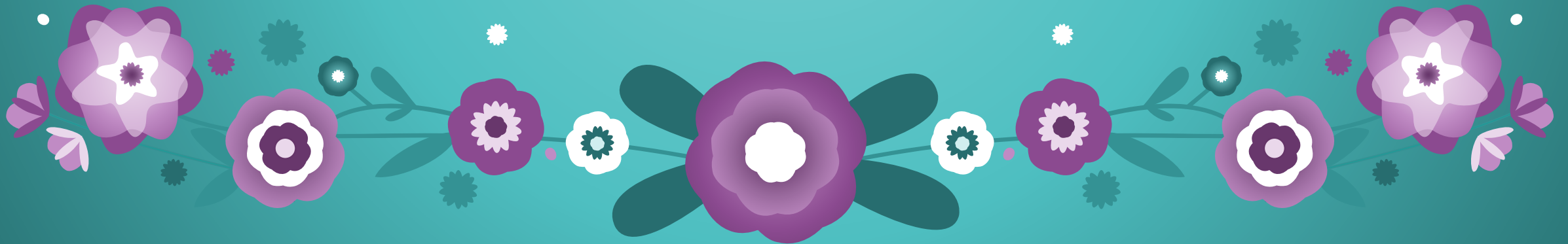


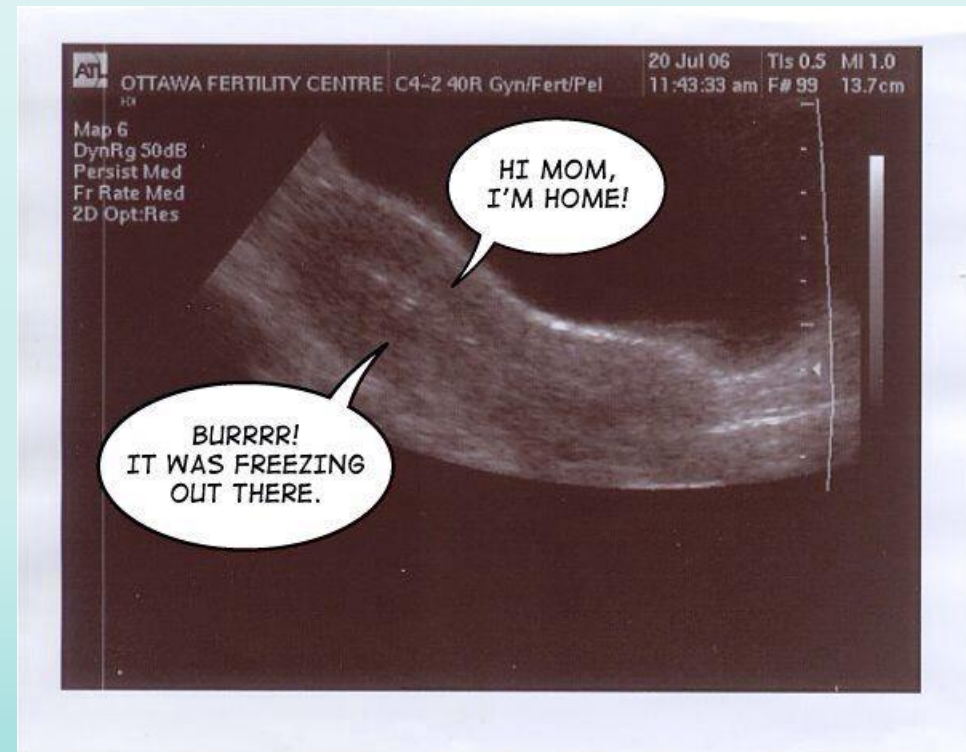
Ready for a frozen embryo transfer!

So now what?!



Embryo transfer preparation

- Once it has been determined by your physician that the time has come for an embryo transfer, your IVF coordinator will be in contact to set up your embryo transfer cycle.
- This may or may not include birth control pills.
- For most people, this preparation include oral and vaginal medications.



Embryo transfer preparation

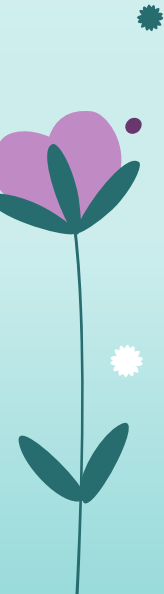
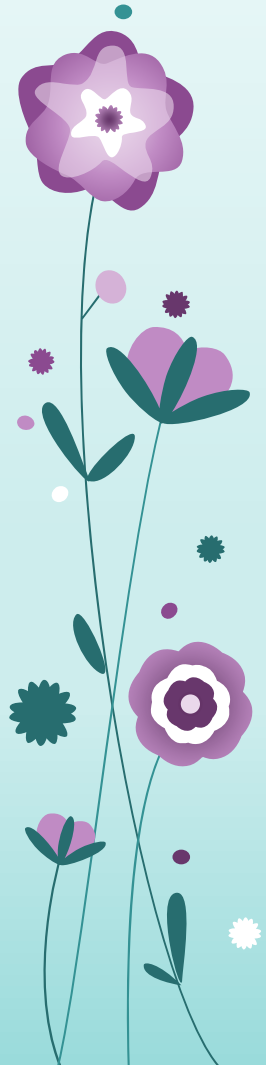
With oral contraception pills

- If you will be on an oral contraception pill, you will call the IVF coordinators' line at (812)842-4530 to report cycle day 1 of your period.
- Cycle day 1 is considered first day of full flow. If it is full flow AFTER 4:00 PM, cycle day 1 will be considered the next day.
- You will begin taking the oral contraception pill the evening of the next day (cycle day 2).
- If you are cycle day one on a weekend, please call the office and wait for the answering service to page the ON CALL NURSE. It is important to start your medications at a certain time in your cycle.

Embryo transfer preparation

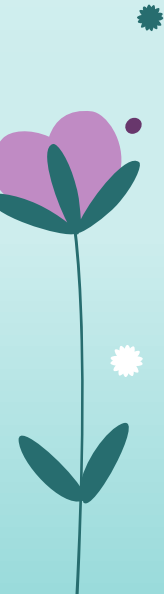
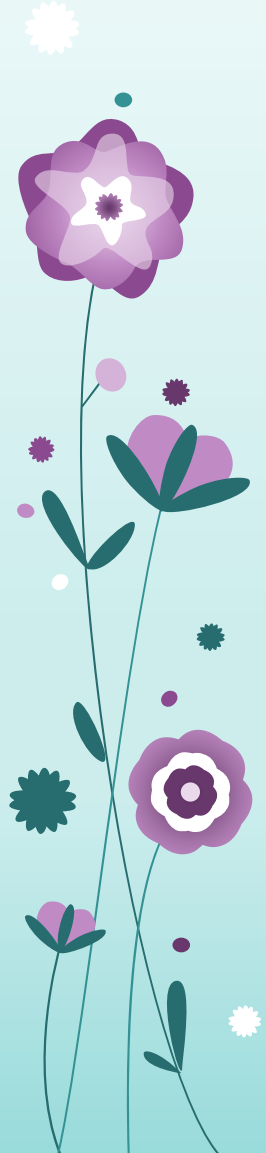
Without oral contraception pills

- You will call the IVF coordinators' line to report cycle day 1 of your period.
- You will come in for a baseline bloodwork and ultrasound on cycle day 2, 3 or 4. If you are cycle day one on a weekend, please call the office and wait for the answering service to page the **ON CALL NURSE**. It is important to start your medications at a certain time in your cycle.



Embryo transfer preparation

- If you have been on a birth control pill, you will have a “withdrawal bleed” about 5-7 days after stopping the pill. It is expected and normal, so don’t get scared!
- Once you have been given the “good-to-go” to get started, you will begin taking Estrace (estradiol) two times a day. There is no set time to take the pills, and each dose should be spread out as evenly as possible.
- Be consistent on what times you take your medication!
- You will also wear an estrogen patch that you will change every three days. Your cycle calendar will assist you with this!



Embryo transfer preparation

After taking your Estrace and Estrogen patch for approximately 2 weeks, you will have an appointment for an ultrasound to determine if your uterine lining has thickened to an appropriate size and is ready for an embryo.



We want to make a nice, thick lining for an embryo to snuggle down into! If your lining hasn't thickened appropriately, don't despair! We may add vaginal Estrace to the oral pills and reassess after a couple more days.

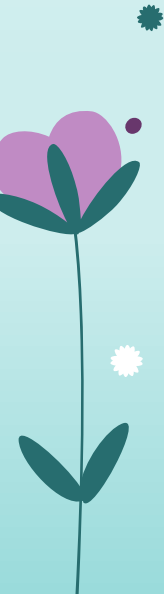
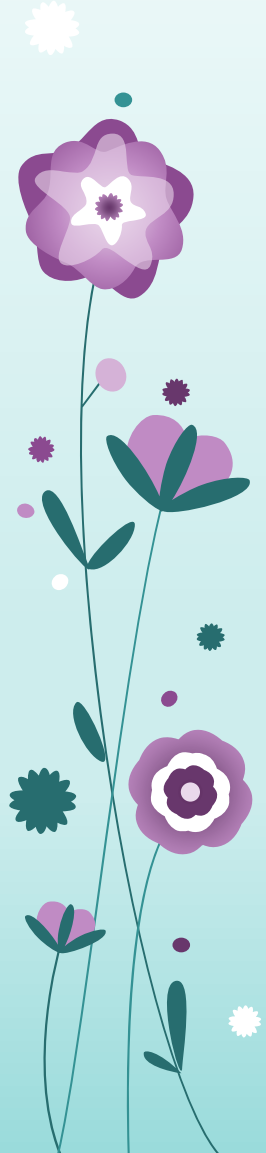
It's time!!

- Once your lining is ready to go, you will be instructed to start your progesterone support:
 - If using injectable progesterone – your total dosage is 75 mg or 1.5 mL daily IM. This dosage is split into two injections the first day, but will be once daily after that first day.
 - If using vaginal progesterone – you will insert a gel twice a day.
- Your BIVF Nurse will call you to set up your transfer day.
- You will receive instructions on when to arrive at the office and instructions on additional instructions regarding that day.



Day of the transfer!

- You will receive instructions on when to arrive at the office.
- Prior to the transfer, you will need to fill your bladder so the transfer can be visualized under ultrasound guidance. Your BIVF Nurse will give you detailed instructions on when to begin and how much to drink.
- The transfer occurs under ultrasound guidance and is a very quick procedure. If you have a significant other/partner who will be going with you, they are welcome to observe the transfer.



How many?

The number of embryos to transfer is based on recommendations from the American Society of Reproductive Medicine, and will be discussed with you when you sign consents for the procedure with your physician.

TABLE 1

Recommendations for the limit to the number of embryos to transfer.

Prognosis	Age (y)			
	< 35	35–37	38–40	41–42
Cleavage-stage embryos ^a				
Euploid	1	1	1	1
Other favorable ^b	1	1	≤3	≤4
All others	≤2	≤3	≤4	≤5
Blastocysts ^a				
Euploid	1	1	1	1
Other favorable ^b	1	1	≤2	≤3
All others	≤2	≤2	≤3	≤3

^a See text for more complete explanations.

^b Other favorable — Any ONE of these criteria: Fresh cycle: expectation of 1 or more high-quality embryos available for cryopreservation, or previous live birth after an IVF cycle; FET cycle: availability of vitrified day-5 or day-6 blastocysts, euploid embryos, 1st FET cycle, or previous live birth after an IVF cycle.

Please note: Justification for transferring additional embryos beyond recommended limits should be clearly documented in the patient's medical record.

ASRM. Limits on number of embryos to transfer. *Fertil Steril* 2017.

After the transfer

- After your transfer, you will be discharged home. We recommend you take it easy for the rest of the day, and you can return to regular activities the day after the transfer.
- You may have some slight spotting and discharge after the transfer. If you are unsure of what is expected, please don't hesitate to call the office and speak with one of the BIVF nurses.
- You will continue your Estrace and estrogen patch as well as your progesterone support until instructed to stop.
- If you have a positive pregnancy test, they will continue until about the 10th week of pregnancy.
- Your pregnancy test will be scheduled the day of your transfer!



If you have questions...

If you have any questions, concerns, or need clarification, don't hesitate to contact the BIVF Nursing Team at 812-842-4530 ☺

