INTERVIEW NOTES: 5962

Donor 5962 arrived to the interview wearing a colorful Hawaiian-style button up shirt, khaki shorts, and a college baseball cap. His outfit suggested he was relishing breaking out his summer wardrobe on an unseasonably warm day! His dark brown eyes and long eyelashes are framed by thick straight brows and rectangular black plastic glasses. He has thick curly dark brown hair that he wears in an adorably tousled manner. He has dark, deep-set eyes, an oval face with a straight proportional nose, and a beautiful smile framed by a mustache and short beard. Donor 5962 comes across as calm, engaged, and easy to talk to. We truly enjoyed our conversation today!

Donor 5962 was raised in the suburbs of Northern California and lived with his mother, father, and older sister. He remains close to his family today. Much of his extended "blood" family lives in Iran, but he describes very close connections with the Iranian community in his area, with relationships that became like a surrogate family. Family friends were referred to as, "uncle and aunt."

He was close with his sister growing up, who is 3yrs older than him. They spent time riding bikes, scooters, and playing soccer. He was super into video games until high school, with his favorite game being, "Grand Theft Auto: San Andreas." A lifelong passion for music began with piano lessons at age 5. He played piano briefly then transitioned to cello in 5th grade and then to his main instrument, guitar, in middle school. He described himself as a "big metalhead" in middle school and recalls that the first songs he learned were either Metallica or MegaDeath. He kept his activities well-rounded, also playing soccer and basketball in high school, and joining the wrestling team. Besides music, his favorite subject was, "definitely history," particularly learning about different ethnicities and cultures and how their interaction and migration has, "shaped our world today."

Donor 5962 went straight from high school to college, where he is currently immersed in music studies. In addition to composing his own music for solo projects, he writes and produces for other bands and works as a sound engineer. In the future, he is looking forward to continuing his career in music and seeing where it takes him.

He says friends would describe him as, "funny in a normal way and a twisted way, and as fun to be around." He is often trying to make others laugh. He expresses that his Iranian heritage is extremely important to him, and he is very proud of Iranian culture, history, and values such as being humble and kind. He describes Iranian culture as an, "old culture that survived even as it was conquered by other countries."

Outside of music, he enjoys staying active via Judo and outdoor pursuits such as hiking and backpacking. A perfect day for him involves the day off from classes, sleeping in, relaxing with tea and breakfast, playing some videogames, and spending time with his girlfriend and friends. He enjoys board game nights and recently picked up the game, "Powergrid," which he especially likes because it is more about strategy than luck.

When asked about the qualities he is most proud of he cites his perseverance including his Judo practice and the brave choice to forge a career path in the music industry. He is thinking about having a family of his own one day but isn't sure yet if that's a path he'll pursue.

Donor 5962 is creative, kind, and ambitious. We enjoyed our time with him today and are very happy to have him in the program!

Interviewed by Sinead O. and Emily T. on 2/17/22

DONOR PROFILE: 5962

The past and current personal and family medical history, physical examination, and laboratory test results determine that donor 5962 is eligible and approved for semen donation at The Sperm Bank of California. This profile was prepared in May 2022

Personal Information

Identity-Release® Program: Yes
Month/year of birth: March 2000

• Education: B.A. Music Technology & Composition

Current occupation: Musician, Sound, Audio and Recording Engineer

Ethnic origin: Iranian
Religion born into: Islam
Religion practicing: Deism

PHYSICAL CHARACTERISTICS

Height: 5' 7 ½ "
Weight: 161 ½ lbs
Hair color: Black
Hair type: Wavy

• Eye color: Dark brown

Complexion: light brownBody type: ectomorphic (slim)

• Blood group/Rh: **A+**

• Baby photo available: Yes

• Other distinguishing features: Thick, but not too

thick

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

Allergies: D: Pollen Allergy at 19, treated with OTC medications, managed.

Blood: PGM: Chronic lymphocytic leukemia at 70, no treatment, cause of death. PA#1: Multiple myeloma at 55, no treatment, cause of death at 55. PU: Chronic myeloid leukemia at 2, no treatment, cause of death. Gastrointestinal: M: GERD (heartburn) at 41, treated with OTC and prescription medications, managed. MGM:

GERD (heartburn) at 40, treated with OTC and prescribed medications, managed.

Genital/Reproductive: M: Premature menopause at 42, treated with a hysterectomy, managed. F: Enlarged prostate at 50, treated with surgery, managed.

Heart: F: High cholesterol at 62, treated with lifestyle changes, managed. MGM: Blood clot at 69, cause of death. MGF: Heart attack at 79, no treatment, cause of death. PGM: High cholesterol at unknown age, treated with medication, managed until death. PGF: High cholesterol at unknown age, treated with medication and surgery, temporary improvement with surgery, managed until death. PGF: Heart attack at 85, no treatment, cause of death.

Mental Health: MGF: Depression at 72, treated with antidepressant, ongoing.

Metabolic/Endocrine: MGF: Type II diabetes at 55, treated with prescription medications and dietary changes, managed. PGF: Type II diabetes at 55, treated with prescription medication, not well-managed.

Muscles/Bones/Joints: D: TMJ (jaw pain, tightness) at 17, treated with mouthguard, ongoing. M: Osteoporosis at 42, treated with vitamin supplements, light exercise.

Neurological: MGF: Migraines in youth, no treatment, resolved over time. PA#2: Migraines in youth, no treatment, improved over time.

Sight/Sound/Smell: D: R: 20/200, L:20/200

Urinary: F: Kidney & Bladder stones at 58, treated with surgery, chronic.

Cancer (see above): PGM: Chronic lymphocytic leukemia. PA#1: Multiple myeloma. PU: Chronic myeloid

leukemia

DONOR LAB RESULTS

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

HIV 1 & 2: Non-Reactive CMV total antibody: Negative

Hepatitis B: Non-Reactive Hepatitis C: 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 3/04/2022.

The results were **POSITIVE** for **Phenylalanine hydroxylase deficiency (PAH).** Donor 5962 is a carrier for these conditions.

It is strongly recommended that recipients who use this donor's sperm undergo carrier screening for this specific condition.

Testing was negative for the remainder of genes screened.

Disease	Result	Residual risk to be a carrier (based on Middle Eastern ethnicity)
Phenylalanine hydroxylase deficiency (PAH)	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: 5962

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.

Intro and extroverted whenever I feel like being either (depending on the situation). I joke around a lot with others, but am still goal-oriented on things I would like to accomplish.

What are your interests and talents?

I am a musician and audio engineer, so it's clear that I love music. Apart from that, I enjoy judo, backpacking, film, and the outdoors. Challenging myself physically is something I really enjoy going; intense judo training sessions that leave me tired and sore give a feeling of accomplishment that is unrivaled by most things.

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

I would like to continue working as a musician and recording engineer. Whether it be audio and video work for church services and private/public events, or performing sessions where I'm recording bands/musicians, I enjoy the collaborative process and hope to continue this for the rest of my life. In 5 to 10 years I see myself working

for a company and performing their sound duties while simultaneously gigging and freelancing audio/visual needs for individuals and their events.

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

Math: My father is a math professor, but my skills are not sufficient for a legacy.

Mechanical: I understand how things work but can't use them physically.

Athletic: I'm very athletic, and I strive to keep my body healthy. I was told in high school that one of the only things that will remain with you for the rest of your life is your body and your health. This really affected me in a positive way and I always keep it in the back of mind to stay healthy and active, for our bodies are important and sometimes we take it for granted.

Musical, Artistic, Creative: I like to think I have a creative mind as I am a musician. Creating music, devising recording techniques for a particular session, or even playing an instrument all have their own unique aspects of creativity, but the overall concept of coming up with something out of nothing is a skill I appreciate having.

Language (what languages besides English do you speak?): I speak Farsi and a little bit of Spanish. Growing up in my household I was always speaking with my parents or family friends in Farsi, so I had a great outlet to learn and practice a second language. This makes me feel more attached to my ethnicity and the culture I was raised in.

Writing: I have been told that I have very good skills when it comes to writing persuasive essays and formulating arguments. What inspired was a speech and debate class I took my freshman year of high school; I took this class very seriously and it was interesting to learn how effective language can be when it comes to drawing emotions or reactions out of people. The persuasiveness of language and the use of rhetoric by humans is fascinating, and I thoroughly enjoy formulating arguments using reason when it comes to writing papers or essays.

Literature: I do not have a large interest in literature.

Science: I do not have a large understanding of science, but I am interested in the field.

Please list a few of your favorite:

Movies: Pulp Fiction, Body of Lies, Taxi Driver, American Psycho, Blood Diamond

Books/Authors: Heart of Darkness, Of Mice and Men, Their Eyes Were Watching God

Albums/Musicians/Performances: Pink Floyd, Tame Impala, John Coltrane, Miles Davis, Kendrick Lamar, Led Zeppelin, 2Pac, The Beatles, Green Day, MNDSGN, Flying Lotus, Awhlee, Pink Siffu, B. Cool-Aid, Kimbra, Renata Zeiguer

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

I was informed through a colleague and would like to help those who have difficulty conceiving. My best friend is transgender, so he knows the struggle and has relayed the difficulty he is going to have to go through in order to start a family. The money is a nice addition as well (especially as a college student).

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

I think that everybody should have the opportunity to meet their biological parent. I believe it is important for an individual to have an understanding of where their bloodline and ethnic origin comes from as it will help them in establishing their own identity while simultaneously inspiring them to learn more about the culture of their ethnicity. My Iranian culture is very important to me, and I couldn't imagine not knowing about it.

THANK YOU!



HEALTH PROBLEMS LIST DONOR 5962

DONOR

Problem/Diagnosis: Pollen Allergy

Age of Onset: 19 Treatment: OTC meds Outcome: Managed

Problem/Diagnosis: TMJ (Jaw pain/tightness)

Age of Onset: 17

Treatment: Mouthguard recommended Outcome: Ongoing, minimal symptoms

MOTHER

Problem/Diagnosis: GERD (Heartburn)

Age of Onset: 41

Treatment: OTC and prescription meds

Outcome: Managed

Problem/Diagnosis: Premature Menopause

Age of Onset: 42

Treatment: Hysterectomy

Outcome: Managed but possibly linked to osteoporosis and difficulty maintaining/losing weight

Problem/Diagnosis: Osteoporosis

Age of Onset: 42

Treatment: Vitamin B and Calcium supplements, light exercise

Outcome: Managed

FATHER

Problem/Diagnosis: Kidney & Bladder Stones

Age of Onset: 58

Treatment: Surgery to break up stone

Outcome: Chronic

Problem/Diagnosis: Enlarged Prostate

Age of Onset: 50 Treatment: Surgery Outcome: Managed

Problem/Diagnosis: High Cholesterol

Age of Onset: 62

Treatment: Lifestyle changes

Outcome: Managed

MATERNAL GRANDMOTHER

Problem/Diagnosis: GERD (Heartburn)

Age of Onset: 40

Treatment: OTC and prescription meds

Outcome: Managed

Problem/Diagnosis: Blood Clot

Age of Onset: 69

Treatment: Hospitalization

Outcome: Death

MATERNAL GRANDFATHER

Problem/Diagnosis: Type II Diabetes

Age of Onset: 55

Treatment: Metformin, diet changes

Outcome: Managed

Problem/Diagnosis: Depression

Age of Onset: 72, following death of his spouse

Treatment: Antidepressant medication

Outcome: Ongoing

Problem/Diagnosis: Migraines

Age of Onset: Youth Treatment: None

Outcome: Improved with age

Problem/Diagnosis: Heart Attack

Age of Onset: 79 Treatment: None Outcome: Death

PATERNAL GRANDMOTHER

Problem/Diagnosis: High Cholesterol

Age of Onset: Unknown Treatment: Medication Outcome: Managed

Problem/Diagnosis: Chronic Lymphocytic Leukemia

Age of Onset: 70 Treatment: None Outcome: Death

PATERNAL GRANDFATHER

Problem/Diagnosis: High Cholesterol

Age of Onset: Unknown

Treatment: Medication, Surgery

Outcome: Temporary improvement with surgery, now chronic

Problem/Diagnosis: Type II Diabetes

Age of Onset: 55
Treatment: Metformin

Outcome: Chronic, not well-managed

Problem/Diagnosis: Heart Attack

Age of Onset: 85 Treatment: None Outcome: Death

PATERNAL AUNT #1

Problem/Diagnosis: Multiple Myeloma

Age of Onset: 55
Treatment: None
Outcome: Death at 55

PATERNAL AUNT #2

Problem/Diagnosis: Migraines

Age of Onset: Youth Treatment: None

Outcome: Improved with age

PATERNAL UNCLE

Problem/Diagnosis: Chronic Myeloid Leukemia

Age of Onset: 2 Treatment: None Outcome: Death

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 5962's family history is notable for early menopause and the instances of blood cancers on the paternal side of the family. Early menopause is common and affects 5% of women. A small subset of those women has early menopause due to a genetic defect called a "Fragile X premutation." If a man is a premutation carrier, none of his male offspring will inherit the affected X chromosome, but all female offspring would. The female offspring would be at increased risk to develop early menopause and/or an associated tremor/ataxia syndrome later in life. They would also be at increased risk of having children affected with Fragile X syndrome, characterized by intellectual disability, autism, and other features. Based on the family history reported, there is no additional evidence that the donor's mother carries a Fragile X premutation, but this risk cannot be eliminated.

Three family members were affected with blood cancers on the donor's paternal side of the family (chronic lymphocytic leukemia, chronic myeloid leukemia and multiple myeloma). The types and presentation of the blood cancers in this family do not appear to be associated; however, hereditary forms of blood cancers do exist. From the family history, it is not possible to determine if the blood cancers seen in the family are related to each other or occurred sporadically.

Sincerely,
Janine Mash, LCGC
Certified Genetic Counselor
San Francisco Genetic Counseling