

SURROGATE MOTHERS GUIDE

AN ILLUSTRATED LOOK

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Phone Consultation

Ask questions, discuss fears, and hear about first-hand experiences.



Pregnancy History

We have questions regarding your history!



Overall Health

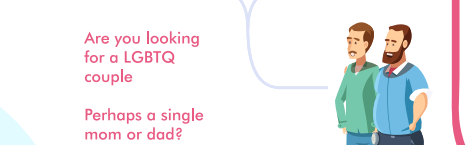
What is your current health status?

After an in-depth phone consultation, it's time to start thinking about who you might pick to be your Intended Parent. We'll provide you with a number of profiles that best suit your individual needs and match your values.

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Intended Parents

You'll want to carry a child for a couple (or person) who matches your values.



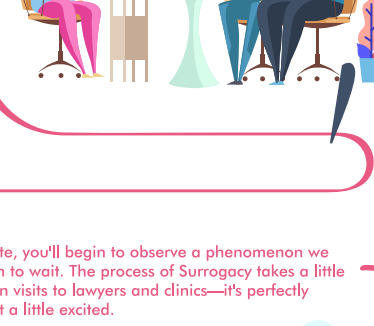
Are you looking for a LGBTQ couple

Perhaps a single mom or dad?

Maybe it's a couple that's been unable to conceive naturally?

Video Conference

Once you have decided on the right fit for you, we'll book a video conference call with you and the Parents.



Rush To Wait

As a Surrogate, you'll begin to observe a phenomenon we call—the rush to wait. The process of Surrogacy takes a little time. Between visits to lawyers and clinics—it's perfectly natural to get a little excited.



- RUSH** → Get your profile completed.
- WAIT** To find a good match
- RUSH** → Book a call with the Intended - Parent. You're anxious to meet them, we get it!
- WAIT** More paperwork
- RUSH** → Off to the clinic for screening
- WAIT** More appointments with counselors and lawyers



It's a big decision, so it's important to take each step as it comes.

You'll also be assigned a mentor and they will walk with you through every step of the journey.

There Are 2 Types of Surrogates

Gestational Surrogacy Is By Far The Most Common

Gestational Surrogacy

A Surrogate Mother does not use her own eggs, meaning the Surrogate Mother is simply the carrier of a fertilized embryo(s) transferred via In Vitro Fertilization (IVF).

Traditional Surrogacy

A Surrogate Mother uses her own eggs and is artificially inseminated with the sperm of the Intended Father or sperm donor.

In Vitro Fertilization (IVF)

It starts by manually combining an egg and sperm in a petri dish. The embryo(s) is then transferred to the uterus and a regular pregnancy follows.

Pioneered in the UK in 1978, an estimated 5 million children have been born worldwide through IVF.

Life In The Dish - IVF is really the soul of Surrogacy. Life In

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In essence, hormone treatment is like revving up the engine before hitting the road.

Estrogen and Progesterone are used to trick the body into thinking it's pregnant. Just like natural hormones, these drugs will make you feel, well, hormonal.

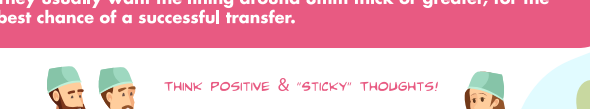
Once the body thinks it's pregnant you'll be ready for an ultrasound to check the lining of the uterus.

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Hot Date With The Ultrasound Tech

The hormones start one week before the lining check. During the ultrasound, the lining of the uterus will be checked for optimal thickness and hormones will be prescribed.

THINK FLUFFY THOUGHTS!



USING AN INTERNAL ULTRASOUND WAND, I WILL CONFIRM THAT YOUR UTERUS LINING IS THICK ENOUGH TO RECEIVE AN EMBRYO AND LET IT GROW.

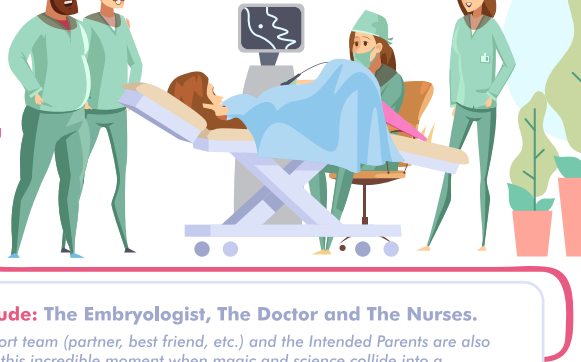
FANTASTIC!

They usually want the lining around 8mm thick or greater, for the best chance of a successful transfer.

The Transfer

You'll be able to watch, through ultrasound, as the wand is inserted and the embryo is released to float and eventually nestle into the lining of your uterus.

Once the transfer is complete, and after a quick 30 minute rest, you're free to go home.



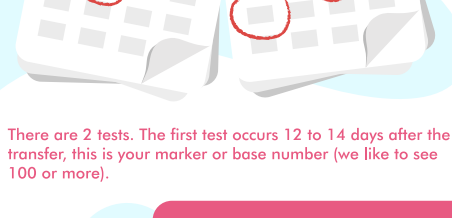
THINK POSITIVE & "STICKY" THOUGHTS!

Guests of honour will include: The Embryologist, The Doctor and The Nurses. Of course, if you want, your support team (partner, best friend, etc.) and the Intended Parents are also allowed to be in the room during this incredible moment when magic and science collide into a baby-making party.

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The Betas

When a fertilized egg attaches to the wall of the uterus a hormone called human chorionic gonadotropin (hCG) is produced. After the transfer there is a nail-biting two week wait until your Beta hCG test.



There are 2 tests. The first test occurs 12 to 14 days after the transfer, this is your marker or base number (we like to see 100 or more).



48 hours after the first test you'll get another test and if the number has doubled you can breathe a sigh of relief, chance are the transfer was successful.

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The Pregnancy

Once a successful transfer has occurred, the clinic has medically cleared you as pregnant (after the second beta has doubled - or more - in size) - congratulations! You're pregnant!

By thickening the lining and increasing hormones estrogen and progesterone, you're tricking the body into thinking it's pregnant. The hormones work to maintain the lining after the transfer, and also help promote healthy embryo growth.



After the hormone treatment, it's basically a regular pregnancy. You'll get another ultrasound at approximately 6 weeks, then your shared care will be handled by your medical team and your fertility clinic. At 12 weeks, the fertility clinic will transfer your care to your medical team (includes OB, family doctor, or midwife - with a support person like a doula optional).

Fun fact **You get to pick your own medical team**

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The Delivery

You're giving one of the greatest gifts anyone can ever offer. You'll cry. You'll feel proud. True, we'll cry. Because of you, someone's dream will come true, they will be to you as the honorary auntie.

You'll be changing the world with your gift.

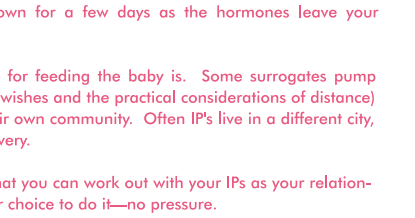
This is the true moment of magic—some Surrogates have confessed that it was more joyful for them than the birth of their own children. Since you've already given birth, Surrogacy delivery isn't all that different.



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After The Pregnancy

Once you've given birth you'll finally get to sleep again! Obviously, you'll need to recover, but you can recover knowing that you have brought true joy into the world.



As with other pregnancies, you might feel down for a few days as the hormones leave your body—this is totally normal.

You'll also work out in advance what the plan for feeding the baby is. Some surrogates pump breastmilk for awhile (depending on everyone's wishes and the practical considerations of distance) and some go on to pump for a milk bank in their own community. Often IP's live in a different city, so pumped milk needs to be mailed special delivery.

All of this is a personal choice and something that you can work out with your IPs as your relationship develops and how you feel. It is 100% your choice to do it—no pressure.

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Welcome To Your Support System!

We're always there for you: your surrogate mentor, the clinic counsellor, as well as the rest of the ANU team. Others in your support system could be the Intended Parents, your family & friends, as well as the rest of the ANU surrogacy community. Your support system is defined by you. Who is around you is completely up to you!

