
Family Building Connections

Practice of Britta Dinsmore, Ph.D.

808 SW 15th Avenue, Portland, OR 97205

(503) 274-4994; Option 3, then Option 1 (ORM Patient Services)

FEE AGREEMENT for RECIPIENTS OR INTENDED PARENTS for the PSYCHOLOGICAL EVALUATION/CONSULTATION of a KNOWN DONOR or CARRIER

Psychologists Providing Psychological Services for Family Building Connections/Britta Dinsmore, Ph.D.:

Britta Dinsmore, Ph.D. Director

Susannah Castle, Psy.D. Independent Contractor

Kate Henson, Ph.D. Independent Contractor

Paula Wagenbach, Psy.D. Independent Contractor

Please complete, sign, and return this document to the address above (or scan and email to: brittadinsmore@comcast.net).

A signed fee-agreement and full payment for a known donor or carrier psychological evaluation/consultation is required prior to scheduling the appointment. If these steps are not completed prior to scheduling, the appointment may be cancelled. In no case will the psychological evaluation/consultation be conducted until full payment is received.

Name(s) of your donor and/or carrier, as well as phone number(s) and email address(es):

Name(s) and contact information for the referring agency, clinic, or attorney to whom the results should be released:

We require 36 hours' notice for cancellations or scheduling changes to avoid a "No-Show/Late Cancel" fee. If an appointment is cancelled and/or rescheduled with advance notice of 36 hours, the full pre-paid amount will either be refunded or, if the appointment will be rescheduled, will be applied to the future appointment. If 36 hours' advance notice is NOT given prior to cancelling and/or rescheduling an appointment, the "No-Show/Late Cancel" fee will be deducted from any refund of the pre-paid amount or deducted from the amount available to be applied to any future appointments. This means that in such cases, prior to scheduling a future appointment, the "No-Show/Late Cancel" fee must be paid in full.

FEE SCHEDULE: PSYCHOLOGICAL EVALUATION/CONSULTATION- KNOWN DONOR OR CARRIER:

Known Egg or Sperm Donor- \$350 (\$525 if psych testing is conducted; No-Show/Late Cancel Fee- \$100

Known Gestational Carrier- \$695; No-Show/Late Cancellation Fee- \$140

WHAT IS INVOLVED:

A psychological evaluation/consultation involves a 50-60-minute clinical interview with the candidate and, if the candidate is married or living with a partner, the spouse or partner as well. Following the interview, an objective psychological inventory is administered via laptop computer to all gestational carrier candidates and, depending on the evaluating psychologist's recommendation, sometimes to donor candidates. Testing takes an additional 60-75 minutes. The decision to administer the psychological inventory to a donor candidate is based on the psychologist needing more information than can be obtained through the interview alone. It does not mean that the donor will not be approved to donate, nor does it mean that the psychologist thinks that the donor has a psychological problem or diagnosis. Though the psychologist's face-to-face time with the candidate may only be 50-60 minutes, the psychologist spends several additional hours considering the different pieces of information obtained during the interview, writing a comprehensive evaluation/consultation report and, if psychological testing is part of the process, interpreting test results and integrating the interview and test data.

PURPOSE OF PSYCHOLOGICAL EVALUATION OF KNOWN DONOR OR CARRIER CANDIDATES:

The American Society for Reproductive Medicine states that a psychological evaluation/consultation for known donors and carriers is a necessary component in meeting "Standard of Care." In the case of known donors and carriers, the focus is somewhat different than for agency donors and carriers in that it is more consultative than evaluative. One purpose of the session is to provide information about specific topics relevant to the type of third-party assistance the candidate is planning

to provide and to facilitate an exploration and discussion of relevant personal, emotional, and psychological considerations. The goal is to better equip the candidate to make an informed decision to donate or carry, address any lingering hesitations or concerns, clarify expectations or assumptions, and identify any topics needing further discussion between the parties. This benefits all parties---the candidate, the future parents, and the resulting offspring.

Another aim of the psychological evaluation/consultation is to help the candidate assess his or her current psychological and emotional health and stability within the context of current life stressors, coping skills, and available support. Known donors and carriers are inevitably very generous people with big hearts who want to help people they know and love. Before proceeding, we want them to feel confident that they are at a good place emotionally to make such a major life decision and also to cope with any additional demands that participation requires (i.e. appointments, self-administered injections, physical/emotional side effects of medications, medical procedures, pregnancy), and to cope with any negative outcomes in a healthy way, without self-blame or guilt. If a candidate is unsure that the decision to donate or carry is right for him or her at this point in time, the psychologist may encourage the candidate to take more time to carefully consider the decision.

With donor candidates specifically, the evaluation/consultation involves a review of the donor's personal and familial mental health history. The purpose of this is to better understand the significance of any current or historical psychiatric issues so that the recipients can be advised of any potential increased risk for specific mental health concerns in resulting offspring. We believe that the more information the recipients have about the potential implications of their future child's genetic/medical background, the better equipped they will be to parent that child.

TRANSMISSION OF EVALUATION/CONSULTATION RESULTS:

After the evaluation/consultation is completed, a report will be written that summarizes information obtained in the interview and psychological testing (if testing is conducted), reviews any areas of concern, and provides a recommendation about whether the candidate meets psychological guidelines for serving as a donor or carrier. In the case of a known donor or carrier, it would be rare for the recommendation be that the candidate does not meet psychological guidelines to proceed. Much more commonly, if there are concerns, these are noted in the report and, depending on the nature of the concerns, either the candidate or the future parents (or both) then can consider the noted concerns and decide whether to proceed in spite of them. Though Family Building Connections will only release the written report to the referring agency, fertility clinic, or attorney (not to the recipients or intended parents), as noted above, any concerns identified by the evaluating psychologist may be shared with the recipients or intended parents.

CONFIRMATION OF FINANCIAL RESPONSIBILITY:

Your signature below indicates that you agree to the terms and fees outlined above, are aware that psychological testing may be recommended for a known donor candidate by the evaluating psychologist and that this will result in an additional fee of \$175. It also confirms that you agree to be responsible for full payment of the services provided to your known donor or carrier even if the psychologist indicates the candidate does not meet psychological guidelines, the candidate decides not to proceed, or you decide not to continue with your plans for him or her to serve as your donor or carrier.

Client/Financially Responsible Party Name (Printed)

Date of Birth

(Signature)

Date

Name of your donor or carrier candidate(s): _____

Financially Responsible Party Information:

Address: _____ City, State: _____ Zip Code: _____

Phone #(s) and Email Address(es): _____

CREDIT CARD INFORMATION: If you wish to pay by credit card- Name of cardholder: _____

Card #: _____ Expiration Date: _____ Security Code: _____ (3 digits or 4 digits for AmEx)

Zip Code Associated with the Card: _____ Signature: _____

Amount (check all that apply): ___ \$695 for GC Eval/Consult ___ \$350 (\$525 if psych testing conducted) for Donor Eval/Consult

To provide credit card information by phone, call MindEase Billing (971-533-9911) or Britta Dinsmore, Ph.D. (503-913-4791). Checks can be made out to "Britta Dinsmore, Ph.D." and mailed to: Britta Dinsmore, Ph.D. C/O ORM - 808 SW 15th Ave - Portland, OR 97205