Fees have been broken down according to treatment options. You may require one or several of these options, depending on your situation. Your physician will discuss with you the treatment options that are best for you. Fees do not include the cost of medications which will vary depending on your drug insurance plan.

In cases of cancellation or change in treatment, price adjustments will be applied based on our refund policy. Prices are subject to change without prior notice. All fees must be paid in full prior to the beginning of the treatment. No personal cheques accepted.

Insemination (IUI)	
For those who are eligible, RAMQ covers for u intra-uterine inseminations per live birth. If yo treatment is not covered, insemination fees a	bur
IUI Monitoring	\$400
IUI Procedure (includes sperm wash)	\$400
In Vitro Treatments	
In Vitro Fertilization (IVF) includes AH	\$6,350
In Vitro Maturation (IVM) includes AH	\$6,350
Frozen Embryo Transfer Cycle (FERC) incl. AH	\$2,150
Frozen Oocyte (Egg) Replacement Cycle (FOR	C) \$2,500
Frozen Oocyte (Egg) Replacement Cycle (FOR with Oocyte Donation (oocytes not included)	<sup>C)</sup> \$3,250
Egg Donation Cycle	\$8,500
Intra-Couple Donation (same sex 😨)	\$7,000
Surrogacy	\$8,500
Surrogacy with Egg Donor (embryo freezing, includes one year of storage)	\$10,000
Surrogacy Frozen Embryo Transfer Cycle (FER	C) \$2,500
Surrogacy Frozen Oocyte (Egg) Replacement Cycle (FORC) with Oocyte Donation (oocytes not included)	\$4,250
Direct Sperm Donation (includes freezing of four samples)	\$2,500
Additional samples within six months	\$350 each

Other Procedures (if applicable)	
Assisted Hatching (AH)	\$500
Intra-Cytoplasmic Sperm Injection (ICSI)	\$1,600
Sperm Selection (Annexin)	\$700
Sperm Selection (ZyMot)	\$350
Surgical Sperm Retrieval (TESE)	\$2,600
Micro-surgical Sperm Retrieval (MicroTESE/MESA)	\$4,100
Embryoscope	\$500
ERA/ matrice test monitoring cycle	\$800

Cryopreservation (Freezing) & Storage	
Egg/Embryo Freezing (includes one year storage)	\$1,050
IVF Back-Up Sperm Freezing (includes one year storage)	\$350
Sperm/ Egg /Embryo Storage (annual fee)	\$350
Donor Sperm storage (annual fee)	\$350

Elective Fertility Preservation (includes one year of storage)	
Egg Freezing	\$5,200
Embryo Freezing	\$6,400
Sperm Freezing	\$350

Fertility Preservation for Patients Diagnosed with Cancer RAMQ Coverage (includes five years of storage)		
Egg Freezing	Covered by RAMQ	
Embryo Freezing	Covered by RAMQ	
Sperm Freezing	Covered by RAMQ	

Fertility Preservation for Patients Diagnosed with Cancer – NON RAMQ (includes five years of storage)	
Sperm Freezing	\$350

Other Fees	
Administrative Fee	\$200
Medical chart review/phone consult	\$300
Counselling	\$175
IVF Monitoring (for patients doing treatment in another clinic)	\$1,250

McGill University Health Centre McGill University Health Centre

December 1, 2022

I/we hereby consent to the terms of the MUHC Reproductive Centre cancellation policy. I/we understand that full or partial reimbursement is subject to the following terms:

- Cancellations for non-medical reasons, prior to the start of treatment, are subject to a \$500 cancellation fee;
- All cancellations for medical or non-medical reasons after the start of treatment will be reimbursed according to the following schedule:

This policy is subject to change, reflecting any changes in our price list.



Treatment	Fee Paid	id Refund Based on Time of Cancellation		
		Prior to Collection	After Collection and No Oocytes(eggs) Retrieved	Prior to Transfer of Fresh Embryo
In Vitro Fertilization (IVF)   In Vitro Maturation (IVM)	\$ 6,350	\$ 4,000	\$ 1,700	\$ 700
IVF/IVM with Oocyte(egg) Donation	\$ 8,500	\$ 5 <i>,</i> 500	\$ 1,700	\$ 700
Intra-Couple Donation (same sex 😨)	\$ 7,000	\$4,500	\$1,700	\$ 700
Fertility Preservation (egg freezing) for patients diagnosed with cancer	\$ 2,000	\$ 2,000	\$ O	
Fertility Preservation (embryo freezing)for patients diagnosed with cancer	\$ 3,000	\$ 3,000	\$ 1,000	
Elective Fertility Preservation (egg freezing)	\$ 5,200	\$ 2 <i>,</i> 300	\$ 0	
Elective Fertility Preservation (embryo freezing)	\$ 6,400	\$ 3 <i>,</i> 500	\$ 1,000	
Surrogacy	\$ 8,500	\$ 6 <i>,</i> 000	\$ 1,700	\$ 700
Surrogacy with Oocyte (egg) Donor (embryo freezing)	\$ 10,000	\$ 4,500	\$ 1,700	

Treatment	Fee Paid	Refund Based on Time of Cancellation		
		Prior to Thawing of After thawing and		
		Embryos <sup>[1]</sup> No Embryo Transfer		
Frozen Embryo Transfer Cycle (FERC)	\$ 2,150	\$ 800 \$ 500		
Frozen Embryo Transfer Cycle (FERC) with Surrogate	\$ 2,500	\$ 800 \$ 500		

Treatment	Fee Paid	Refund Based on Time of Cancellation		
		Prior to Thawing of Oocytes (eggs) <sup>[1]</sup>	After Thawing of Oocytes (eggs) and Prior to Fertilization	After Fertilization and No Embryo Transfer
Frozen Oocyte (Egg) Replacement Cycle (FORC)	\$ 2,500	\$ 1,800	\$ 700	\$ 500
Frozen Oocyte (Egg) Replacement Cycle with Oocyte Donation (FORC + OD)	\$ 3,250	\$ 2,550	\$ 1,500	\$ 500
Frozen Oocyte (Egg) Replacement Cycle with Oocyte Donation (FORC + OD) and Surrogate	\$ 4,250	\$ 3,250	\$ 1,500	\$ 500
Direct Sperm Donation Cycle	\$ 2,500	\$ 1,500		

<sup>[1]</sup> Provided a written request is received by the Clinic's embryology lab 24 hours prior to the scheduled transfer date.
 <sup>[2]</sup> FERCs and FORCs cancelled for medical reasons will be rescheduled. No refund will be issued.

## PATIENT CONSENT

I have been given time to consider the content of this document and the opportunity to make further inquiries before signing this form.

Name (Print)

Date (yyyy-mm-dd)

PARTNER CONSENT (if applicable)
I am the partner of \_\_\_\_\_\_ and I acknowledge that she and I are being treated together. I have been
given time to consider the content of this document and the opportunity to make further inquiries before signing.

Signature

Place