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9 *Admitted *Pro Hac Vice*

10 Attorneys for Plaintiff,
MELISSA KAY COOK Individually and
11 MELISSA KAY COOK as *Guardian ad*
Litem of Baby A, Baby B and Baby C

12 UNITED STATES DISTRICT COURT
13 CENTRAL DISTRICT OF CALIFORNIA
14 LOS ANGELES DIVISION

15 MELISSA KAY COOK Individually and
16 MELISSA KAY COOK as *Guardian ad*
Litem of Baby A, Baby B, and Baby C,

17 Plaintiffs,

18 vs.

19 EDMUND G. BROWN, JR., Governor of
20 the State of California, et al.,

21 Defendants.

Case No. 2:16-cv-00742 ODW(AFMx)

**DECLARATION OF ANTHONY
J. CARUSO, M.D., M.P.H.
PURSUANT TO 28 U.S.C. § 1746**

(Fed. R. Evid. 201)

Date: May 23, 2016
Time: 1:30 p.m.
Courtroom: 11
Judge: Hon. Otis D. Wright, II
Trial Date: None Set
Action Filed: 2/2/16

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1 DR. ANTHONY J. CARUSO, M.D., M.P.H., being of full age, deposes and
2 says:

3 **Education, Experience and Qualifications**

4 1. I am a medical doctor licensed to practice in the State of Illinois. I am
5 Board Certified by the American College of Obstetrics and Gynecology in both
6 Obstetrics and Gynecology and Reproductive Endocrinology and Infertility.
7 Currently, I maintain a private practice in Downers Grove, Illinois.

8 2. I received my undergraduate degree in Biology from Fairfield
9 University in Fairfield, Connecticut, in 1985, and a Master's Degree in Public
10 Health from Boston University in 1987. I received my Doctor of Medicine degree
11 from Loyola University of Chicago's Stritch School of Medicine in 1991.

12 3. I did my residency training in Obstetrics and Gynecology at Nassau
13 County Medical Center in East Meadow, New York, in 1991 and 1992, and during
14 1994 to 1995 I was the Chief Resident of the Department of Obstetrics and
15 Gynecology at Southern Illinois University in Springfield, Illinois, where I was in
16 the post-graduate medical education program from 1992-1995.

17 4. I held a Fellowship in Reproductive Endocrinology at Rush University
18 in Chicago, Illinois from 1995 to 1997. I was a member of the faculty at the
19 University of Chicago School of Medicine from 2005 to 2010, in the Department of
20 Obstetrics and Gynecology, teaching Reproductive Medicine. I am currently a
21 member of the clinical faculty of Loyola University, Chicago, Medical School. I
22 worked in private practice specializing in reproductive medicine from 1997 to
23 2006. I also served at the Center for Human Reproduction in Chicago in 2004.

24 5. I am a member of the American Congress of Obstetrics and
25 Gynecology; the American Society for Reproductive Medicine; The Society for
26 Reproductive Medicine and Infertility; The Society for Reproductive Surgeons; the
27 American Association for Gynecological Surgery; the Endocrine Society and the
28

1 International Institute for Restorative Reproductive Medicine. My *Curriculum*
2 *Vitae* is attached as Exhibit A.

3 **Opinions Expressed and the Reasons and Basis for Them**

4 6. I understand that this case involves the attempted enforcement of a
5 gestational surrogacy contract. I have been asked to address the medical issues
6 associated with surrogacy arrangements. In my clinical practice, I performed
7 embryo transplants in connection with surrogacy arrangements. I no longer do such
8 procedures because I fully understand the inherent risks and dangers associated
9 with those arrangements.

10 7. There are numerous medical issues for both the mother and the
11 children associated with surrogacy. All of my opinions which I express in this
12 declaration are made within reasonable medical certainty.

13 8. Surrogacy, because it requires the creation of an embryo through In
14 Vitro techniques, by its intrinsic nature, increases the risk to the child for both birth
15 defects and for other anomalies. Qin *et al.*, *Assisted Reproductive Technology and*
16 *Risk of Adverse Obstetric Outcomes in Dichorionic Twin Pregnancies: a Systematic*
17 *Review and Meta-Analysis*, *Fertility & Sterility*, 2015; Sabine *et al.*, *Risk of Poor*
18 *Neonatal Outcome at Term After Medially Assisted Reproduction: a Propensity*
19 *Score-Matched Study*, *Fertility & Sterility* Vol. 104, No. 2, August 2015; Hansen
20 *et al.*, *Assisted Reproductive Technology and Birth Defects: a Systematic Review*
21 *and Meta-Analysis*, *Human Reproductive Update*, Vol. 19, No. 4, pp. 330-353,
22 2013.

23 9. There are numerous medical conditions that are known to result from
24 the IVF process. Among these are Beckwith-Wiedemann Syndrome; major
25 structural defects; gene expression maladies and retinoblastoma. Jane Halliday *et*
26 *al.*, "*Becksith-Wiedemann Syndrome and IVF: A Case-Control Study*," 75 *Am J.*
27 *Hum. Genet.* 526 (2004); J. Reefhuis *et al.*, "*Assisted Reproductive Technology*
28 *and Major Structural Birth Defects in the United States*" *Human Reproduction*

1 (accepted October 2, 2008); Darine El-Chaar *et al.*, "Risk of Birth Defects
2 Increased in Pregnancies Conceived by Assisted Human Reproduction," 92
3 Fertility & Sterility 1557 (2009); Sunita Katari *et al.*, "DNA Methylation and Gene
4 Expression Differences in Children Conceived in Vitro or in Vivo," Human
5 Molecular Genetics (accepted Jul 9, 2009); Tom Blackwell, "In Vitro Fertilization
6 Linked to Rare Genetic Disorders," National Post (Sept 25, 2011) and Annette C.
7 Moll *et al.*, "Incidence of Retinoblastoma in Children Born after in-Vitro
8 Fertilization" 361, The Lancet 309 (Jan 25, 2003); Liu *et al.*, Neonatal and
9 Obstetric Outcomes of In Vitro Fertilization (IVF) and Natural Conception at a
10 Chinese Reproductive Unit, Clin. Exp. Obstet. Gynecol. 2015; 42(4) 452-6; Wen *et*
11 *al.*, Birth Defects in Children Conceived by In Vitro Fertilization and
12 Intracytoplasmic Sperm Injection: a Meta-Analysis, Fertility & Sterility, Vol. 97
13 No 6 June 2012; Klemetti *et al.*, Increasing Evidence of Major Congenital
14 Anomalies in Children Born with Assisted Reproduction Technology: What Should
15 Be Done? Fertility & Sterility Vol 84. No 5 November 2005; Ensing *et al.*, Risk of
16 Poor Neo-Natal Outcome at Term After Medically Assisted Reproduction: a
17 Propensity Score-Matched Study, Fertility & Sterility vol 104, No 2 August 2015;
18 Wen *et al.*, Birth Defects in Children Conceived by in Vitro Fertilization and
19 Intracytoplasmic Sperm Injection: a Meta-Analysis, Fertility & Sterility Vol 97 No
20 6 June 2012; Henriksson *et al.*, Incidence of Pulmonary and Venous
21 Thromboembolism in Pregnancies After in Vitro Fertilization: Cross Sectional
22 Study, BMJ, 15 January 2013; Farhangniya *et al.*, Comparison of Congenital
23 Abnormalities of Infants Conceived by Assisted Reproductive Techniques versus
24 Infants with Natural Conception in Tehran, International Journal of Fertility and
25 Sterility, Vol. 7, No. 3, Oct.-Dec., 2013.

26 10. It is common practice to implant several embryos in the hope that at
27 least one of them will successfully adhere to the uterine wall and begin to grow. It
28 is not uncommon for more than one of the embryos to successfully implant,

1 resulting in multiple pregnancies. Reynolds *et al*, *Risk of Multiple Birth Associated*
2 *with In Vitro Fertilization Using Donor Eggs*, American Journal of Epidemiology,
3 Vol. 154 No. 11, 2001. Thus, transferring three embryos into a woman who is 47
4 years old, places the children at significant adverse health risks. But it also places
5 the mother at risk for significant adverse outcomes. ACOG Practice Bulletin,
6 “*Multi Fetal Gestations: Twin, Triplet, and Higher-Order Multi Fetal*
7 *Pregnancies*,” Number 144, May 2014; Qin *et al*, *Pregnancy-Related*
8 *Complications and Adverse Pregnancy Outcomes in Multiple Pregnancies*
9 *Resulting from Assisted Reproductive Technology: a Meta-Analysis of Cohort*
10 *Studies*, Fertility and Sterility Vol. 10,3 No. 6, June 2015.

11 11. On occasion, some in the medical profession will opine that when
12 faced with triplets resulting from an IVF transfer, the chance of a successful
13 outcome for the birth of a healthy live baby is increased by aborting, or
14 euphemistically, “selectively reducing”, one or more of the babies in utero. I
15 understand that C.M., the surrogacy agency and C.M.’s lawyer requested M.C. to
16 “selectively reduce” one of the babies in utero in this case.

17 12. However, based both on my professional education and experience as
18 well as information found in the scientific literature, there is no evidence that
19 demonstrates that selectively reducing one (or more) of three children has any
20 meaningful medical or health benefits for the two (or one) surviving child(ren).
21 A.T. Papageoghiou *et al.*, “*Risk of Miscarriage and Early Pre-Term Birth in*
22 *Trichorionic Triplet Pregnancies with Embryo Reduction Versus Expectant*
23 *Management: New Data and Systematic Review*” Human Reproduction, Vol 21 No
24 7, pp 1912-1917 2006;

25 13. On the contrary, there are many risks associated with selective
26 reduction. A. Antsaklis *et al.*, *Pregnancy Outcome After Multifetal Pregnancy*
27 *Reduction*, The Journal of Maternal-Fetal & Neonatal Medicine, Vol. 16, Issue 1,
28 2004; Papageoghiou, 2006.

1 14. The first risk is that the procedure employed to selectively reduce one
2 child presents a measurable risk of killing one or two other children in the womb.
3 Papageoghiou, 2006.

4 15. While it is claimed that terminating one child will prevent preterm
5 delivery of the other two children, the best available study demonstrates that this
6 claim is not sound. It was calculated that seven reductions were needed to be
7 performed to prevent one early term delivery. A. T. Papageorghiou *et al.*, *Risk of*
8 *miscarriage and Early Pre-Term Birth in Trichorionic Triplet Pregnancies with*
9 *Embryo Reduction Versus Expectant Management: New Data and Systematic*
10 *Review*” Human Reproduction, Vol. 21, No. 7, pp. 1912-1917, 206. Weighed
11 against the risk of losing all of the children in a complete miscarriage, the benefit of
12 a selective reduction cannot, in good conscience, be championed, even without any
13 regard for the loss of the child deliberately “reduced.”

14 16. The reduction procedure places the mother at increased risk of
15 bleeding and pain. Mohammed *et al.*, *Obstetric and Neonatal Outcome of*
16 *Multifetal Pregnancy Reduction*, Middle East Fertility Journal, Vol. 20, Issue 3,
17 September 2015, Pages 176-181.

18 17. There is a significant psychological impact as the woman is forced to
19 consider this option despite the goal to deliver children. While there is no study
20 concerning the extent of the risk of death to the mother, death is a risk of any
21 procedure such as this, where a needle is introduced into the uterus to perform the
22 procedure. Thorp, *et al.*, *Maternal Death After Second-Trimester Genetic*
23 *Amniocentesis*, Obstetrics and Gynecology, Vol. 105, No. 5, Part 2, 2005.

24 18. It is my understanding, from review of court documents, that
25 beginning on June 13, 2015, Melissa Kay Cook started on a drug regimen required
26 by the surrogacy contract to prepare her body to accept the embryo transfers
27 contemplated by the contract. On that day, Melissa Kay Cook started taking “birth
28 control pills,” and on June 19, 2015, she began injections of 20 units each day of

1 Lupron. Lupron is intended to inhibit Melissa Kay Cook's brain from secreting
2 hormones so that her menstrual cycle can be controlled. The purpose is to put her
3 into a "medical Menopause," so that her ovaries stop functioning and her menstrual
4 cycle can be completely controlled.

5 19. I have read the below paragraphs of the Verified Answer of Melissa
6 Kay Cook and Counterclaim of Melissa Kay Cook, Individually and Melissa Kay
7 Cook as Guardian ad Litem of Baby A, Baby B and Baby C filed on February 1,
8 2016 filed in the Superior Court of California in and for the County of Los
9 Angeles. The purpose of the drug regime and the risks presented by that regime to
10 the woman are scientifically and medically accurate within a reasonable degree of
11 medical certainty.

12 20. It is accurate that "the Lupron injections were designed to prevent
13 premature ovulation to allow Melissa Kay Cook's body to be synchronized with
14 that of the anonymous ova donor. Melissa Kay Cook was required to inject herself
15 daily".

16 21. It is accurate that "Lupron is a synthetic hormone drug, which poses
17 significant risk to a surrogate such as Melissa Kay Cook. It carries a Category X
18 classification which means that if she were to become pregnant while taking the
19 drug the fetus will be harmed. The adverse effects of Lupron for the surrogate such
20 as Melissa Kay Cook include: loss of bone density, depression, mood swings,
21 headaches, mania, dizziness, tingling in the extremities, edema, joint pain, weight
22 gain, general body aches, hot flashes and nervousness. It is suspected, but not
23 known, that Lupron may increase the risk for diabetes, heart attack and stroke".

24 22. It is my understanding that "because the first ova donor backed out,
25 Melissa Cook started a second drug regimen on July 10, 2015 when she started
26 taking birth control pills. On July 17, 2015, Melissa Cook again started taking
27 Lupron injections, 20 units daily. Melissa Cook took the last birth control pill on
28 July 24, and on July 30, 2015, after two weeks of daily injecting 20 units of Lupron,

1 Melissa Cook started injecting 10 units of Lupron daily. Those 10 unit daily
2 injections continued until August 10, 2015".

3 23. It is my understanding that "while still taking the daily injections of
4 Lupron, Melissa Cook was required to start taking Estrace (Estradol) which is the
5 hormone estrogen". It is accurate that "estrace is intended to thicken the lining of
6 the walls of her uterus to prepare for the embryo transfers. Melissa Cook was
7 required to take two pills orally and insert two pills vaginally each day".

8 24. It is my understanding that "on August 10, 2015, Melissa Cook
9 administered her last injection of Lupron, and began injecting 100 mg. of
10 progesterone daily".

11 25. It is accurate that "the purpose of the progesterone injections was to
12 alter the lining of Melissa Cook's uterus to enhance the chances of successful
13 implantation of the embryos which were scheduled to be transferred a week later.
14 The side effects of progesterone are bloating, irritability and breast tenderness".

15 26. I understand that on August 17, 2015, Dr. Jeffrey Steinberg, working
16 at Fertility Institute, in Encino, California, transferred three six day old embryos
17 into the uterus of Melissa Cook who would turn forty-eight years old during her
18 pregnancy. Those embryo transfers made with a forty-seven year old woman
19 violated accepted standards of medical practice. Melissa Cook was then required to
20 continue taking pre-natal vitamins, Estrace and progesterone injections. Melissa
21 Cook had to continue the progesterone injections for about another eight weeks
22 after the embryo transfers. This drug regimen is typical of that to which gestational
23 carriers are subjected. The risks that this drug regimen imposes on the woman who
24 acts as the gestational carrier are significant and cannot be minimized.

25 27. For over 16 years, I was an active practitioner of Reproductive
26 Medicine. While I was able to witness some great joy in that time, I left the field
27 after seeing the great damage that was done. Marriages were broken.
28 Psychological effects were common. The surrogate's other children suffered

1 their mother giving away their siblings. Children were deliberately separated from
2 the mother who carried them. The California law now ensures the creation of a whole
3 class of children with no mothers. And I began to see the widening of the scope to
4 parents who had no relation to each other, and the world wide reach to other countries
5 for the use of human eggs and uteri in procedures known as reproductive tourism.
6 What is lost in the commotion are the lives of the three children involved. Under the
7 surrogacy arrangement in this case, there was no apparent effort to determine whether
8 the intended parent could competently raise the children. While the complete
9 disregard by the physician for the physical health of the 47 year old surrogate mother
10 is disturbing, it is utterly irresponsible to do a procedure to bring three children into
11 the world without ever knowing – and perhaps not caring to know – who would
12 properly care for them. A physician cannot, consistent with medical ethics, make
13 such an embryo transfer without regard for the well-being of the children.

14 28. Pursuant to 28 U.S.C. § 1746, I certify under penalty of perjury that the
15 foregoing is true and correct.

16
17 
18 ANTHONY J. CARUSO, M.D., M.P.H.
19 Dated: March 5, 2016

EXHIBIT 1

Anthony James Caruso MD, MPH

630-629-9663
630-747-9277 (mobile)
(877) 719-0716 (fax)
e-mail: ajcaruso@comcast.net

EDUCATION

1995-1997 Rush Presbyterian St. Luke's Medical Center, Chicago, IL
Clinical Instructor - Fellow
Department of Obstetrics and Gynecology
Section of Reproductive Endocrinology

1994-1995 Southern Illinois University, Springfield, IL
Post Graduate Medical Education Program
Chief Resident
Department of Obstetrics and Gynecology

1992-1995 Southern Illinois University, Springfield, IL Post Graduate Medical Education Program
Department of Obstetrics and Gynecology

1991 - 1992 Nassau County Medical Center, East Meadow, NY Post Graduate Medical Education
Program Department of Obstetrics and Gynecology

1987-1991 Loyola University of Chicago, Maywood, IL Stritch School of Medicine
MD, awarded June, 1991

1985-1987 Boston University, Boston, MA School of Public Health
MPH, Epidemiology, Biostatistics, Environmental Health, awarded June, 1987

1981-1985 Fairfield University, Fairfield, CT BS, Biology, awarded May, 1985

HONORS AND AWARDS

1995 Resident research award
1995 AAGL Special Excellence in Endoscopy
1993 CREOG Achievement Award
1991 Inductee, *Alpha Sigma Nu*, National Jesuit Honor Society
1989 National Recruitment Award, American Medical Student Association
1987 Graduation Speaker, Boston University School of Public Health
2001 Graduation Speaker, Southern Illinois University
2005-07: DeLee Award for Student Education, University of Chicago Department of OB/GYN

ACTIVITIES

1993-1995 Board of Directors, Sangamon County Medical Society
1987-89, 1990-91 Treasurer, Class of 1991, Loyola University School of Medicine
1987-89, 1990-91 Voting Member, Student Union, Loyola University School of Medicine

1987-91 American Medial Student Association
1988-89 Chapter President
1985-87 Student Advisory Committee, Boston University School of Public Health
1986-87 Chairman

EMPLOYMENT

2015-present A Bella Baby OBGYN
Downers Grove, IL
Director, Owner

2013-2015 Downers Grove OB/GYN PC
Downers Grove, IL
Vice President, Secretary, Assistant Treasurer, Co-owner

2010-2013 Alexian Brothers Medical Center, Elk Grove Village, IL
Ob/GYN Hospitalist

2005- 2010 University of Chicago, Chicago, IL
Department of Obstetrics and Gynecology
Assistant Professor, Reproductive Medicine

2004 – 2006 Reproductive health specialists, Joliet IL
Director of Medical protocols

2004 Center for Human Reproduction, Chicago, IL
Locum tenens coverage

1997-2004 Midwest Fertility Center, Downers Grove, IL
Director, Clinical Protocols
Director, Indiana Division

1995-1997 Alexian Brothers Medical Center, Elk Grove Village, IL
House Physician, Department of OB/GYN

1995-1997 Ravenswood Hospital Medical Center, Chicago, IL
Supervising Physician

1985-1987 Sacred Heart High School, Weymouth, MA
Chairman, Department of Science

ACADEMIC APPOINTMENTS

2011- present Loyola University Stritch School of Medicine, Maywood, IL
Affiliate Assistant Professor, Department of Obstetrics and Gynecology

2005-2010 University of Chicago, Chicago, IL
Assistant Professor, Department of Obstetrics and Gynecology
Section of Reproductive Endocrinology

2003-2004 Southern Illinois University School of Medicine, Springfield, IL
Clinical Assistant Professor, Department of Obstetrics and Gynecology
Section of Reproductive Endocrinology

CURRENT RESEARCH

Met-analysis of methods of natural family planning and ovulation prediction

PUBLICATIONS

Koh HK, Caruso AJ, Gage I, Geller AC, Prout MN, White H, O'Connor K, Balash EM, Blumenthal G. "Evaluation of Melanoma Skin Cancer Screening in Massachusetts: Preliminary Results." *Cancer* 1990 January 15; 65(2): 375-379

Marshall PA, O'Keefe JP, Fisher SG, Caruso AJ, Surdukowski J. "Patient's Fear of Contracting the Acquired Immune Deficiency Syndrome from Physicians." *Archives of Internal Medicine* 1990 July; 150(7): 1501-1506

Koh HK, Geller AC, Miller DR, Caruso AJ, Gage I, Lew RA. "Who is being Screened for Melanoma/Skin Cancer?" *Journal of the American Academy of Dermatology* 1991 February; 24(2):271-277

Caruso AJ. "Unexplained Infertility." *Resident and Staff Physician* 1994 January; 40 (1 suppl): 22-27

Caruso A, Pittman D, Amador AG. "Ontogeny of the Differences in Adrenal Steroids among Outbred Rat Stocks and between Genders." *Endocrinology* 1995; 136(suppl)

Caruso A, Radwanska E. "Effect of Increasing Suppression on Pregnancy Rates in Patients with Endometriosis." Abstract E-88 13th Annual Research Forum, Rush University April 25-26, 1996

Hirschfeld-Cytron, J, Barnes, R, Ehrmann, D, Caruso, A, Morensen, M, Rosenfield, R. "Characteristics of Typical and Atypical types of Polycystic Ovary Syndrome." *Journal of Clinical Endocrinology and Metabolism*. 2009 94(5) 1587-94

CERTIFICATIONS

Medical License held in: Illinois
Diplomate of the National Board of Medical Examiners
Board Certified OB/GYN by the Board of the American Board of Obstetrics and Gynecology (11/98)
Board Certified Division of Reproductive Endocrinology and Infertility (4/23/2001)

MEDICAL STAFF APPOINTMENTS

Advocate Good Samaritan Hospital, Downers Grove, IL

PROFESSIONAL MEMBERSHIPS

Fellow, American College of Obstetrics and Gynecology
American Society for Reproductive Medicine
American Association of Gynecologic Laparoscopists
Society of Reproductive Surgeons
Society of Laparoendoscopic Surgeons
The Endocrine Society
Chicago Association of Reproductive Endocrinologists

2008-09 Treasurer
2009-10 Secretary/Treasurer
2010 President-Elect
Society for Reproductive Endocrinology & Infertility
Catholic Medical Association
American Association for Pro-life OBGYNS

PRESENTATIONS

- Medical Student Lectures, University of Chicago
Department of Obstetrics and Gynecology 2006-2010
 - Infertility
 - Polycystic Ovarian Condition
 - Chronic Pelvic Pain
 - Endometriosis

- RESOLVE Guest Speaker, April, 2000 "Endometriosis"

- Visiting Professor, Valparaiso University School of Nursing March, 2001 "Fertility and Religion"

- RESOLVE Guest Speaker April 21, 2001, "Female & Male Infertility After Age 40".

- Resident Day Guest Speaker June 22, 2001 Southern Illinois University School of Medicine
Department of Obstetrics and Gynecology.

- RESOLVE Guest Speaker April 20, 2002, "The Medical Aspects of Egg & Embryo Donation".

- Central DuPage Hospital Living Well Wellness Program, May 23, 2002, "Family Building & Infertility".

- Grand Rounds St Mary's Hospital April, 2006 "History of Hysterectomy"

- Grand Rounds: St Elizabeth's Hospital June, 2006 "Advanced reproductive Technologies"

- Grand Rounds: St Mary's Hospital, July, 2006 "Polycystic ovarian Syndrome"

- Grand Rounds: University of Chicago Department of Obstetrics and Gynecology September, 2006
"Endometriosis and Infertility"

- University of Chicago Pritzker School of Medicine: Department of Anatomy November, 2006 "clinical
Aspects, female reproductive System"

- University of Chicago, Pritzker School of Medicine: April, 2007 Clinical case presentation, second
year students

- University of Chicago: Resident education series: July, 2007 "Laparoscopy and Hysteroscopy with
practical applications"

- Grand Rounds, St Anthony's Medical Center, Crown Point, Indiana July, 2007 "Chronic Pelvic Pain"

- Resident Education Rounds, St James Hospital September, 2007 "Polycystic Ovarian Syndrome", "Infertility"
- University of Chicago Department of Pediatrics Resident Education , November, 2007 "Infertility"
- Grand Rounds, Department of Obstetrics and Gynecology, St Joseph's Hospital, October, 2008, "Infertility and In vitro fertilization"
- University of Chicago: Resident education series: "Laparoscopy and Laparoscopy Simulation", September, 2009
- Grand Rounds: University of Chicago Department of Obstetrics and Gynecology, October, 2009 "Male and Female Infertility"
- Osler Institute: Faculty for board preparation courses and case list reviews 2006-present
 - 2006- Present: Chicago Course
 - 2008 Dallas, TX course
 - 2010 Philadelphia, PA course
 - Dallas , TX course
 - 2011 Los Angeles, CA course
 - Philadelphia, PA course
 - Chronic Pelvic Pain
 - Hyperandrogenism
 - Menopause
 - Prolactin Disorders
 - Amenorrhea
 - Pediatric gynecology
 - Infertility procedures
 - Behavioral Health
 - Contraception
 - Substance Abuse in Pregnancy
 - Ultrasound in Pregnancy
 - Sexually Transmitted infections
- Community Health Systems: CME:" Male and Female Infertility": March 2009
- Commodification of Life: IVF St Peter and Paul Church March 2012
- Commodification of Life: Diocese of Joliet Pro-life coordination Cluster April 2012
- March 23,2012 Chicago Stand up for Religious Freedom Rally
- March 29, 2012 St Peter and Paul, Naperville
- April 4,2012 Lifetalk, Margie Manczko Breen
- May 16, 2012 Catholic Channel: Sirius/XM 129 Gus Lloyd show, Seize the day.
- June 9, 2012 "The Catholic Doctor's Show" St Gabriel Radio, Columbus, OH
- June 15, 2012 7:00 pm Spirit and Truth meeting St Joan of Arc, Lisle, IL
-
- July 12, 2012: Naprotechnology vs IVF St Mary Of Gostyn Parish, Downers Grove, IL

- August 2, 2012: Prolife meeting, Our Lady of the Rosary, Elk Grove, IL
- August 8, 2012 Catholic Connection with Teresa Tomeo Ave Maria Radio
- August 18, 2012: St Lamberts Parish, Skokie, IL Keynote address Prolife committee commissioning
- September 3-5, 2012: Defending Life: Costa Rica
- September 22, 2012 Lake County Right to Life Mary town Commodification of Life
- September 22, 2012 Crown Plaza O'Hare Pro Life action League Conference: The IVF Industry as it relates to abortion.
- September 29, 2012 Holy Family Parish, Rockford, ILThe problem with IVF
- October 4, 2012 Holy Name Cathedral, Chicago, IL 6pm Commofidication of Life: IVF
- October 5, 2012 Illinois Citizens for life Banquet Carlisle, Lombard
- October 10, 2012: Sacred Heart Parish, Winnetka, IL
- February 8, 2013 St Peter and Paul Parish Year of Faith Series: The Catholic approach to health care.
- February 28, 2013 Our Lady of the Woods, Orland Park, il Infertility Options
- March 21, 2013 St George, Tinley Park, IL
- September 7, 2013 Pro life committee seminar IVF dangers Romeoville, IL
- September 19, 2013 Pro life Meeting, Immaculate Conception, Elmhurst, IL
- September 26, 2013 Women at the Well meeting St Francis, Bolingbrook
- October 5, 2013 St Jude, New lenox, IL
- October 11.2014 Catholic Medical Society Gahana, OH White Mass Keynote
- Also frequent guest on Drew Mariani's Show and Sheila Liaugminas Show on Relevant radio

UNIVERSITY COMMITTEES:

University of Chicago GCRC 2005-2007

University of Chicago Center for Advanced Medicine OR Committee: 2006- 2010

University of Chicago Medical Center OPEC OR procurement Committee 2008- 2010

University of Chicago Pritzker School of Medicine Admissions Committee 2008-2010

HOSPITAL COMMITTEES

Peer Review Committee, Alexian Brothers Medical Center, 2010-2013

Institute for Healthcare Improvement committee, Alexian Brothers Medical Center, 2010-2012