

# **PRICE LIST**

| FIRST CONSULTATION                          |         |     |    |
|---------------------------------------------|---------|-----|----|
| First consultation with gynecologist        | EUR 0   | YES | NO |
| (personally, by phone, skype - max 60 min)  | LOK U   | TLS | NO |
| Additional consultation with gynecologist / |         |     |    |
| geneticist / urologist                      | EUR 50  | YES | NO |
| (personally, by phone, skype – max 30 min)  |         |     |    |
| Additional consultation with gynecologist / |         |     |    |
| geneticist / urologist                      | EUR 100 | YES | NO |
| (personally, by phone, skype – max 60 min)  |         |     |    |

| IVF   |                                                                |           |     |    |
|-------|----------------------------------------------------------------|-----------|-----|----|
| COMP  | LETE IVF CYCLE – PACKAGE 1A                                    | EUR 2 850 | YES | NO |
| PRICE | INCLUDES                                                       |           |     |    |
| •     | Consultation at the start of the IVF cycle                     |           |     |    |
| •     | Gynecological examination                                      |           |     |    |
| •     | STD                                                            |           |     |    |
| •     | AMH                                                            |           |     |    |
| •     | Hormonal profile                                               |           |     |    |
| •     | Creating of stimulation protocol                               |           |     |    |
| •     | Ultrasound examination during stimulation                      |           |     |    |
| •     | Sperm analysis                                                 |           |     |    |
| •     | Sperm preparation for IVF                                      |           |     |    |
| •     | Oocyte collection                                              |           |     |    |
| •     | ICSI                                                           |           |     |    |
| •     | Prolonged cultivation of embryos                               |           |     |    |
| •     | ET incl. ECHO-catheter                                         |           |     |    |
| •     | Anesthesia                                                     |           |     |    |
| •     | Recovery room                                                  |           |     |    |
| •     | All-inclusive snack                                            |           |     |    |
| PRICE | DOES NOT INCLUDE                                               |           |     |    |
| •     | Stimulation medication                                         |           |     |    |
| •     | Other additional laboratory methods according to the           |           |     |    |
|       | current price list                                             |           |     |    |
| •     | Cryopreservation of the embryos by vitrification with          |           |     |    |
|       | storage (1 year)                                               |           |     |    |
| •     | Deposit for the confirmation of the serological findings       |           |     |    |
| PAYM  | ENT PROCEDURE                                                  |           |     |    |
| •     | EUR 0 Payment on the day of consultation at the start of       |           |     |    |
|       | the cycle                                                      |           |     |    |
| •     | EUR 500 Payment on the day of scheduling stimulation           |           |     |    |
| •     | <b>EUR 2 200</b> Payment on the day of oocyte collection (OPU) |           |     |    |
| •     | EUR 150 Payment on the day of ET                               |           |     |    |



| COMP  | LETE IVF CYCLE – PACKAGE 1B WITH MEDICATION                                               | EUR 4 200 | YES | NO |
|-------|-------------------------------------------------------------------------------------------|-----------|-----|----|
| PRICE | INCLUDES                                                                                  |           |     |    |
| •     | Consultation at the start of the IVF cycle                                                |           |     |    |
| •     | Gynecological examination                                                                 |           |     |    |
| •     | STD                                                                                       |           |     |    |
| •     | AMH                                                                                       |           |     |    |
| •     | Hormonal profile                                                                          |           |     |    |
| •     | Creating of stimulation protocol                                                          |           |     |    |
| •     | Ultrasound examination during stimulation                                                 |           |     |    |
| •     | Sperm analysis                                                                            |           |     |    |
| •     | Sperm preparation for IVF                                                                 |           |     |    |
| •     | Oocyte collection                                                                         |           |     |    |
| •     | ICSI                                                                                      |           |     |    |
| •     | Prolonged cultivation of embryos                                                          |           |     |    |
| •     | ET incl. Echo-catheter                                                                    |           |     |    |
| •     | Anesthesia                                                                                |           |     |    |
| •     | Recovery room                                                                             |           |     |    |
| •     | All-inclusive snack                                                                       |           |     |    |
| •     | Stimulation medication (max. 2250 IU FSH + up to 4 ampules antagonist/agonist injections) |           |     |    |
| PRICE | DOES NOT INCLUDE                                                                          |           |     |    |
| •     | Ovulation induction medication                                                            |           |     |    |
| •     | Other additional laboratory methods according to the<br>current price list                |           |     |    |
| •     | Cryopreservation of the embryos by vitrification with                                     |           |     |    |
|       | storage (1 year)                                                                          |           |     |    |
| •     | Deposit for the confirmation of the serological results                                   |           |     |    |
| PAYM  | ENT PROCEDURE                                                                             |           |     |    |
| •     | EUR 0 Payment on the day of consultation at the start of                                  |           |     |    |
|       | the cycle                                                                                 |           |     |    |
| •     | EUR 1 750 Payment on the day of scheduling stimulation                                    |           |     |    |
| •     | EUR 2 300 Payment on the day of oocyte collection (OPU)                                   |           |     |    |
| •     | EUR 150 Payment on the day of ET                                                          |           |     |    |



| COMPLETE IVF CYCLE INCLUDING ADDITIO                            | VAL EUR 3 450       | YES | NO |
|-----------------------------------------------------------------|---------------------|-----|----|
| LABORATORY METHODS - PACKAGE 2A                                 | EUR 5 450           | TES | NO |
|                                                                 |                     |     |    |
| PRICE INCLUDES                                                  |                     |     |    |
| Consultation at the start of the IVF cycl                       | 2                   |     |    |
| Gynecological examination                                       |                     |     |    |
| Serology examinations                                           |                     |     |    |
| AMH and hormone levels                                          |                     |     |    |
| Stimulation protocol                                            |                     |     |    |
| Ultrasound examination during stimula                           | tion                |     |    |
| Semen analysis                                                  |                     |     |    |
| Sperm processing                                                |                     |     |    |
| MFSS (Microfluidic sperm sorting)                               |                     |     |    |
| Oocyte retrieval                                                |                     |     |    |
| • ICSI                                                          |                     |     |    |
| <ul> <li>Prolonged cultivation</li> </ul>                       |                     |     |    |
| • Time-Lapse                                                    |                     |     |    |
| EmbryoGlue                                                      |                     |     |    |
| ET incl. Echo-catheter                                          |                     |     |    |
| Anesthesia                                                      |                     |     |    |
| Recovery room                                                   |                     |     |    |
| All-inclusive snack                                             |                     |     |    |
| PRICE DOES NOT INCLUDE                                          |                     |     |    |
| <ul> <li>Stimulation medication</li> </ul>                      |                     |     |    |
| <ul> <li>Cryopreservation of the embryos by vit</li> </ul>      | rification with     |     |    |
| storage (1 year)                                                |                     |     |    |
| <ul> <li>Deposit for the confirmation of the service</li> </ul> | ological results    |     |    |
| PAYMENT PROCEDURE                                               |                     |     |    |
| • EUR 0 Payment on the day of consultat                         | ion at the start of |     |    |
| the cycle                                                       |                     |     |    |
| • EUR 500 Payment on the day of schedu                          | ling stimulation    |     |    |
| • EUR 2 800 Payment on the day of oocy                          | te collection (OPU) |     |    |
| • EUR 150 Payment on the day of ET                              |                     |     |    |
| IVFCOMPLETE IVF CYCLE INCLUDING ADDI                            | TIONAL 4 800 EUR    | YES | NO |
| LABORATORY METHODS - PACKAGE 2B WI                              | TH MEDICATION       |     |    |
| PRICE INCLUDES                                                  |                     |     |    |
| • Consultation at the start of the IVF cycl                     | <u>م</u>            |     |    |
| Gynaecological examination                                      | -                   |     |    |
| • STD                                                           |                     |     |    |
| • AMH                                                           |                     |     |    |
| Hormonal profile                                                |                     |     |    |
| <ul> <li>Creating of stimulation protocol</li> </ul>            |                     |     |    |
| <ul> <li>Ultrasound examination during stimula</li> </ul>       | tion                |     |    |
| <ul> <li>Sperm analysis</li> </ul>                              |                     |     |    |
| <ul> <li>Sperm preparation for IVF</li> </ul>                   |                     |     |    |
| <ul> <li>Oocyte collection</li> </ul>                           |                     |     |    |
| <ul> <li>MFSS (Microfluidic sperm sorting)</li> </ul>           |                     |     |    |
| <ul> <li>ICSI</li> </ul>                                        |                     |     |    |
| <ul> <li>Prolonged cultivation</li> </ul>                       |                     |     |    |
| _                                                               |                     |     |    |
| Time-Lapse     EmbryoClus                                       |                     |     |    |
| EmbryoGlue     ET incl. Echo cathotor                           |                     |     |    |
| ET incl. Echo-catheter                                          |                     |     |    |
| Anesthesia                                                      |                     |     |    |
| Recovery room                                                   |                     |     |    |
| All-inclusive snack                                             |                     |     |    |



| • Stimulation medication (max. 2250 IU FSH + up to 4                                           |  |
|------------------------------------------------------------------------------------------------|--|
| ampules antagonist/agonist injections)                                                         |  |
| PRICE DOES NOT INCLUDE                                                                         |  |
| Ovulation induction medication                                                                 |  |
| <ul> <li>Cryopreservation of the embryos by vitrification with<br/>storage (1 year)</li> </ul> |  |
| <ul> <li>Deposit for the confirmation of the serological results</li> </ul>                    |  |
| PAYMENT PROCEDURE                                                                              |  |
| • EUR 0 Payment on the day of consultation at the start of                                     |  |
| the cycle                                                                                      |  |
| • EUR 1 750 Payment on the day of scheduling stimulation                                       |  |
| • EUR 2 900 Payment on the day of oocyte collection (OPU)                                      |  |
| EUR 150 Payment on the day of ET                                                               |  |

| CRYOEMBRYO TRANSFER (OWN FROZEN EMBRYOS) EUR 9                                        | 00 YES | NO |
|---------------------------------------------------------------------------------------|--------|----|
| PRICE INCLUDES                                                                        |        |    |
| <ul> <li>Consultation before cryoembryo transfer (FET)</li> </ul>                     |        |    |
| Gynecological examination                                                             |        |    |
| <ul> <li>Medication from transfer to hCG test</li> </ul>                              |        |    |
| Embryo thawing                                                                        |        |    |
| ECHO catheter                                                                         |        |    |
| Recovery room                                                                         |        |    |
| Snack All-inclusive                                                                   |        |    |
| PRICE DOES NOT INCLUDE                                                                |        |    |
| <ul> <li>Additional laboratory methods according to the current price list</li> </ul> |        |    |



| DONOR PROGRAM WITH DONOR OOCYTES                                                                                                                       |           | YES | NC |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----|----|
|                                                                                                                                                        | EUR 5 900 | YES | NC |
| PRICE INCLUDES                                                                                                                                         |           |     |    |
| Initial consultation                                                                                                                                   |           |     |    |
| Anesthesia and recovery room for the donor                                                                                                             |           |     |    |
| Serology tests of the donor and the partner                                                                                                            |           |     |    |
| Hormonal profile                                                                                                                                       |           |     |    |
| Stimulation medication for the donor                                                                                                                   |           |     |    |
| Coordination fee                                                                                                                                       |           |     |    |
| Spermiogram                                                                                                                                            |           |     |    |
| Sperm preparation                                                                                                                                      |           |     |    |
| • ICSI                                                                                                                                                 |           |     |    |
| <ul> <li>Prolonged cultivation</li> </ul>                                                                                                              |           |     |    |
| ET incl. ECHO catheter                                                                                                                                 |           |     |    |
| <ul> <li>Medication for the recipient from transfer to hCG test</li> </ul>                                                                             |           |     |    |
| Expenses for the donor                                                                                                                                 |           |     |    |
| All-inclusive snack                                                                                                                                    |           |     |    |
| PRICE DOES NOT INCLUDE                                                                                                                                 |           |     |    |
| <ul> <li>If necessary, cryopreservation of the embryos by</li> </ul>                                                                                   |           |     |    |
| vitrification with storage (1 year)                                                                                                                    |           |     |    |
| <ul> <li>Price for any FET and each next FET</li> </ul>                                                                                                |           |     |    |
| <ul> <li>Additional laboratory methods according to the current</li> </ul>                                                                             |           |     |    |
| price list                                                                                                                                             |           |     |    |
| THE THIRD CYCLE IS ON US                                                                                                                               |           |     |    |
| <ul> <li>If, after two cycles with donated oocytes (including</li> </ul>                                                                               |           |     |    |
| follow-up CryoEmbryoTransfers - FET), you do not get                                                                                                   |           |     |    |
| pregnant (confirmed cardiac event), you will have the                                                                                                  |           |     |    |
| opportunity to undergo a third cycle treatment free of                                                                                                 |           |     |    |
| charge as part of the last used package. The package is                                                                                                |           |     |    |
| considered fulfilled after a FET has been performed on all                                                                                             |           |     |    |
| embryos created within the given package (each FET is                                                                                                  |           |     |    |
| subject to payment as per the current price list).                                                                                                     |           |     |    |
| Terms and Conditions:                                                                                                                                  |           |     |    |
| <ul> <li>The spermiogram of the partner should meet the conditions of<br/>normozoospermia. Slight deviations from the norm will be</li> </ul>          |           |     |    |
| consulted individually and are not necessarily an exclusion                                                                                            |           |     |    |
| criterion.                                                                                                                                             |           |     |    |
| • Exclusion criteria on the patient's side: Ashermann syndrome,                                                                                        |           |     |    |
| congenital developmental defects or other existing severe                                                                                              |           |     |    |
| uterine impairments - can be addressed individually during a                                                                                           |           |     |    |
| consultation with a physician.                                                                                                                         |           |     |    |
| <ul> <li>The possibility of undergoing a third cycle free of charge does<br/>not apply if, after the previous treatment, a pregnancy occurs</li> </ul> |           |     |    |
| with proven cardiac action in the fetus. Failure of embryo                                                                                             |           |     |    |
| transfer must be documented by negative hCG 14 days after                                                                                              |           |     |    |
| embryo transfer or by ultrasound between 8-10 weeks with                                                                                               |           |     |    |
| evidence of silent pregnancy.                                                                                                                          |           |     |    |
| • The third free cycle must be started within and no later than 24                                                                                     |           |     |    |
| months after the first embryo transfer of the first completed                                                                                          |           |     |    |
| treatment.                                                                                                                                             |           |     |    |
| <ul> <li>Legislative requirements for the treatment are met (age not<br/>avceeding 49 years, atc.)</li> </ul>                                          |           |     |    |
| exceeding 49 years, etc.) PAYMENT PROCEDURE                                                                                                            |           |     |    |



|             |                                                                                                                         |           | $\bigcirc$ |    |
|-------------|-------------------------------------------------------------------------------------------------------------------------|-----------|------------|----|
| •           | EUR 200 Payment on the day of consultation (preparation                                                                 |           |            |    |
|             | of treatment plan and medication, processing fee related                                                                |           |            |    |
|             | with the donor selection)                                                                                               |           |            |    |
| •           | EUR 2 500 Payment on the day of assigning the donor                                                                     |           |            |    |
| •           | EUR 3 050 Payment on the day of donor's oocyte                                                                          |           |            |    |
|             | collection (OPU)                                                                                                        |           |            |    |
| •           | EUR 150 Payment on the day of embryo transfer (ET)                                                                      |           |            |    |
| <b>GUAR</b> | ANTEE PROGRAM                                                                                                           |           |            |    |
| IVF CY      | CLE WITH DONOR OOCYTES - PACKAGE 2                                                                                      | EUR 7 200 | YES        | NO |
| PRICE       | INCLUDES                                                                                                                |           |            |    |
| •           | Initial consultation                                                                                                    |           |            |    |
| •           | Anesthesia and recovery room for the donor                                                                              |           |            |    |
| •           | Serology tests of the donor and the partner                                                                             |           |            |    |
| •           | Hormonal profile                                                                                                        |           |            |    |
| •           | Stimulation medication for the donor                                                                                    |           |            |    |
| •           | Coordination fee                                                                                                        |           |            |    |
| •           | Spermiogram                                                                                                             |           |            |    |
| •           | Sperm preparation                                                                                                       |           |            |    |
| •           | Sperm cryopreservation and vitrification of the embryos -                                                               |           |            |    |
|             | 1 straw (each additional straw according to the current                                                                 |           |            |    |
|             | price list) storage for 1 year                                                                                          |           |            |    |
| •           | ICSI                                                                                                                    |           |            |    |
| •           | Prolonged cultivation                                                                                                   |           |            |    |
| •           | ET incl. ECHO catheter                                                                                                  |           |            |    |
| •           | Medication for the recipient from transfer to hCG test                                                                  |           |            |    |
| •           | Expenses for the donor                                                                                                  |           |            |    |
| •           | All inclusive snack                                                                                                     |           |            |    |
| PRICE       | DOES NOT INCLUDE                                                                                                        |           |            |    |
| •           | Price for any FET and each next FET                                                                                     |           |            |    |
| •           | Additional laboratory methods according to the current                                                                  |           |            |    |
|             | price list                                                                                                              |           |            |    |
| THE G       | UARANTEE                                                                                                                |           |            |    |
| •           | This program guarantees <b>**</b> the recipient 2 transfers                                                             |           |            |    |
|             | (minimum 3 embryos, fresh transfer/ FET and FET). A                                                                     |           |            |    |
|             | prerequisite for the guarantee is sufficient sperm quality.                                                             |           |            |    |
|             | If there are no surplus embryos left, we guarantee a                                                                    |           |            |    |
|             | cryoembryo transfer of embryos from the oocytes of the                                                                  |           |            |    |
|             | matching donor and the cryosperms of the recipient's                                                                    |           |            |    |
|             | partner. The guarantee is valid for one year from the 1st                                                               |           |            |    |
|             | transfer. ** If there is a medical factor on the part of the                                                            |           |            |    |
|             | recipient (e.g. insufficient height of the endometrium), as<br>a result of which the transfer could not take place, the |           |            |    |
|             | cost of 1 straw will be borne by the clinic.                                                                            |           |            |    |
| •           | With the completion of the 13th week of pregnancy, the                                                                  |           |            |    |
|             | guarantee is fulfilled.                                                                                                 |           |            |    |
| THE TH      | HIRD CYCLE IS ON US                                                                                                     |           |            |    |
|             | If, after two cycles with donated oocytes (including                                                                    |           |            |    |
|             | follow-up CryoEmbryoTransfers - FET), you do not get                                                                    |           |            |    |
|             | pregnant (confirmed cardiac event), you will have the                                                                   |           |            |    |
|             | opportunity to undergo a third cycle treatment free of                                                                  |           |            |    |
|             | charge as part of the last used package. The package is                                                                 |           |            |    |
|             | considered exhausted after a FET has been performed on                                                                  |           |            |    |
|             | all embryos created within the given package (each FET is                                                               |           |            |    |
|             | subject to payment as per the current price list).                                                                      |           |            |    |
| Terms       | and Conditions:                                                                                                         |           |            |    |
|             |                                                                                                                         |           |            |    |



|                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |           | <u> </u> |    |
|---------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|----|
| •                                                                                     | The spermiogram of the partner should meet the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |    |
|                                                                                       | conditions of normozoospermia. Slight deviations from                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |           |          |    |
|                                                                                       | the norm will be consulted individually and are not                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |    |
|                                                                                       | necessarily an exclusion criterion.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |    |
| •                                                                                     | Exclusion criteria on the patient's side: Ashermann                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |    |
|                                                                                       | syndrome, congenital developmental defects or other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |    |
|                                                                                       | existing severe uterine impairments - can be addressed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |          |    |
|                                                                                       | individually during a consultation with a physician.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |           |          |    |
| •                                                                                     | The possibility of undergoing a third cycle free of charge                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |           |          |    |
|                                                                                       | does not apply if, after the previous treatment, a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |           |          |    |
|                                                                                       | pregnancy occurs with proven cardiac action in the fetus.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |           |          |    |
|                                                                                       | Failure of embryo transfer must be documented by                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |          |    |
|                                                                                       | negative hCG 14 days after embryo transfer or by                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |          |    |
|                                                                                       | ultrasound between 8-10 weeks with evidence of silent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |           |          |    |
|                                                                                       | pregnancy.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |           |          |    |
| •                                                                                     | The third free cycle must be started within and no later                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |          |    |
|                                                                                       | than 24 months after the first embryo transfer of the first                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |           |          |    |
|                                                                                       | completed treatment.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |           |          |    |
| •                                                                                     | Legislative requirements for the treatment are met (age                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |           |          |    |
|                                                                                       | not exceeding 49 years, etc.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           |          |    |
| PAYM                                                                                  | ENT PROCEDURE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           |          |    |
| •                                                                                     | EUR 200 Payment on the day of consultation (preparation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |           |          |    |
|                                                                                       | of treatment plan and medication, processing fee related                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |          |    |
|                                                                                       | with the donor selection)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |           |          |    |
| •                                                                                     | EUR 400 Payment on the day of cryopreservation of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |           |          |    |
|                                                                                       | sperm                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |           |          |    |
| •                                                                                     | EUR 2 500 Payment on the day of assigning the donor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |    |
|                                                                                       | EUR 3 950 Payment on the day of donor's oocyte                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |    |
| •                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |           |          |    |
| •                                                                                     | collection (OPU)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |          |    |
| •                                                                                     | collection (OPU)<br><b>EUR 150</b> Payment on the day of embryo transfer (ET)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           |          |    |
| •<br>IVF CY                                                                           | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | EUR 7 900 | YES      | NO |
| •<br>IVF CY                                                                           | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | EUR 7 900 | YES      | NO |
| •<br>IVF CY                                                                           | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | EUR 7 900 | YES      | NO |
| •<br>IVF CY<br>PRICE                                                                  | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | EUR 7 900 | YES      | NO |
| •<br>IVF CY<br>PRICE<br>•                                                             | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram<br>Sperm preparation                                                                                                                                                                                                                                                                                                                                                                                                                                                       | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram<br>Sperm preparation<br>Sperm cryopreservation and vitrification of the embryos -                                                                                                                                                                                                                                                                                                                                                                                          | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram<br>Sperm preparation<br>Sperm cryopreservation and vitrification of the embryos -<br>1 straw (each additional straw according to the current                                                                                                                                                                                                                                                                                                                               | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram<br>Sperm preparation<br>Sperm cryopreservation and vitrification of the embryos -<br>1 straw (each additional straw according to the current<br>price list) and storage for 1 year                                                                                                                                                                                                                                                                                         | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram<br>Sperm preparation<br>Sperm cryopreservation and vitrification of the embryos -<br>1 straw (each additional straw according to the current<br>price list) and storage for 1 year<br>ICSI                                                                                                                                                                                                                                                                                 | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram<br>Sperm preparation<br>Sperm cryopreservation and vitrification of the embryos -<br>1 straw (each additional straw according to the current<br>price list) and storage for 1 year<br>ICSI<br>Prolonged cultivation                                                                                                                                                                                                                                                        | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram<br>Sperm preparation<br>Sperm cryopreservation and vitrification of the embryos -<br>1 straw (each additional straw according to the current<br>price list) and storage for 1 year<br>ICSI<br>Prolonged cultivation<br>ET incl. ECHO catheter                                                                                                                                                                                                                              | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram<br>Sperm preparation<br>Sperm cryopreservation and vitrification of the embryos -<br>1 straw (each additional straw according to the current<br>price list) and storage for 1 year<br>ICSI<br>Prolonged cultivation<br>ET incl. ECHO catheter<br>Time-Lapse                                                                                                                                                                                                                | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram<br>Sperm preparation<br>Sperm cryopreservation and vitrification of the embryos -<br>1 straw (each additional straw according to the current<br>price list) and storage for 1 year<br>ICSI<br>Prolonged cultivation<br>ET incl. ECHO catheter<br>Time-Lapse<br>EmbryoGlue                                                                                                                                                                                                  | EUR 7 900 | YES      | NO |
| IVF CY<br>PRICE                                                                       | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram<br>Sperm preparation<br>Sperm cryopreservation and vitrification of the embryos -<br>1 straw (each additional straw according to the current<br>price list) and storage for 1 year<br>ICSI<br>Prolonged cultivation<br>ET incl. ECHO catheter<br>Time-Lapse<br>EmbryoGlue<br>MFSS (Microfluidic sperm sorting)                                                                                                                                                             | EUR 7 900 | YES      | NO |
| •<br>IVF CY<br>PRICE<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>• | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram<br>Sperm preparation<br>Sperm cryopreservation and vitrification of the embryos -<br>1 straw (each additional straw according to the current<br>price list) and storage for 1 year<br>ICSI<br>Prolonged cultivation<br>ET incl. ECHO catheter<br>Time-Lapse<br>EmbryoGlue<br>MFSS (Microfluidic sperm sorting)<br>Medication for the recipient from transfer to hCG test                                                                                                   | EUR 7 900 | YES      | NO |
| •<br>IVF CY<br>PRICE<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>• | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram<br>Sperm preparation<br>Sperm cryopreservation and vitrification of the embryos -<br>1 straw (each additional straw according to the current<br>price list) and storage for 1 year<br>ICSI<br>Prolonged cultivation<br>ET incl. ECHO catheter<br>Time-Lapse<br>EmbryoGlue<br>MFSS (Microfluidic sperm sorting)<br>Medication for the recipient from transfer to hCG test<br>Expense for the donor                                                                          | EUR 7 900 | YES      | NO |
| •<br>IVF CY<br>PRICE<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>• | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram<br>Sperm preparation<br>Sperm cryopreservation and vitrification of the embryos -<br>1 straw (each additional straw according to the current<br>price list) and storage for 1 year<br>ICSI<br>Prolonged cultivation<br>ET incl. ECHO catheter<br>Time-Lapse<br>EmbryoGlue<br>MFSS (Microfluidic sperm sorting)<br>Medication for the recipient from transfer to hCG test<br>Expense for the donor<br>accommodation for 2 nights with breakfast and snack All-              | EUR 7 900 | YES      | NO |
| •<br>IVF CY<br>PRICE<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>•<br>• | collection (OPU)<br>EUR 150 Payment on the day of embryo transfer (ET)<br>CLE WITH DONOR OOCYTES - PACKAGE 3<br>INCLUDES<br>Initial consultation<br>Anesthesia and recovery room for the donor<br>Serology tests of the donor and the partner<br>Hormonal profile<br>Stimulation medication for the donor<br>Coordination fee<br>Spermiogram<br>Sperm preparation<br>Sperm cryopreservation and vitrification of the embryos -<br>1 straw (each additional straw according to the current<br>price list) and storage for 1 year<br>ICSI<br>Prolonged cultivation<br>ET incl. ECHO catheter<br>Time-Lapse<br>EmbryoGlue<br>MFSS (Microfluidic sperm sorting)<br>Medication for the recipient from transfer to hCG test<br>Expense for the donor<br>accommodation for 2 nights with breakfast and snack All-<br>inclusive | EUR 7 900 | YES      | NO |



 Additional laboratory methods according to the current price list

## THE GUARANTEE

 This program guarantees \*\* the recipient 2 transfers (minimum 3 embryos, fresh transfer/ FET and FET). A prerequisite for the guarantee is sufficient sperm quality. If there are no surplus embryos left, we guarantee a cryoembryo transfer of embryos from the oocytes of the matching donor and the cryosperms of the recipient's partner. The guarantee is valid for one year from the 1st transfer. \*\* If there is a medical factor on the part of the recipient (e.g. insufficient height of the endometrium), as a result of which the transfer could not take place, the cost of 1 straw will be borne by the clinic.

• With the completion of the 13th week of pregnancy, the guarantee is fulfilled.

# THE THIRD CYCLE IS ON US

 If, after two cycles with donated oocytes (including follow-up CryoEmbryoTransfers - FET), you do not get pregnant (confirmed cardiac event), you will have the opportunity to undergo a third cycle treatment free of charge as part of the last used package. The package is considered exhausted after a FET has been performed on all embryos created within the given package (each FET is subject to payment as per the current price list).

#### **Terms and Conditions:**

- The spermiogram of the partner should meet the conditions of normozoospermia. Slight deviations from the norm will be consulted individually and are not necessarily an exclusion criterion.
- Exclusion criteria on the patient's side: Ashermann syndrome, congenital developmental defects or other existing severe uterine impairments - can be addressed individually during a consultation with a physician.
- The possibility of undergoing a third cycle free of charge does not apply if, after the previous treatment, a pregnancy occurs with proven cardiac action in the fetus. Failure of embryo transfer must be documented by negative hCG 14 days after embryo transfer or by ultrasound between 8-10 weeks with evidence of silent pregnancy.
- The third free cycle must be started within and no later than 24 months after the first embryo transfer of the first completed treatment.
- Legislative requirements for the treatment are met (age not exceeding 49 years, etc.)

## **PAYMENT PROCEDURE**

- **EUR 200** Payment on the day of consultation (preparation of treatment plan and medication, processing fee related with the donor selection)
- EUR 400 Payment on the day of cryopreservation of sperm
- EUR 2 500 Payment on the day of assigning the donor
- EUR 4 650 Payment on the day of donor's oocyte collection (OPU)
- **EUR 150** Payment on the day of embryo transfer (ET)



| CRYOEMBRYO TRANSFER OF DONOR EMBRYOS                                                         |           |     |    |
|----------------------------------------------------------------------------------------------|-----------|-----|----|
| 1 EMBRYO                                                                                     | EUR 1 700 | YES | NO |
| PRICE INCLUDES                                                                               |           |     |    |
| Consultation                                                                                 |           |     |    |
| Gynecological examination                                                                    |           |     |    |
| <ul> <li>Thawing of the embryo with subsequent FET</li> </ul>                                |           |     |    |
| Recovery room                                                                                |           |     |    |
| ECHO catheter                                                                                |           |     |    |
| <ul> <li>Medication from transfer to hCG test</li> </ul>                                     |           |     |    |
| snack All-inclusive                                                                          |           |     |    |
| PRICE DOES NOT INCLUDE                                                                       |           |     |    |
| <ul> <li>Additional laboratory methods according to the current<br/>price list</li> </ul>    |           |     |    |
| PAYMENT PROCEDURE                                                                            |           |     |    |
| • <b>EUR 1 100</b> Deposit upon preparation/reservation of the                               |           |     |    |
| donated embryo                                                                               |           |     |    |
| • EUR 600 Payment on the day of embryo transfer (ET)                                         |           |     |    |
| MAX. 2 EMBRYOS                                                                               | EUR 3 100 | YES | NO |
| PRICE INCLUDES                                                                               |           |     |    |
| Consultation                                                                                 |           |     |    |
| Gynecological examination                                                                    |           |     |    |
| <ul> <li>Thawing of the embryo with subsequent FET</li> </ul>                                |           |     |    |
| Recovery room                                                                                |           |     |    |
| ECHO catheter                                                                                |           |     |    |
| <ul> <li>Medication from transfer to hCG test</li> </ul>                                     |           |     |    |
| snack All-inclusive                                                                          |           |     |    |
| PRICE DOES NOT INCLUDE                                                                       |           |     |    |
| <ul> <li>Additional laboratory methods according to the current</li> </ul>                   |           |     |    |
| price list                                                                                   |           |     |    |
| PAYMENT PROCEDURE                                                                            |           |     |    |
| <ul> <li>EUR 1 100 Deposit upon preparation/reservation of the<br/>donated embryo</li> </ul> |           |     |    |
| • EUR 2 000 Payment on the day of embryo transfer (ET)                                       |           |     |    |
|                                                                                              |           |     |    |

| ADDITIONAL LABORATORY METHODS AND PROCEDURES                 |         |     |    |
|--------------------------------------------------------------|---------|-----|----|
| ICSI on single oocyte                                        | EUR 200 | YES | NO |
| ICSI on 2 and more oocytes                                   | EUR 400 | YES | NO |
| EmbryoGlue                                                   | EUR 200 | YES | NO |
| Prolonged cultivation of embryos (over 48 hours)             | EUR 300 | YES | NO |
| Cryopreservation of sperm                                    | EUR 320 | YES | NO |
| PRICE INCLUDES                                               |         |     |    |
| • Storage fee for 1 year                                     |         |     |    |
| Cryopreservation of embryos, oocytes including vitrification | EUR 420 | YES | NO |
| of 1 straw PRICE INCLUDES                                    |         |     |    |
| Storage fee for 1 year                                       |         |     |    |
| Vitrification of each additional straw (added to             | EUR 100 | YES | NO |
| cryopreservation)                                            |         |     |    |
| Vitrification of a single embryo in a single straw           |         | YES | NO |
| Charge for storage of cryopreserved material for each        | EUR 150 | YES | NO |
| commenced year                                               |         |     |    |



| Charge for storage of cryopreserved material with positive STD | EUR 250 | YES | NO |
|----------------------------------------------------------------|---------|-----|----|
| tests or without STD tests for each calendar year commenced    | LON 250 |     |    |
| Export of samples from our center – administration fee         | EUR 200 | YES | NO |
| Time-lapse (continuous embryo monitoring, consultation)        | EUR 350 | YES | NO |
| EmbryoGen                                                      | EUR 200 | YES | NO |
| Microfluidic Sperm Sorting                                     | EUR 250 | YES | NO |
| Assisted hatching (regardless of the number of embryos)        | EUR 200 | YES | NO |

| SOCIAL FREEZING                                                 |           |     |    |
|-----------------------------------------------------------------|-----------|-----|----|
| SOCIAL FREEZING - OOCYTES                                       | EUR 1 800 | YES | NO |
| PRICE INCLUDES                                                  |           |     |    |
| Initial consultation                                            |           |     |    |
| Stimulation protocol                                            |           |     |    |
| • STD                                                           |           |     |    |
| <ul> <li>Gynecological examination</li> </ul>                   |           |     |    |
| Oocyte collection                                               |           |     |    |
| Anesthesia                                                      |           |     |    |
| Recovery room                                                   |           |     |    |
| • Vitrification up to 2 straws including the storage for max. 3 |           |     |    |
| years                                                           |           |     |    |
| PRICE DOES NOT INCLUDE                                          |           |     |    |
| Stimulation medication                                          |           |     |    |
| PAYMENT PROCEDURE                                               |           |     |    |
| • EUR 500 Payment on the day of scheduling stimulation          |           |     |    |
| • EUR 1 300 Payment on the day of oocyte collection (OPU)       |           |     |    |
| VITRIFICATION OF EACH ADDITIONAL STRAW (TO BE ADDED TO          | EUR 100   | YES | NO |
| CRYOPRESERVATION)                                               | 2011100   | TLS | NO |
| COMPLETATION OF THE IVF CYCLE AFTER SOCIAL FREEZING             | EUR 1 500 | YES | NO |
| PRICE INCLUDES                                                  |           |     |    |
| <ul> <li>Consultation to complete the IVF cycle</li> </ul>      |           |     |    |
| <ul> <li>Gynecological examination</li> </ul>                   |           |     |    |
| Spermiogram                                                     |           |     |    |
| Sperm preparation                                               |           |     |    |
| • ICSI                                                          |           |     |    |
| Prolonged cultivation                                           |           |     |    |
| • ET                                                            |           |     |    |
| Stationary                                                      |           |     |    |
| Echo catheter                                                   |           |     |    |



| ADDITIONAL OUTPATIENT SERVICES                                          |           |      |    |
|-------------------------------------------------------------------------|-----------|------|----|
| Summary from medical records at their own request                       | EUR 100   | YES  | NO |
| Ultrasound control                                                      | EUR 50    | YES  | NO |
| STD blood testing                                                       | EUR 80    | YES  | NO |
| Guarantee for confirmation STD                                          | EUR 100   | YES  | NO |
| hCG                                                                     | EUR 15    | YES  | NO |
| AMH blood test                                                          | EUR 40    | YES  | NO |
| PRG (Progesteron)                                                       | EUR 20    | YES  | NO |
| Blood group, Rh factor                                                  | EUR 20    | YES  | NO |
| Hormonal profile                                                        | EUR 45    | YES  | NO |
| Thyroid hormones                                                        | EUR 45    | YES  | NO |
| Entonox                                                                 | EUR 50    | YES  | NO |
| Medication/Infusion application                                         | EUR 40    | YES  | NO |
| General anesthesia                                                      | EUR 200   | YES  | NO |
| LBC – cytology                                                          | EUR 60    | YES  | NO |
| 256 6460684                                                             | Lon oo    | 120  |    |
| Intrauterine insemination                                               | EUR 400   | YES  | NO |
| PRICE INCLUDES                                                          |           | . 20 |    |
| Consultation                                                            |           |      |    |
| <ul> <li>preparation of ejaculate and sperm analysis</li> </ul>         |           |      |    |
| <ul> <li>Insemination catheter</li> </ul>                               |           |      |    |
| PRICE DOES NOT INCLUDE                                                  |           |      |    |
|                                                                         |           |      |    |
| Ultrasound control                                                      |           |      |    |
| Medication                                                              |           |      |    |
| ANDROLOGY                                                               | 5110 400  |      |    |
| Complete sperm analysis                                                 | EUR 100   | YES  | NO |
| Donor sperm sample                                                      | EUR 300   | YES  | NO |
| ENDOMETRIAL RECEPTIVITY ARRAY                                           | 1         |      |    |
| ERA-1 – Examination of the first patient sample                         | EUR 1 100 | YES  | NO |
| PRICE INCLUDES                                                          |           |      |    |
| Interview                                                               |           |      |    |
| • Sampling including consultation with regard to the indication and the |           |      |    |
| results of the examination                                              |           |      |    |
| Endometrial sampling pipeline                                           |           |      |    |
| Sampling kit                                                            |           |      |    |
| Transport / postage                                                     |           | VEC  | NO |
| EMMA (Endometrial Microbiome Metagenomic Analysis)                      | EUR 900   | YES  | NO |
| ALICE (Analysis of Infectious Chronic Endometritis)                     | EUR 550   | YES  | NO |
| EMTRIO EndomeTrio: ERA + EMMA + ALICE (Combination of both tests        | EUR 1 500 | YES  | NO |
| /EMMA, ALICE/ from one sample)                                          |           |      |    |
| Reprognostics test – 1 marker                                           | EUR 245   | YES  | NO |
| Reprognostics test – 2 markers                                          | EUR 345   | YES  | NO |
| Reprognostics test – 3 markers                                          | EUR 440   | YES  | NO |
| Reprognostics – transport of a sample                                   | EUR 110   | YES  | NO |
| BeReady – test                                                          | EUR 700   | YES  | NO |



| PREIMPLANTATION GENETIC DIAGNOSIS                                      |           |     |    |
|------------------------------------------------------------------------|-----------|-----|----|
| Biopsy of cells for PGT with no limit of number of embryos             | EUR 490   | YES | NO |
| Preimplantation diagnosis of 24 chromosomes (PGT-A, PGT-SR) by         | EUR 2 000 | YES | NO |
| NGS method up to 4 embryos:                                            |           |     |    |
| PRICE DOES NOT INCLUDE                                                 |           |     |    |
| • Biopsy                                                               |           |     |    |
| Prolonged cultivation                                                  |           |     |    |
| • AH                                                                   |           |     |    |
| Preimplantation diagnosis of 24 chromosomes (PGT-A, PGT-SR) by NGS     | EUR 3 000 | YES | NO |
| method of 5-8 embryos:                                                 |           |     |    |
| PRICE DOES NOT INCLUDE                                                 |           |     |    |
| • Biopsy                                                               |           |     |    |
| Prolonged cultivation                                                  |           |     |    |
| • AH                                                                   |           |     |    |
| Preimplantation diagnosis of 24 chromosomes (PGT-A, PGT-SR) NGS        | EUR 300   | YES | NO |
| method of each exceeding embryo                                        |           |     |    |
| PRICE DOES NOT INCLUDE                                                 |           |     |    |
| • Biopsy                                                               |           |     |    |
| Prolonged cultivation                                                  |           |     |    |
| • AH                                                                   |           |     |    |
| Preimplantation diagnosis of monogenic disease (by indirect genetic    |           |     |    |
| diagnosis – PGT-M)                                                     |           |     |    |
| PRICE DOES NOT INCLUDE                                                 |           |     |    |
| • Biopsy                                                               |           |     |    |
| Prolonged cultivation                                                  |           |     |    |
| • AH                                                                   |           |     |    |
| Method preparation, testing for the family (before 1st PGT cycle only) | EUR 500   | YES | NO |
| PGT-M of embryos by PCR method                                         | EUR 2 700 | YES | NO |
| PGT-A of embryos recommended for transfer after PGT-M (price for       |           | YES | NO |
| each                                                                   | EUR 300   |     |    |
| embryo)                                                                |           |     |    |
|                                                                        |           | YES | NO |
| PGT-M (karyomapping incl. PGT-A and PGT-SR) method preparation         | EUR 1 700 | YES | NO |
| (paid only once)                                                       |           |     |    |
| PRICE DOES NOT INCLUDE                                                 |           |     |    |
| • Biopsy                                                               |           |     |    |
| <ul> <li>Prolonged cultivation</li> </ul>                              |           |     |    |
| • AH                                                                   |           |     |    |
| PGT-M (karyomapping incl. PGT-A and PGT-SR) 1 embryo                   | EUR 440   | YES | NO |
| PRICE DOES NOT INCLUDE                                                 |           |     |    |
| • Biopsy                                                               |           |     |    |
| Prolonged cultivation                                                  |           |     |    |
| • AH                                                                   |           |     |    |
| PGT-M (karyomapping incl. PGT-A and PGT-SR) direct mutation            | EUR 700   | YES | NO |
| detection                                                              |           |     |    |
| PRICE DOES NOT INCLUDE                                                 |           |     |    |
| • Biopsy                                                               |           |     |    |
| Prolonged cultivation                                                  |           |     |    |
| • AH                                                                   |           |     |    |



| OTHERS                                                             |           |     |    |
|--------------------------------------------------------------------|-----------|-----|----|
| Accommodation for 1 night/single room with breakfast – Hotel Plus  | EUR 50    | YES | NO |
| Accommodation for 1 night/double room with breakfast – Hotel Plus  | EUR 80    | YES | NO |
| Accommodation for 1 night/single room with breakfast – Cooperative | EUR 60-75 | YES | NO |
| Accommodation for 1 night/double room with breakfast –             | EUR 90-   | YES | NO |
| Cooperative                                                        | 105       |     |    |
| Transport from/to the train station/airport                        | EUR 25    | YES | NO |

We were well informed of the fact that the above-mentioned techniques are specialized techniques of assisted reproduction, we agree with their payment. We request those techniques, where "**yes**" is checked

| Applicant                 | Applicant               |
|---------------------------|-------------------------|
| ID card (passport) No     | . ID card (passport) No |
| date signature            | . datesignature         |
| In date Name and signatur | re of the physician     |

Bank information: Name: PRONATAL PLUS s.r.o.,Cinska,Nr.: 888/4, Praha 6 –Bubenec,160 00,Czech Republic IBAN: CZ61 2700 0000 0021 1157 2297 AccountNo.: 2111572297/2700 Bank: UniCredit Bank BIC/SWIFT: BACXCZPP Please, select the option that additional fees will be debited to the customer.