



# ACRC Gametes Donation

ACRC Global Fertility Holding Group

**Donor Code : AD1393**



**Eye Color**

**Dark Brown**

**Hair Color**

**Black**

**Height**

**160 CM/ 48 KG**

**Ethnicity**

**Asian-Japanese**

**Blood Type**

**A**

**Education**

**College Graduate**

**Donor Location**

**Japan**

**Willing to Travel Out of State?**

**Date of Birth**

**1999**



Donor Pictures





## Donor Pictures





Donor Pictures





## Donor Pictures





## Physical Information

What is your occupation?

Currently, I work as a manager and director at a nursery school. Previously, I worked as a broadcaster at a TV station for five and a half years.

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Have you ever done plastic surgery before? Please Describe.

NO

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## Education

The highest level of education completed?

College Graduate

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Name of the university you have attended or graduated? what is your GPA

Tokyo Kasei University

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What is your major?

Midwife

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What languages do you speak other than your mother tongue?

Japanese(mother tongue)

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## Character/Personality

What are your hobbies?

Traveling is my hobby. I love visiting various places, experiencing new things, and relaxing while enjoying the scenery.

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Describe your athletic abilities:

I am not particularly athletic, but I was good at long-distance running.

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How do you spend your free time?

I often go out with friends and family. I enjoy being active, but I also like spending relaxing time at home.

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Are you married?

NO

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If you had the opportunity to send a message to the parents, what would it be?

Nice to meet you.

I wonder what thoughts you have while reading this message. Some of you may be feeling hopeful, while others may have concerns or anxieties. I can only imagine the challenges and difficulties you have faced in making the decision to proceed with egg donation.

I sincerely hope that this egg donation can, in some way, bring you closer to your hopes and dreams.

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Do you exercise? If so, how frequently per week?

Twice a week, Running, Yoga, Exercise Bike

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Describe your personality.

I deeply cherish my friends, family, and the people around me. I am not the type to act alone; instead, I prefer sharing experiences and spending time with others. I generally adapt to those around me and am often described as easygoing.

I like to plan things in advance, whether it's work or hobbies, but when I want to do something, I act without hesitation.

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## Reproductive History

Have you ever been pregnant before and how was the outcome

NO

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Do you have regular monthly menstrual period? If no, please explain

YES, cycle 28 days

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Have you ever been abortion before and how was the outcome

NO

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What form of birth control are you using?

Birth control pill.

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## Medical Information

Have you ever had or do you have any medical problems?

NO

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Have you ever had or do you have any psychological problems?

NO

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Have you ever received a blood transfusion?

NO

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Have you ever had or do you have any serious illnesses or injuries?

NO

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Do you have any chronic medical problems or conditions?

NO

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Have you gotten a tattoo/ piercing recently? If yes, when?

NO

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Do you have any allergies? If yes, specify.

YES

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Have you ever had surgery (including cosmetic surgery)?

NO

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Do you drink coffee? If so, how often (per day, per week)?

Once a week

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Do you consume alcoholic beverages?

NO

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Do you smoke?

NO

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Have you received vaccinations within the past 12 months?

NO

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Has your sexual partner had AIDS, syphilis, gonorrhea, hepatitis B, or hepatitis C? If yes, what infections?

No

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How is your hearing (without a hearing aid)?

normal

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Have you ever had a sexually transmitted disease?

NO

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Do you have any close relatives with infertility?

NO

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Have you ever done surgeries under any physical conditions?

NO

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Have you taken any drugs in the past year?

NO

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Have you ever been diagnosed with cancer?

NO

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Have you ever had a sexually transmitted disease?

NO

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Does anyone in your family have hair loss (baldness)?

NO

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Have you gotten a tattoo / piercings recently? If yes, when?

NO

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Have you ever taken anti-malarial medication or had malaria?

NO

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Have your parents ever experienced infertility?

NO

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Do you have family members who are twins or triplets?

NO

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## Donation History

Have you ever donated before?

NO

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## Family History

Relative	Age	Height/ Weight	Race	Hair/ Eyes Color	Education Level	Health
Father	51	175/70	Asian	Black/ Dark Brown		healthy
Mother	50	158/46	Asian	Black/ Dark Brown	University graduate	healthy
Maternal Grandmoth er	78	150/	Asian	Black/ Dark Brown		healthy
Maternal Grandfather	80	175/	Asian	Black/ Dark Brown		healthy
Paternal Grandmoth er	80	148/43	Asian	Black/ Dark Brown	High School	healthy
Paternal Grandfather		178/68	Asian	Black/ Dark Brown		Deceased