many times, a child shows some same trait as their biological father. As I won't be there for you to compare the child with, I will tell you a little bit on my childhood. - I was very easygoing and non-demanding. My mom says I rarely gave her troubles. She says it was very easy to keep me happy. For that reason, elders liked to have me as their company. I hung out with lots of adults while growing up.

- One peculiar trait I had was that I would get easily annoyed whenever I was hungry.
- I used to be very close to my mom when I was small. I used to be sad whenever she left home and be happy when she returned.
- I didn't enjoy much spicy or extravagant food. I greatly liked simple foods.
- I ranked 19th out of 20 students in my kindergarten. After that I picked up quickly. Until about 9th grade, I ranked 4th or 5th. From 10th to 12th, I mostly ranked the first. The main reason for my improvement is the friends I had. My close circle of friends were very intellectually curious. Therefore, it is very important that the child is around a healthy and nurturing environment while growing up.

HEALTH PROBLEMS DONOR 5026

| FAMILY MEMBER | HEALTH PROBLEM | TREATMENT/RESOLUTION |
|----------------------|---------------------|--|
| Maternal Grandfather | Stroke | Age at onset/diagnosis: 66 |
| | | Treatment: Hospitalization Outcome: Cause of death at 66 |
| Maternal Grandmother | High blood pressure | Age at onset/diagnosis: 63 |
| | | Treatment: Diet change Outcome: Ongoing |
| Paternal Grandfather | High blood pressure | Age at onset/diagnosis: 65 |
| | | Treatment: Medication |
| | | Outcome: Managed |
| | Cataract | Age at onset/diagnosis: 70 |
| | | Treatment: None |
| | | Outcome: Ongoing |
| Paternal Grandmother | High blood pressure | Age at onset/diagnosis: 62 |
| | | Treatment: Medication Outcome: Managed |
| | | Outcome: Managed |
| | Type 2 diabetes | Age at onset/diagnosis: 65 |
| | | Treatment: Diet change |
| | | Outcome: Ongoing, managed |
| | Cataract | Age at onset/diagnosis: 68 |
| | Gataract | Treatment: None |
| | | Outcome: Ongoing |
| Maternal Uncle #1 | Appendicitis | Age at onset/diagnosis: 32 |
| | | Treatment: Surgical removal |
| | | Outcome: Resolved |

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).

Upon review of the available family medical history information from this donor, the risk for similar health problems occurring in offspring is not expected to exceed the risk in the general population.

Cynthia Kane, M.S., C.G.C.

Genetic Counselor