In Vitro Fertilisation (IVF)

INITIAL CONSULTATION with Rainbow Fertility Specialist

- Diagnosis testing
- Diagnosis
- Treatment plan



USING DONOR SPERM

Frozen Sperm

Sperm sample is obtained from either a:

- Recipient-Recruited Donor (known donor)
- Clinic-Recruited Donor (unknown donor)



OVARIAN STIMULATION

A) Stimulation

The ovaries are stimulated with medication to promote the growth of follicles containing the eggs.



B) Control

The response of the ovaries is



monitored with ultrasounds and/or blood tests, to control the size and quantity of follicles.



C) Egg Release

To assist with the final maturation of the egg and loosening of the egg from the follicle wall, an injection of Human Chorionic Gonadotrophin (hCG) - the trigger - is administered.



EMBRYO TRANSFER

H) Embryo Transfer

The embryo chosen for transfer is loaded into a transfer catheter which is passed through the cervix into the uterus, and gently released. Generally, only one embryo is transferred, in exceptional cases two.



D) Egg Retrieval

The egg retrieval is performed 35-38 hours after "the trigger" under ultrasound guidance, and takes place while you are sedated.



The good-quality embryos that are not transferred are frozen and stored. Frozen embryos can be used in subsequent cycles if the first cycle is not successful.

FERTILISATION

E) Insemination

Frozen donor sperm is thawed, then added to the eggs or injected into the egg using Intracytoplasmic Sperm Injection (ICSI) approximately 4 hours after retrieval.



The dishes are placed in an incubator and checked for fertilisation 16-18 hours after insemination.



G) Culture

Accreditation Committee) accredited fertility clinics, where gametes (eggs/sperm) and embryos are also stored.

Grow in lab for 2-5 days.



LUTEAL PHASE & PREGNANCY TEST

The Luteal Phase is the two-week period between embryo transfer and the pregnancy test. You will be encouraged to limit your Your pregnancy blood test



When contemplating fertility treatment you should be aware of the possible risks, some of which are comparable to those of elective surgery. We encourage you to discuss these with your treating specialist.

