



# ORM FERTILITY

## Genetics: Outside Monitoring Order for Non-ORM Egg Donors

<b>Donor Name:</b>	<b>Donor Date of Birth:</b>
<b>Donor Number/ID (what your recipient knows the donor by):</b>	
<b>Donor Phone Number:</b>	<b>Clinic/Agency Contact Name:</b>
<b>Order Date:</b>	<b>Clinic/Agency Contact Phone Number:</b>

**Monitor Type (Non- ORM Donors):**

**Diagnosis Code(s):** Z52.810

Genetic - Outside Donor Family History (Phone)- \$300.00

**Billing/Responsible Payer Information:**

Ordering Clinic/Agency: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

**Fax / Email Family History Assessment to:** \_\_\_\_\_

**Physician/Agency Coordinator Signature:** \_\_\_\_\_

**-INCOMPLETE ORDERS WILL DELAY SCHEDULING. PLEASE COMPLETE ALL FIELDS-**

**Please send completed orders, as well as the donor profile and genetic carrier screening results (if available), via fax: 503.274.4946, or protected email:**

**[outsidemonitoring@ormfertility.com](mailto:outsidemonitoring@ormfertility.com)**

**Outside monitoring donors will need to contact ORM at 503.274.4994 (Option 1) to schedule.**

**Appointments cannot be scheduled until the completed order has been received.**