



Freezing / conserving of

sperm ova

A. Authorization

I, the undersigned

Last name / First name _____ Date of birth _____

Street / nr _____ Phone _____

Postal code / City _____

1. hereby request Viollier AG to freeze and store my reproductive cells within the context of a medically assisted reproduction.
2. acknowledge that my reproductive cells may be stored for five years in accordance with the Reproductive Medicine Act (RMA, current version) regarding medically assisted artificial reproduction. After the five years have elapsed, I can apply to have the cryoconservation extended by a maximum period of up to five years. The cells can be stored for a total of 10 years.
3. Possible exceptions to this, e.g. for carcinomatosis, are detailed in Article 15 of the law. My situation corresponds to the exceptions described, my reproductive cells will be stored for longer than 10 years.
 Yes No
4. acknowledge that the freezing, storage and thawing of the reproductive cells is performed using tried and tested scientific methods. Viollier AG cannot, however, provide any warranty that the reproductive cells will be viable and suitable for establishing a pregnancy after thawing.
5. acknowledge that I can request Viollier AG at any time by written order to destroy my reproductive cells. My reproductive cells may only be thawed with my express permission in writing in order for the purpose of fertility treatment. I can, at any time, pass my reproductive cells on to another center for further conservation or use.
6. agree that Viollier AG will invoice me for the freezing and conservation in the first year and from the second year on, invoice me for payment of the annual fee for the subsequent year in advance. In the event of thawing, destruction or transfer of my reproductive cells, payment for the entire year is still due. The standard fees are listed on the up-to-date schedule of fees of Viollier AG.
7. agree that sperm or immature ova that are not suitable for the purposes of a medically assisted reproduction, are used by Viollier AG within the framework of quality monitoring and method evaluation. The cells will be destroyed immediately upon completion of any such use.
 Yes No
8. agree to notify Viollier AG of any change of address.

Comment _____

Place, date _____ Signature _____

B. Declaration of Acceptance by Viollier AG

Last name / First name _____ Comment _____

Place, date _____ Signature _____

Federal Act on Medically Assisted Reproduction (Reproductive Medicine Act, RMA)

810.11

of 18 December 1998 (Status as of 1 September 2017)

Art. 15 Preservation of reproductive cells

- 1 Reproductive cells may be preserved only with the written consent of the person from whom they were obtained, and for a maximum of five years. At the request of this person, the preservation period shall be extended by a maximum of five years.

- 2 A longer preservation period may be agreed with persons who have their reproductive cells preserved with a view to producing their own offspring at a later date because medical treatment they undergo or an activity they carry out could lead to infertility or damage to their genetic material.

- 3 The person from whom the reproductive cells are obtained may, at any time, in writing, revoke consent to their preservation and use.

- 4 If consent is revoked or the preservation period expires, then the reproductive cells are to be destroyed immediately.
