

3.Instructions for IVF-ICSI

We recommend that you read these instructions entirely as soon as you can, making notations in the margins about any area where you have questions. As you approach each step, we suggest that you re-read that particular section and ask any questions at that time. This will prevent you from becoming confused with too many answers at one time.

It is important to remember that each patient has her own unique response to the medications she receives and that each ART cycle is different. This means that not only are you unlikely to respond as others do, but you may actually respond differently from one cycle to the next. For this reason, you will find that your treatment and testing differ from those of other patients. Please do not compare your test results and medication plans with others going through treatment. Although you may find much in common with other patients here, please keep in mind that IVF is a very private matter and that some patients do not feel comfortable discussing this.

PRE-CYCLE COUNSELING

We recommend that you contact the IVF nurse coordinator, when your period begins for the cycle preceding the one in which you will undergo in vitro fertilization. At this time, arrangements will be made to complete any pre-cycle testing, provide you with the necessary prescriptions for medications, complete the appropriate informed consent documents, and review and clarify your financial obligations. Separate consent forms are available for IVF, embryo freezing and micromanipulation. All consent forms must be signed by you and your partner prior to initiating the treatment cycle. You will have an IVF teaching appointment at which time you will meet with both the doctor and nurse to review the consent forms and have any questions answered. You are to avoid the possibility of pregnancy during this cycle by using contraception.

MAXIMIZING CHANCES FOR SUCCESS

Females:

- Avoid all medications other than Tylenol and prenatal vitamins. If you are taking other prescription medications, check with us prior to beginning your treatment cycle
- No more than two coffee per day.
- Avoid changes in diet or weight loss during IVF cycle. A healthy well-balanced diet works best.
- Refrain from intercourse three to four days prior to egg retrieval and following embryo replacement until pregnancy determination is made.
- Normal exercise may continue unless enlargement of your ovaries produces discomfort.
- Avoid hot tubs or saunas.

Males:

- Fever greater than 100.4°F may adversely affect sperm quality. If you are sick, please take your temperature and notify us of any illnesses.
- Sitting in hot tubs and saunas is discouraged. Even a single episode in the hot tub can adversely affect sperm function. Please refrain from this for at least three months prior to treatment.
- Drugs, alcohol and cigarette smoking should be avoided for three months prior to treatment and at all times during the ongoing IVF treatment cycle to get the best results.
- If you have a history of genital herpes infection, you must report any pre-herpes symptoms, active lesions or healing herpes lesions. The occurrence of any of these stages in either the male or the female will require cessation of the IVF treatment.
- Do not begin any new exercise, sport or marathon training within three months of planning IVF. If you are a runner, please decrease jogging to a total of less than 20 miles a week.
- Refrain from wearing tight underwear.
- Abstain from intercourse for at least three days, but not more than seven days prior to collection of semen for egg collection and during treatment.

IVF-ICSI TREATMENT

Treatment may begin in the cycle preceding your planned cycle of treatment. Most patients will be given birth control pills (BCP) to suppress ovulation and assist in the timing of the IVF cycle. You will be asked to report to the office for an ultrasound examination to evaluate the mid-cycle development of the uterine lining and for a trial transfer. This procedure consists of a pelvic examination and placement of a tiny catheter inside the uterus to determine the direction and length of the uterine cavity prior to your treatment cycle. This procedure minimizes trauma to the uterine lining during your actual IVF treatment cycle and may enhance pregnancy rates.

You are to avoid the possibility of pregnancy during this cycle by using barrier contraception. In some cases an injection called Lupride will be started on 21st day of the cycle; where as in rest of the cases the injections will be commenced from second day of menstrual cycle. After finishing the pack of oral contraceptives, the baseline ultrasound will be scheduled. The injection medication will be continued until the day of the hCG injection.

The first day of medication will be considered day one of your cycle. All consent forms must be signed and deposits paid prior to receiving approval to start medication and further instructions. Your treatment may stop at any stage if the medical team feels that successful completion of treatment is unlikely. A credit or refund may be due if you do not complete your treatment cycle. Specific instructions regarding drug doses and upcoming appointments will be given.

EGG RETRIEVAL :

You should have nothing to eat or drink in the eight hours prior to your retrieval. This procedure begins in the same fashion as a vaginal ultrasound. You will receive small doses of medication given intravenously, which will make you relaxed and sleepy.

Recovery from these drugs, for most patients, is rapid and generally nausea is minimal. Your vagina will be cleaned to minimize the risk of infection. The vaginal transducer is inserted into your vagina, and the eggs are retrieved with a needle inserted through the vaginal wall under the guidance of ultrasound. No abdominal incisions are required.

PRE-RETRIEVAL INSTRUCTIONS:

Report to ARMC at your assigned time. **DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT.** When you arrive, tell the front office staff, that you are an IVF retrieval patient and let her know what time you are posted for surgery. Please make sure to arrive without jewelry, nail polish, make-up, or contact lenses.

Shortly before your retrieval, an attendant will escort you to the preparation area. Please note that usually no preoperative sedatives are administered. While you are in the preparation area, please try to empty your bladder completely. The anesthesiologist will confer with you and answer any questions you may have regarding your anesthesia. When all is ready, you will be taken into the procedure room and asked to lie on the procedure table. If you do not yet have an intravenous line, one will be started. Next, you will receive medication to make you feel relaxed and drowsy, or you will receive medication to put you to sleep (as discussed earlier under anesthesia). The procedure will last about 10-20 minutes.

Your partner will be asked to provide a semen specimen before or immediately after the time of your retrieval. Following your initial recovery your partner may be with you. The time you will be required to remain for observation will vary between patients. IVF retrieval patients will generally stay approximately two or three hours. When the nurse feels that your condition is stable, you will be discharged. Patients are not allowed to drive themselves home after retrievals. Following your retrieval, you may eat or drink when you feel well enough. At this point, following your procedure, you should begin taking your antibiotic if you have not been instructed to start them earlier.

Sometimes when immature eggs are retrieved, male factor fertility is present, or if fertilization does not occur, your husband may be required to provide a second semen sample. This generally will occur the day after retrieval, but may occur later the same day. Arrangements will be made to contact him the morning following retrieval if this is necessary.

POST-RETRIEVAL INSTRUCTIONS:

Following transvaginal ultrasound retrieval you may experience some pelvic area tenderness and feel tired or sleepy from the medications you have received during the procedure. You will also have some light vaginal spotting. This bleeding should be scant and may be red to brown in color.

The medications used during your egg collection may not be eliminated by your body for up to 24 hours. You may feel "hung over" or just not your normal self. During this period we ask that you do not:

1. Drive a car or operate machinery or power tools.

2. Drink any alcoholic beverages.
3. Make any important decisions.

You may eat whatever you like after the egg collection, as long as you are not nauseated. If you experience nausea, stick to clear liquids and crackers until the nausea subsides. It is usually best to avoid spicy foods for at least 24 hours.

Antibiotic therapy is administered to minimize the risk of infection following this procedure.

The embryo transfer may be scheduled in the same cycle as fresh transfer (day 2 or 3) or in the following cycle as frozen embryo transfer. This will be depending on the thickness of endometrial lining and the hormone levels on the day of hcg. The same will be intimated during the post egg pick up briefing by the consultant. The outcome following ICSI regarding the fertilization rate, cleavage rate and embryo quality will be intimated to the couple in time to time.

You will be contacted by the nurse on the day following your egg retrieval and given the status report on your eggs and sperm. At this time, fertilization will be seen in most cases, but embryo replacement can only be confirmed when the fertilized egg divides normally, usually after one additional day. As you know, although rare, one of the risks of IVF is lack of fertilization. Sometimes the reason for this is understood but many times no reasons are apparent. If this occurs, monitoring will be discontinued. You will be given an opportunity to meet with your physician and or the embryologist regarding the implications of this finding. Having intercourse between retrieval and transfer is suggested and may improve implantation.

You should abstain from sexual intercourse for two weeks after the embryo transfer. Your physician may advise sexual intercourse after egg retrieval. You should also abstain from strenuous physical activity during those two weeks. If you have any questions about a particular activity, please contact your physician.

Please contact your doctor if any of the following occur:

- Fever greater than 100.4°F that lasts for more than two hours
- Excessive vaginal bleeding
- Unusual and increasing pelvic area discomfort
- Difficulty with urination or change in bowel activity
- Nausea, vomiting or diarrhea
- Sharp or shooting pains
- Pain or burning during urination
- Abdominal swelling
- Unusual back pain

