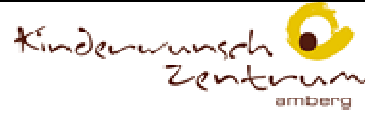
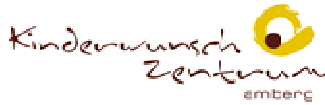


## Interne Formulare

Datei:Q:\Interne Formulare\Kiwu\Mappen IVF\_ICSI Englisch\Kündigung kryokonservierter Zellen englisch Version 2.doc



## Kinderwunschzentrum



**Dr. med. Jürgen Krieg**

Emailfabrikstr. 15  
92224 Amberg

Tel: 09621 769370  
Fax: 09621 9601612  
e-mail: info@dr-krieg.de

### Termination of storage agreement and discarding cryopreserved material

Patient's Name Mrs \_\_\_\_\_

date of birth \_\_\_\_\_

birth name \_\_\_\_\_

Patient's Name Mr \_\_\_\_\_

date of birth \_\_\_\_\_

birth name \_\_\_\_\_

Home adress and city: \_\_\_\_\_

I/we wish to terminate my/our contract concerning storage of unfertilized/fertilized oocytes and/or embryos and/or human sperm and/or testicular tissue with the „Praxis Dr. med. Jürgen Krieg, Kinderwunschzentrum, Emailfabrikstr. 15, 92224 Amberg, Germany“. In addition, I/we want you to discard and destroy my/our cryopreserved material, which is cryogenically stored in the Praxis Dr. Krieg, in particular:

Please choose (mark) all that apply and sign and date below your choice:

- Fertilized oocytes (eggs) from an IVF/ICSI treatment (both have to sign)
- Unfertilized oocytes (eggs) (just the female patient has to sign)
- Sperm cells (from the male patient) (just the male patient has to sign)
- TESE material (testicular tissue) (just the male patient has to sign)
- Donor sperm cells (both have to sign)

Date: \_\_\_\_\_

\_\_\_\_\_  
Patient signature female

\_\_\_\_\_  
Patient signature male

MVZ Gynäkologisches Zentrum Amberg-Sulzbach GmbH, (HRB 5715-AG Amberg, GF Dr. med. Jürgen Krieg),  
Hauptsitz: Emailfabrikstr. 15, 92224 Amberg

Erstellt von: Raffel	Freigegeben von: Dr. Krieg	Geändert durch: Kopp	Version 2
Datum: 20.08.15	Datum: 15.02.23	Datum: 15.02.23	