



Initial specialist appointment

At your initial appointment, your fertility specialist will review your medical history and all previous investigations and treatments.



Pre-treatment consultation

You'll meet again with your fertility specialist, confirm your treatment plan, have any questions answered and sign the relevant consent forms



Treatment begins

Your fertility nurse gives you the medication you need, explains the treatment cycle timeline, and shows you how to self-administer the Follicle Stimulating Hormone (FSH) injections.



Trigger injecton

Once you have the optimum number and size of follicles, we plan your egg collection. You'll have a trigger injection of hCG (human chorionic gonatrophin) in the evening, and the operation for egg collection will occur 36 to 38 hours later. The hCG injection replaces the natural Luteinising Hormone in the body and 'triggers' or instigates ovulation.



Treatment monitoring

Throughout your cycle, regular blood tests measure your hormone levels and ultrasounds measure the size and number of your ovarian follicles. This also helps us determine the appropriate time for egg collection.



Hormone stimulation

FSH is administered through a diabetic-style pen, stimulating your ovaries to produce more eggs than usual. We have a higher chance of achieving fertilisation and pregnancy when we can collect more eggs.



Egg collection in day surgery

Egg collection is undertaken in day surgery, usually under ultrasound guidance. Most women prefer a light general anaesthetic, but you can have a local anaesthetic with sedation if you prefer. You will be at the hospital for about 4 hours and will need someone to drive you home afterwards. Make sure you can take the rest of the day off work.

On the morning of your egg collection your partner will need to provide a fresh semen (sperm) sample, so we can immediately fertilise your eggs.



Egg fertilisation

Collected eggs are taken to the laboratory and placed in culture medium to prepare them for fertilisation later that day. In IVF, prepared sperm and eggs are placed together in a dish where fertilisation occurs. In ICSI, an individual sperm is selected by a highly experienced embryologist, and, under very delicate microscopic control, the egg is injected with this single sperm.



Embryo development

The egg and sperm are then placed in individual incubators at 37 degrees to mimic the temperature of the human body. The next day, scientists will examine the eggs to determine if fertilisation has occurred, and will call you to advise you of the development of the embryos.



Pregnancy test

Your nurse will organise an appointment for you to have a blood test two weeks after the embryo transfer. Occasionally, women can still have a period despite being pregnant, so this blood test will occur even if your period has commenced. If the pregnancy test is positive, we will arrange an ultrasound scan approximately three weeks later.



Embryo freezing

Any extra embryos not used during a treatment cycle that are suitable for freezing can be stored for the future.



Embryo transfer

Embryo transfer is a simple day surgery procedure and usually takes place five days after the egg collection. The embryos are transferred into the uterus through a very fine catheter passed through the cervix, a procedure similar to a pap smear. In some cases we may recommend transferring embryos earlier.

