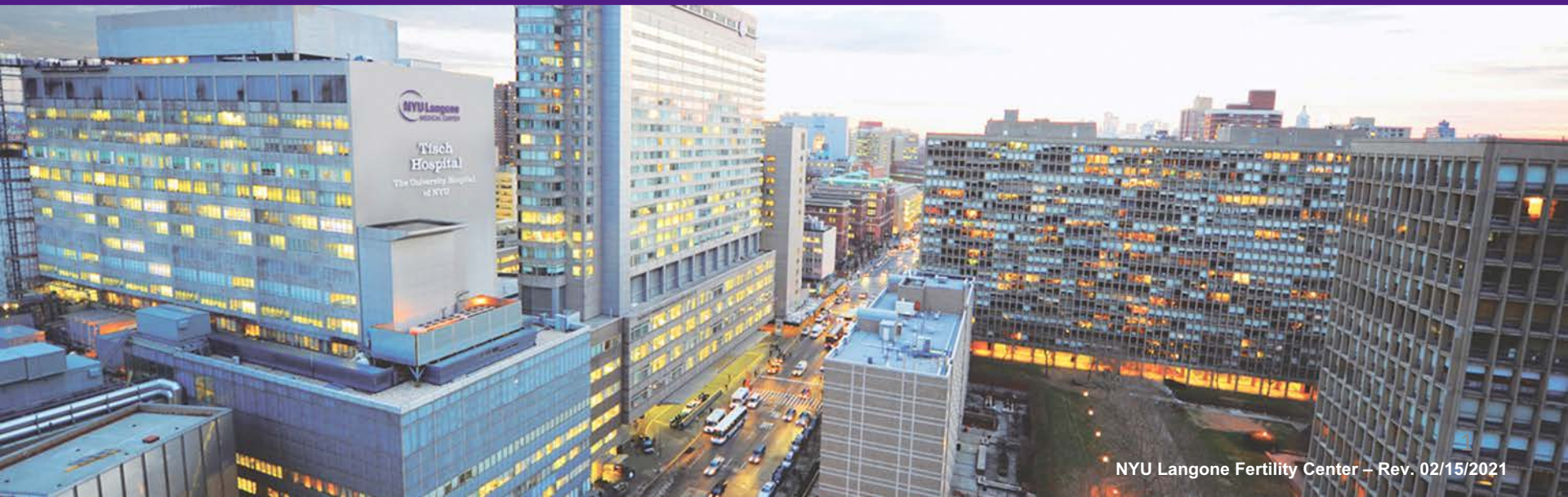




EGG FREEZING (OOCYTE PRESERVATION)

New Patient Orientation



Welcome to the NYULFC Egg Freezing Orientation Class.

Section 1: NYULFC Overview

Critical Information for Egg Freezing Cycles at NYULFC

Section 2: Stimulation & Retrieval

The Egg Retrieval Process:

Ovulation Induction
Oocyte Retrieval

Section 3: Cryopreservation

The Cryopreservation Process:

Embryology
Oocyte Cryopreservation

Section 4: Wellness

Wellness & Support for NYULFC Patients

Section 5: Research

Research Studies & Participation Options



Hello & Welcome!

Haley Penny, LMSW

Health Educator
NYU Langone Fertility Center

NYU Langone Fertility

660 First Avenue, 5th Floor
New York, NY, 10016



E: Haley.Penny@nyulangone.org



T: 212-263-8990



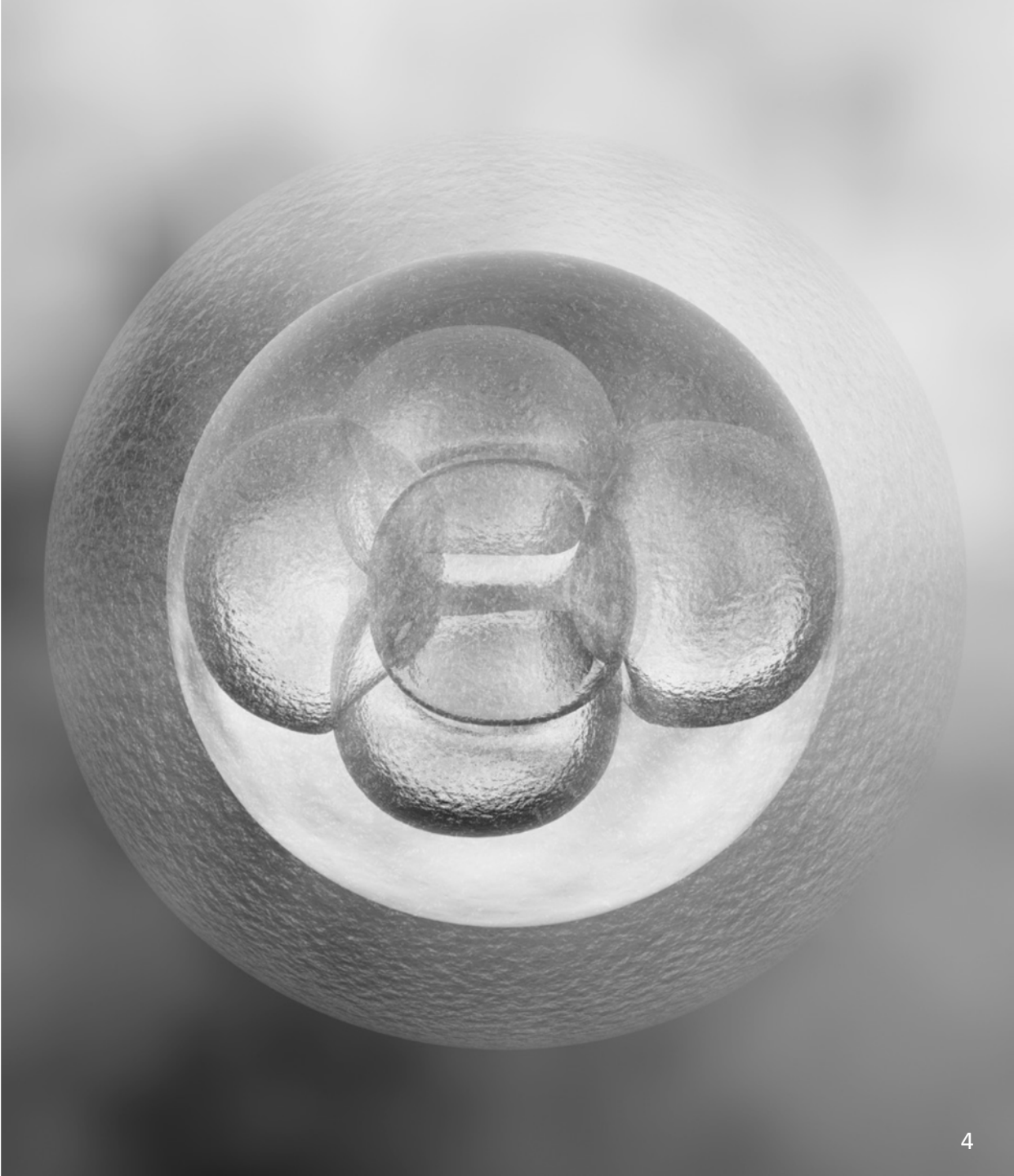
F: 212-263-7853





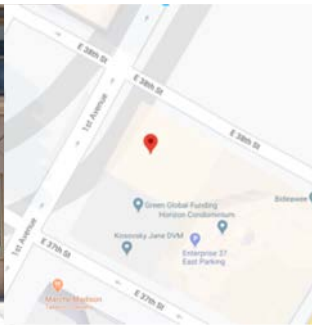
Section 1: NYULFC Overview

Critical Information for Egg Freezing Cycles



Office Locations

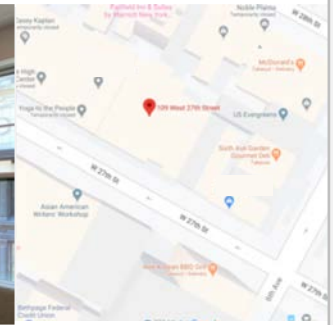
Main Office



660 First Avenue, 5th & 6th Floors
New York, NY, 10016

212-263-8990

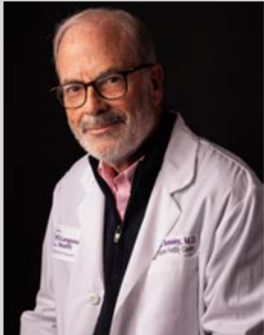
NoMad Satellite



109 West 27th Street, 9th Floor
New York, NY, 10001

212-263-0040

Meet the NYULFC Physician Team



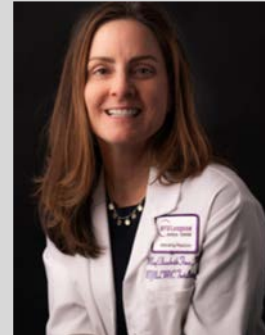
Alan Berkeley, MD



Jennifer Blakemore, MD



Shannon DeVore, MD



Elizabeth Fino, MD



James Grifo, MD, PhD



Brooke Hodes Wertz,
MD, MPH



David Keefe, MD



Frederick Licciardi, MD

World Class Outcomes. Expert & Exceptional Care. Constant Collaboration.

Our physicians have over 140 years collective experience performing fertility treatment cycles. Each member of the NYULFC physician team is dedicated to delivering exceptional clinical care, and all members of the team collaborate daily to deliver best-in-class outcomes for NYULFC patients.

NYULFC operates on a “Doctor-of-the-Day” model, which means one physician is assigned to perform all surgical procedures each day. You will see your physician throughout your treatment cycle, and your physician will direct your care plan (including medication dosage, monitoring frequency, and other clinical directives), however it is possible that your physician may not be the one assigned to perform surgery on the date of your procedure.

During your care at NYULFC, you may also meet our staff physician, Dr. Lisa Kump. While Dr. Kump is no longer accepting new patients, she provides outstanding care for all patients in-cycle at the Fertility Center.

Reproductive Endocrinology Fellows



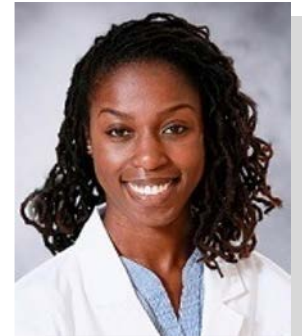
Nicole Yoder, MD



Jacquelyn Shaw, MD



Sarah Cascante, MD



Ashley Wiltshire, MD

NYULFC is part of the Division of Reproductive Endocrinology and Infertility (REI) at NYU School of Medicine's Department of Obstetrics and Gynecology.

We host a 3-YR fellowship training program in REI approved by the American Board of Obstetrics and Gynecology.

Fellows are licensed physicians and have completed a 4-YR residency in OB-GYN prior to sub-specializing in REI.

Throughout your time at the NYULFC, you will interact with our fellows who provide clinical care and on-call responsibilities (including emergencies).

Genetic Counseling

Andria Besser is a Board-Certified Genetic Counselor and the Director of Reproductive Genetics at NYULFC.

Indications for Genetic Counseling include:

- Personal or family history of genetic disease, chromosome abnormality, or birth defect
- Couples who both carry the same autosomal recessive genetic disease
- Female carriers of X-linked diseases



Andria Besser, MS

Most patients pursuing Egg Freezing Cycles do not choose to pursue Carrier Screening. Carrier Screening tests continue to expand each year. In order to receive the “most current” Carrier Screening test, Egg Freezing patients often choose to perform Carrier Screening if/when they return for Embryo Creation/IVF cycles. Preimplantation Genetic Testing is performed on embryos (it cannot be performed on oocytes), and thus is not offered to Egg Freeze patients.

If you are pursuing Embryo Banking, most Embryo Banking couples will perform Carrier Screening prior to embryo creation. Most patients pursuing Embryo Banking Cycles will also choose to perform Preimplantation Genetic Testing.

Available by appointment.

Contact our Genetics Coordinator, Sylvia Wadowiec, at Sylvia.Wadowiec@nyulangone.org or 212-263-0054 to schedule a phone consultation.

Carrier Screening for Recessive Genetic Diseases

NYULFC uses the laboratory “Sema4” for carrier screening. Carrier screening can help detect if an individual is at risk of having a baby with a specific inherited disorder. Carrier screening is performed via bloodwork or saliva sample.

Preimplantation Genetic Testing (PGT-A, PGT-M)

NYULFC uses the laboratory “CooperGenomics” for PGT. PGT can help to screen an embryo for genetic abnormalities. **If you are considering PGT, a phone consult with a CooperGenomics Genetics Counselor is required.**

Please note that NYULFC does not provide testing or genetic counseling for hereditary cancers such as BRCA1/BRCA2.

These appointments are available through the NYU Perlmutter Cancer Center (646-754-1376).



Patient Care Coordinators

Your Patient Care Coordinator serves as your point person throughout your treatment cycle.

At NYULFC, each physician collaborates directly with a Patient Care Coordinator to form a “Physician Pod” or care team.

Patients of Dr. Alan Berkeley & Dr. Frederick Licciardi

Rose Polidura
212-263-6498

FertilityCoordinators@nyulangone.org
Rose.Polidura@nyulangone.org

Patients of Dr. James Grifo

Maribel Feliciano
212-263-7967

FertilityCoordinators@nyulangone.org
Maribel.Feliciano@nyulangone.org

Patients of Dr. Brooke Hodes Wertz & Dr. Jennifer Blakemore

Kimown Peters
646-754-1253

FertilityCoordinators@nyulangone.org
Kimown.Peters@nyulangone.org

Patients of Dr. Elizabeth Fino

Joanna Marrero-Constantine
212-263-7976

FertilityCoordinators@nyulangone.org
Joanna.Marrero-constantine@nyulangone.org

Patients of Dr. David Keefe & Dr. Shannon DeVore

Emily Hawkins
212-263-3659

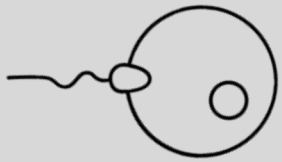
FertilityCoordinators@nyulangone.org
Emily.Hawkins@nyulangone.org

When contacting your Patient Care Coordinator, please email:

FertilityCoordinators
@nyulangone.org

and copy your dedicated
Coordinator.

Embryology and Andrology Laboratory Schedule



The NYULFC embryology, andrology, & endocrinology laboratories are located on the 6th Floor at 660 First Avenue.

NYULFC's laboratories close for 10 days each December to perform extended cleaning and maintenance (**"August & December Downtime"**).

NYULFC continues to provide monitoring, consultations, and non-IVF procedures during the closure periods.

Please contact your Patient Coordinator with any questions you have regarding the laboratory downtime period.

Your Coordinator will make sure you can complete your cycle prior to the December closure.



Prerequisite Tests & Appointments

Please note, all required tests (i.e. “checklist”) and insurance pre-certification **must be completed** prior to the start of your cycle. **Failure to complete all checklist items or consents will delay your treatment.**



Pre-Day 2/3 Checklist

To ensure your health is optimal as you proceed through a treatment cycle, results of all screening tests/appointments must be completed in advance of your Day 2/3 start. With the exception of semen analysis, genetic testing, and psychological consultation, testing may be performed at your preferred laboratory/provider.

Fax to (212) 263-4821, Attn: Patient Coordinator

Patient Name _____		Date of Birth _____	
Partner Name _____		Date of Birth _____	
Female Requirements	Need	Male Requirements	Need
Hepatitis B Surface Antigen Ab		Hepatitis B Surface Ag	
Hepatitis C Virus Antibody Ab		Hepatitis C Virus Ab	
Syphilis (RPR, VDRL)		CBC**	
HIV 1 / HIV 2		High Electrophoresis	
Medical Clearance		Syphilis (RPR, VDRL)	
Measles Ab IgG		HIV 1 / HIV 2	
Varicella Ab IgG		Medical Clearance	
Rubella Ab IgG		Semen Analysis	
High Electrophoresis		Sperm Frozen	Y/N
Blood Group & Rh		Is Specimen at NYULFC?	Y/N
Comprehensive Genetic Screening		Comprehensive Genetic Screening	
Blood Type Anti-Body		Orientation/Consents	
CBC**			
Protein (if menses 35+ days)		Insurance and Medication Authorizations:	
TSH		Jessie Healy (212) 263-4037	
FBS & I2 (A/C)		Michelle Heasley (212) 263-2737	
ABN		Ruth Marks (212) 263-2362	
Genital Culture: Chlamydia		Vicki Salinas (212) 263-0375	
Genital Culture: Gonorrhea			
Genital Culture: Pap Smear (B)			
Sounding			
Hyperandrogenism (HSG) or Fertility			
Mammogram (C)			
Orientation/Consents			

(A) Day 2 un-medicated FSH/E2 is required for insurance

(C) Baseline 40 years and older, then as required

(B) Within 3 years or unless indicated

** Required every 6 months

NYU Langone Fertility Center
600 First Avenue, 37th Floor, New York, NY 10016 • P: (212) 263-4896 • F: (212) 263-7853 • www.nyuinfertility.org • Form #1023 – Rev. 10/20/2019

The checklist pictured above is a generic guideline. You will receive a customized checklist from your Patient Care Coordinator.

Please inform us if you or your partner have any medical conditions or allergies, or are on any prescription medications or herbal supplements. Some medical conditions will require documented clearance from your personal physician prior to treatment. (*Cardiology, Nephrology, etc.*)

Your “Advance Directive” (if you have one) should be provided at the start of treatment. Information is available from your MD’s assistant.

Consents

NYULFC partners with EngagedMD to deliver consent forms and video education modules directly to your email inbox.



You will receive your **Oocyte Cryopreservation consent form** via email, and you will be required to verify your identity when you sign. You will also receive a Research consent form – this is optional. More information is available on slide 37.

You will be asked to scan your driver’s license or passport using your phone.

All consents must be complete prior to cycle start.



Notice: Anesthesia Evaluation

The retrieval is performed using monitored anesthesia care. In some cases, NYULFC will require an anesthesia clearance.

Anesthesia clearance is required:

- If the patient's weight is greater than 200 lbs, and/or if the patient's BMI is indicative of obesity
- If the patient has an illness that may compromise the airway or ability to breathe

In these cases, the patient must see the anesthesiologist for an examination of the airway and to determine intravenous access **before starting medications**.

If the anesthesiologist concludes the airway is compromised or IV access cannot be determined, the patient will **NOT** be cleared for anesthesia.

In these cases, the procedure may be cancelled, or the patient may have to undergo the egg retrieval without anesthesia. Alternatively, the patient may be asked to delay treatment until sufficient weight can be lost, or until medical clearance can be obtained.



Insurance Pre-Certification for Egg Freezing (if applicable)

Insurance Coverage (?)

Unfortunately, many insurance carriers do not cover egg freezing.

Please contact your insurance carrier and/or your employee benefits provider for information about any coverage you may have available.

If you have insurance coverage for egg freezing, pre-certification for your medications and/or procedures is most often required by your insurer prior to beginning treatment. We will assist you with the process, but all information must be provided based on your individual insurance requirement and it is ultimately your responsibility to assure the pre-certification process is complete. Every cycle, even repeat treatments, must be authorized in advance.

Pre- Certification

If you have coverage, you must allow 3 weeks for the pre-certification process. Please provide all forms required by your pharmacy plan and contact one of our Medication Authorization Coordinators for further information:

Nati Marte	(212) 263-0392
Joanne Healy	(212) 263-0037
Vicki Salinas	(212) 263-0375
Michelle Headley	(212) 263-2707
Bianca Remache	(212) 263-6175

Pharmacy Benefit Plan

If you have coverage, your pharmacy benefit plan will determine the brand and quantity of medication that can be dispensed for your treatment cycle at any one time.

Patients must be aware of their own pharmacy benefit and its limitations. We can assist you, but we are unable to circumvent the benefit requirements.

Reservation for Cycle Start

Reservation Requirement

A Cycle Start Reservation



is required for all patients undergoing care at NYU Langone Fertility Center.

Reservation Timing

To account for variation in menstrual cycle timing, all Cycle Start Reservations are honored within a 7-day window of the confirmed date

Example: if your reservation for Day 2 Start is confirmed for the 14th of a month, your reservation will be honored between the 7th and the 21st of the month.

How do I make a Reservation?

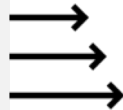
Please contact your Patient Care Coordinator to make a Day 2 Cycle Start Reservation.

Your Coordinator will book your Cycle Start Reservation. Your Coordinator will also call you 1-week prior to your anticipated menses to confirm your Reservation.



What is a “Day 2” Start?

Day 1 of your menstrual cycle is considered full flow menstrual period before midnight (not staining or spotting).



Day 2 is the following day.

If you are taking birth control, this will be 4 days after the last active pill.



Cycle Monitoring

The **average** number of days of injectable stimulation medications is **10-12 days**, however this will vary based on your body's individual response to the medications.

NYU Langone Health

IVF Treatment Cycle Calendar
Gonadotropin • Gonadotropin Antagonist

Cycle Day 1	Cycle Day 2	Cycle Day 3	Cycle Day 4	Cycle Day 5	Cycle Day 6	Cycle Day 7
Menstruation Begins	Contraception Due Morning Monitoring between 7AM-10AM If needed to AM use Gonadotropin (injectable stimulation) PM: FSH 300 And Menopur 150 Painful: Discontinue Painful: Discontinue (do not)	AM: FSH 300	AM: FSH 300	AM: FSH 300	2nd Morning Monitoring Visit Do not take injections in AM, return to NYULFC between 7-10AM. Wait for instructions. Painful: Discontinue Painful: Discontinue (do not)	Possible Morning Monitoring Visit Painful: Discontinue (do not)
		PM: Menopur 150	PM: Menopur 150	PM: Menopur 150		
		Painful: Discontinue Painful: Discontinue (do not)	Painful: Discontinue Painful: Discontinue (do not)	Painful: Discontinue Painful: Discontinue (do not)		
Cycle Day 8	Cycle Day 9	Cycle Day 10	Cycle Day 11	Cycle Day 12	Cycle Day 13	Cycle Day 14
Possible Morning Monitoring Painful: Discontinue Painful: Discontinue (do not)	Possible Morning Monitoring Painful: Discontinue Painful: Discontinue (do not)	Possible Morning Monitoring Painful: Discontinue Painful: Discontinue (do not)	Possible Morning Monitoring Painful: Discontinue Painful: Discontinue (do not)	Ovulation Trigger eg. mixed in 24 to 36 hours Painful: Discontinue Painful: Discontinue (do not)	Monitoring No medications Painful: Discontinue Painful: Discontinue (do not)	Egg Retrieval Painful: Discontinue Painful: Discontinue (do not)
Cycle Day 15	Cycle Day 16	Cycle Day 17	Cycle Day 18	Cycle Day 19	Cycle Day 20	Cycle Day 21
Painful: Discontinue Painful: Discontinue (do not)						
Cycle Day 22	Cycle Day 23	Cycle Day 24	Cycle Day 25	Cycle Day 26	Cycle Day 27	Cycle Day 28

FERTILITY CENTER at NYULFC
100 First Avenue, 27th Floor, New York, NY 10003 • P: (212) 263-6880 • F: (212) 263-7653 • www.nyulfc.com • Form 80048-Rev 07/20/2017
Page 1 of 2

The cycle calendar pictured above and included in your information packet is a generic guideline and will change as your cycle progresses.

On Day 2 of your menstrual cycle, you will receive an appointment to visit our office between the hours of 7AM – 10AM for your “Day 2 Cycle Start.”

At your Day 2 visit, you will receive bloodwork and an ultrasound.

Following your Day 2 visit, you will receive a phone call with instructions from a nurse. The nurse will notify you if you can begin injectable medications that evening.

Your medications, the dosage, and the number of days until you return for your second morning monitoring visit have been predetermined by your doctor.

After your second morning monitoring visit, you will receive another phone call with instructions from a nurse, as your medication dosage may change throughout your cycle depending on your body's individual response to the medications.

Ready to Start?

Please call your Patient Coordinator between 8AM-4PM on the day prior to your:

- Day-2 start date for an IVF or FET cycle
- Day-1 Microdose Lupron® start date
- Day-21 Lupron® start date

Information to Share

When calling, provide your **name** (spell it out, please!), **date of birth**, **treating physician**, and **cycle type** (Egg Freeze).

Notifying us prior to your cycle start will allow our team to prepare your chart before you arrive.

Morning Monitoring at NYULFC

When & Where

Morning Monitoring services, including bloodwork and ultrasound, are available at both offices (Main Office & NoMad Satellite).

Morning Monitoring occurs between **7AM – 10AM**, 7 days per week.

Appointments are required for morning monitoring.

Afternoon Call-Backs

Expect a phone call from a nurse during the afternoon following your morning monitoring visit.

Please provide us with the best phone number (with voicemail!) to reach you between 12PM – 5PM.

Please follow all instructions delivered by your nurse.

Contact Information

Questions?

Please call the main office at
212-263-8990.

The best time to reach our nursing staff is between 10AM – 5PM ET.



Onsite Safety & COVID-19

NYULFC and the NYU Langone Health system are managing COVID-19 risks together, and the safety of our patients and staff is our top priority.

If you are experiencing a medical emergency, please call 911. If you are not feeling well, please do not come to the office. Please seek treatment from your primary care provider, and contact your NYULFC nurse to inform us of your illness. Your physician will collaborate with you to determine the appropriate next steps in your care plan.

At NYULFC, we are utilizing all guidance available from ASRM, the CDC, the New York State Department of Health, and NYU Langone Health to institute safety precautions. Please be aware of new social distancing and safety practices at NYULFC.

1) Masks are mandatory.



All patients and staff are required to wear a mask while onsite. Please plan to arrive wearing your mask, and please keep your mask on for the duration of your visit.

2) Appointments are required.

In order to reduce the number of individuals in our waiting areas, each patient will receive an appointment for morning monitoring. To protect the safety of our patients and staff, patients will only be allowed to enter the Center during their scheduled appointment.

3) Guests are not permitted.

To minimize the number of individuals onsite, only the scheduled patient will be admitted to the facility. All patients visiting NYULFC for morning monitoring, bloodwork, or imaging scans must attend without any visitors present. Children are not permitted onsite. We apologize for any inconvenience. We are committed to protecting the safety of our patients and staff by limiting the number of individuals in our space.

4) All patients will be screened for temperature and health at entry.

Every individual entering NYULFC will be required to pass a temperature screening and will be screened for COVID-19 related symptoms. We regret the necessity of this intrusion upon your time.

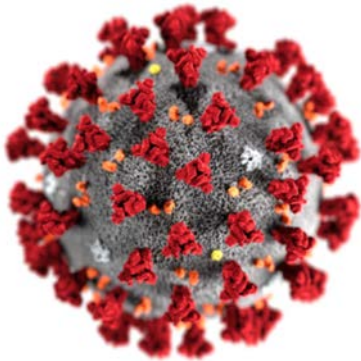
5) Cycle Disruption Policy

If an individual demonstrates symptoms of COVID-19 related illness during a treatment cycle, or if the individual is mid-cycle and tests positive for COVID-19, the cycle will be cancelled or suspended.

If this cancellation or suspension occurs prior to retrieval, we will issue a credit balance in accordance with services rendered during the cycle. Credit balances will be established on a case-by-case basis. We are not able to extend credit toward products or services provided by third parties (products or services provided by third parties include but not limited to medications, phlebotomy, anesthesia, genetic testing, tissue storage fees, etc).

ALERT: Mandatory COVID-19 Testing

COVID-19 Test Requirement



Who & Why?

On June 14th 2020, New York State issued new guidelines mandating that all office-based surgery practices must perform COVID-19 testing on patients **within 5-days prior** to the office-based procedure.

No COVID-19 test = no procedure.

This will apply to NYULFC patients undergoing oocyte retrieval, D&C, or TESE.

When & Where?

All patients must download the NYU MyChart application.

Your physician will order a COVID-19 viral test for you using MyChart. You will log-in to your MyChart account to schedule your COVID-19 test at an NYU testing center.



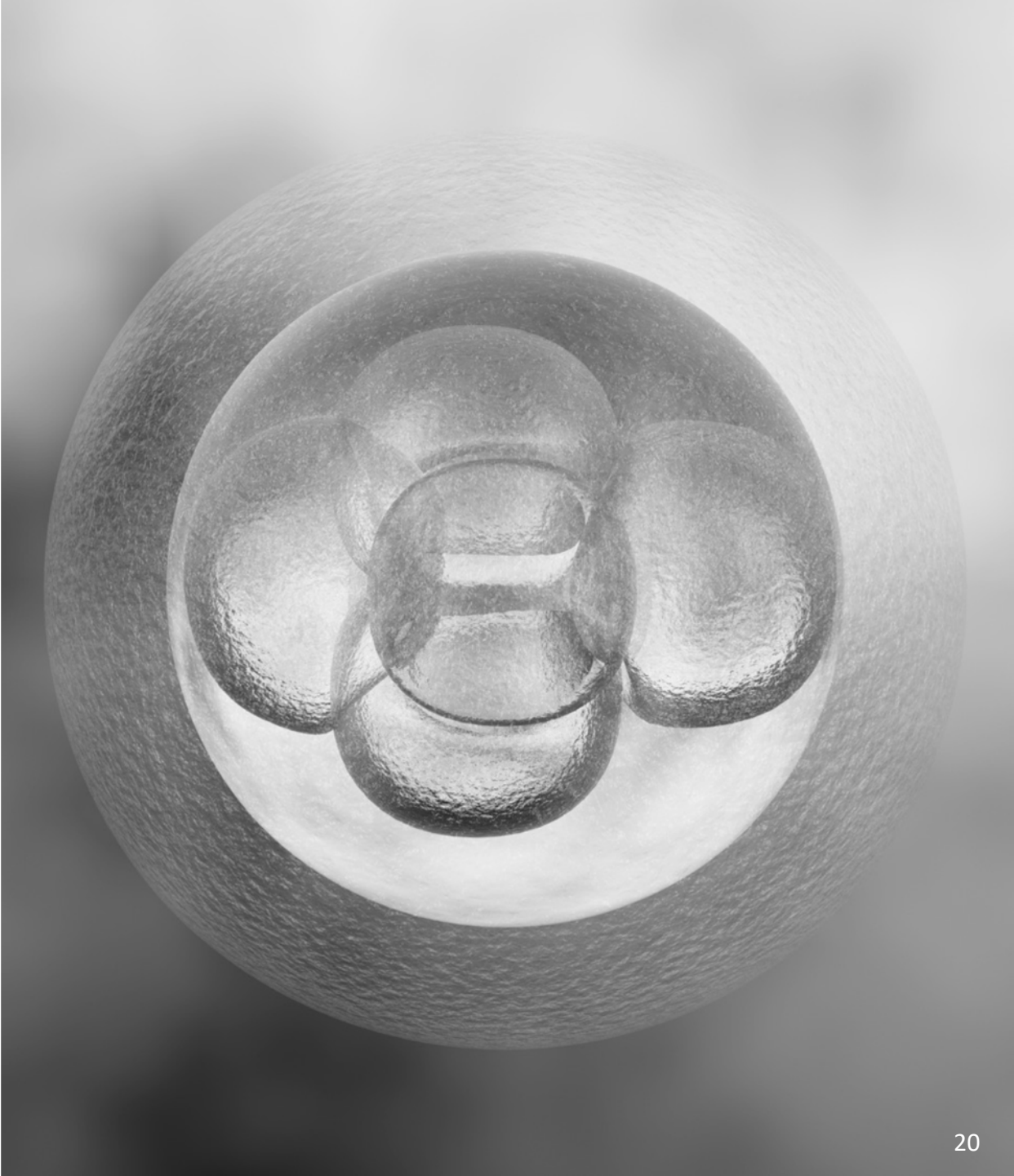
iOS: apps.apple.com/us/app/nyu-langone-health/id1196929294

Android: play.google.com/store/apps/details?id=org.nyulmc.clinical.mychart&hl=en_US

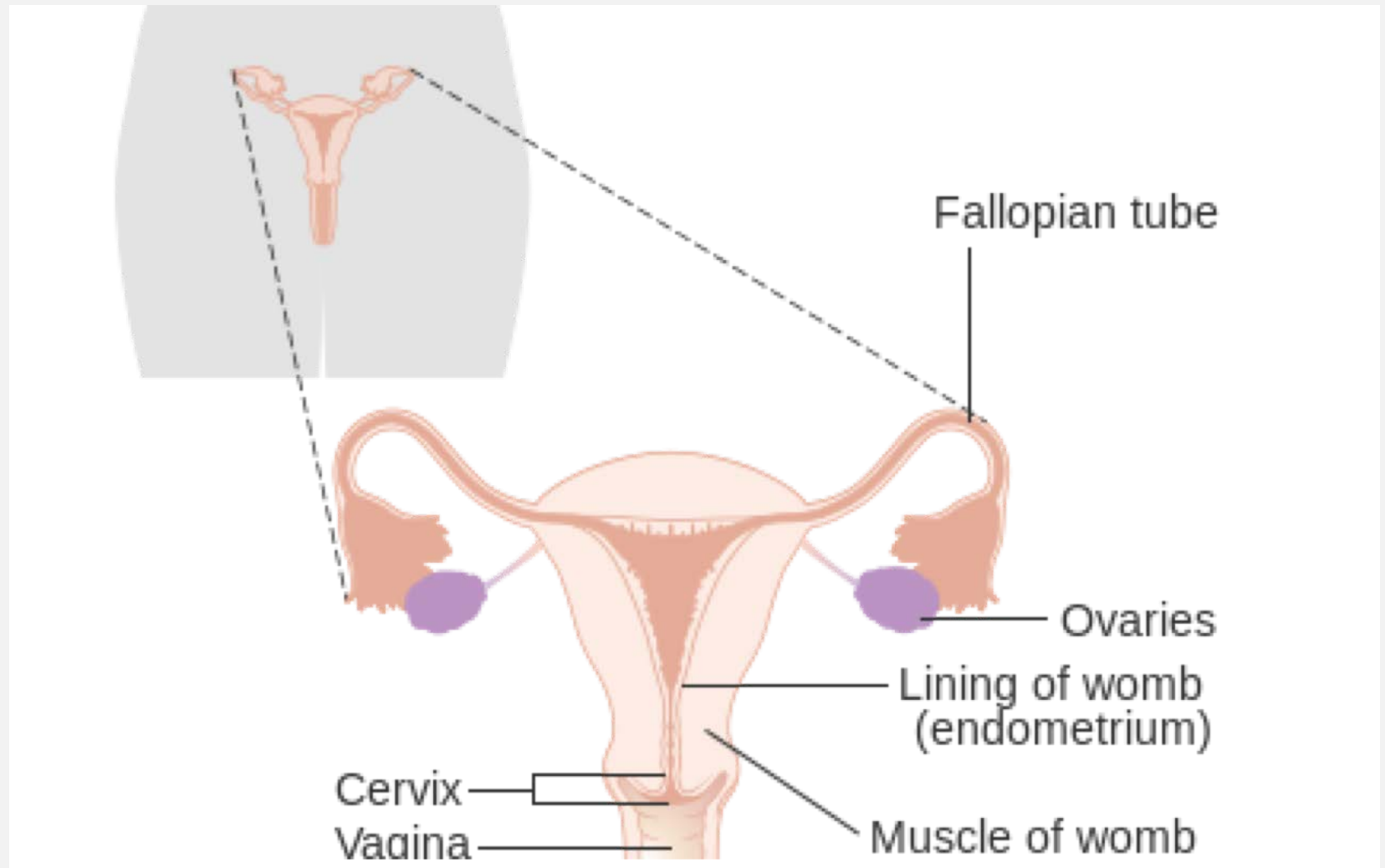


Section 2: The Egg Retrieval Process

Ovulation Induction & Oocyte Retrieval.



The Female Reproductive System



Egg Freezing Medications

Day 2 Start

The decision to start medication is based on Day 2-Day 3 blood tests and ultrasound results, as well as approval from the insurance carrier.

If you purchase your medications in advance, and your cycle is cancelled, you will not be able to return medications to the pharmacy.

If stored properly, medications can usually be stored safely for one year.

Insurance Coverage

If you do not have insurance coverage, please notify an IVF nurse of your pharmacy of choice and when you would like the medication order to be placed.

If you have insurance coverage, we must abide by the carrier's guidelines as to drug selection, dosage, and location of pharmacy. Please arrange for pick-up/delivery of your medications ahead of time, especially if your carrier requires a mail-order pharmacy.

Medication Types

Gonadotropins
(FSH, HMG)

GnRH Antagonists

GnRH Agonist

**Ovulation
Trigger Shot**



Medication Pricing

Scan here to access discounted medication pricing available for NYULFC patients at **Apthorp**, **Metro Drugs**, and **Schrafts** specialty pharmacies:



Please review the specialty pharmacy sheet, located in your NYULFC patient information packet.

Please be sure to review your medications and store them appropriately.

Gonadotropins (FSH, HMG)

Purpose:

Gonadotropins are used to stimulate the ovaries to mature multiple follicles simultaneously.

Types:

- FSH – Gonal F® or Follistim® administered via the “Pen”
- HMG – Menopur® administered via subcutaneous injection with the short needle

Possible Side Effects:

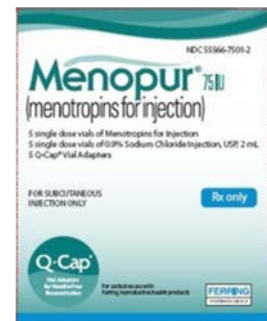
Breast tenderness, rash or swelling at injection site, mood swings, depression, abdominal bloating or discomfort, hyperstimulation syndrome (<1%)

Special Instructions:

Once you begin ovarian stimulation using gonadotropins, limit exercise to walking. Stay well hydrated, and eat plenty of protein.

Please Note:

Gonal F® and Follistim® are the same medication (different manufacturers). You may be required by your insurance carrier to use a specific medication. If NYULFC does not participate with your insurance, you may wish to shop around for either medication from several pharmacies to find the lowest price. It is best to do this in advance, then tell us where you would like us to send your prescription.



GnRH Antagonists

Purpose:

GnRH Antagonists are used to suppress the release of luteinizing hormone (LH), which helps to prevent premature ovulation.

Types: Cetrotide® or Ganirelix Acetate®

Administration:
Subcutaneous injection

Cycle Day Started:

Typically, patients begin GnRH Antagonists between Cycle Day 7-9, depending on the individual's response to gonadotropin injections. Once begun, this medication is continued up to and including the day of the trigger shot.

Possible Side Effects: (Incidence <5%)

Abdominal bloating, bruising or reaction at injection site, headache, nausea, vaginal bleeding.

Please Note:

Please notify nurse if you have a latex allergy.

GnRH Agonist

Purpose:

The GnRH Agonist is used to suppress the natural hormone cycle and to prevent premature ovulation.

Types: Lupron® (Leuprolide Acetate)

Administration:
Subcutaneous injection

Cycle Day Started:

Usually begun on Cycle Day 21 of the cycle prior to gonadotropin treatment, however this depends on your normal menstrual cycle length. Menses usually follow in 8-10 days post-injection.

Possible Side Effects:

Bloating, bruising at injection site, hot flashes, headache, mood swings, insomnia, vaginal dryness. Most of these effects happen only after menses has occurred.



Ovulation Trigger Shot

Purpose:

The trigger shot mimics the natural surge of lutenizing hormone (LH) in the body and matures the oocytes (eggs).

Types: Ovidrel® (Human Chorionic Gonadotropin – hCG)

Administration: 2 subcutaneous Ovidrel® injections must be taken **within 10 minutes of the scheduled time and in the exact dose instructed**. Failure to perform the trigger shot appropriately may result in the cancellation of the egg retrieval. **(PLEASE – SET YOUR ALARM CLOCK!)**



Possible Side Effects:

Headache, bloating, irritability, pain at the injection site, ovarian hyperstimulation syndrome.

Please Note:

Ovidrel® is a controlled substance in New York State and only certain pharmacies will dispense the drug. Please check to confirm if your pharmacy can accept an electronic prescription for Ovidrel®/hCG.

Alternate Ovulation Trigger

Purpose:

Your trigger medication will be decided based upon your response to the stimulation medications. While most cycles are triggered using Ovidrel®, if your physician deems it appropriate, you may receive instructions for Lupron® (Leuprolide Acetate) or Lupron® plus hCG/Ovidrel® instead of hCG/Ovidrel® as the trigger to cause the final maturation of the eggs.

Administration:

Subcutaneous injection. If Lupron® is used as a trigger, it will be administered as a 40 units dose and the Ovidrel® dose may be lowered.



If you do not have insurance coverage for medications (“self-pay”), we recommend waiting to buy the trigger injection until it is clear which type will be needed.

Medication Teaching Videos

Brand Names	Medication Type	Purpose	Training Video
Gonal-F or Follistim	Gonadotropin (FSH)	Ovarian Stimulation	Gonal-F: https://www.youtube.com/watch?v=K_MvNC3y1t0 Follistim: https://www.youtube.com/watch?v=0iz5zu13Gnk
Menopur	Gonadotropin (HMG)	Ovarian Stimulation	Menopur: https://www.youtube.com/watch?v=HBrRpb436A0
Cetrotide or Ganirelix Acetate	GnRH Antagonist	Prevent Premature Ovulation	Cetrotide: https://www.youtube.com/watch?v=UZIMyra_WNc Ganirelix: https://www.youtube.com/watch?v=m1pDSK-1pHM
Ovidrel or Pregnyl or Lupron	Trigger Injections	Mature follicles & release eggs (TIMED CAREFULLY!)	Ovidrel: https://www.youtube.com/watch?v=mmD_Fi4LcS0 Pregnyl: https://www.youtube.com/watch?v=RtC49jsxcUc
Doxycycline, Ciprofloxacin	Antibiotic	Prevent any infection of embryo upon fertilization	If you are doing an embryo banking cycle (not an egg freezing cycle), your male partner may be prescribed a 10-day course of antibiotic tablets, taken orally

Oocyte Retrieval

The oocyte retrieval procedure is scheduled
34-36 hours
after the ovulation trigger.

You cannot eat or drink within 6 hours of your egg retrieval.



Do not take aspirin, NSAIDs (Motrin, Aleve, Advil, Naprosyn) or any medication, herb or other substance that can interfere with platelet function during your treatment cycle. Doing so will increase your risk of having a bleeding complication from the egg retrieval.

You will be introduced to the anesthesiologist who will administer intravenous sedation. The egg retrieval procedure generally takes
5-10 minutes
and you will be sedated for the duration of the procedure.



Recovery typically takes
1 hour

but can be longer depending on your body's response to anesthesia. During this time, you will be evaluated for pain and given post-operative instructions.

Because you will receive anesthesia, you **must be discharged to the care of an adult escort who will bring you home safely.**



No escort?
No retrieval.
No kidding.

This is a safety measure mandated by NYU Medical Center.



Oocyte Retrieval:
Complete!

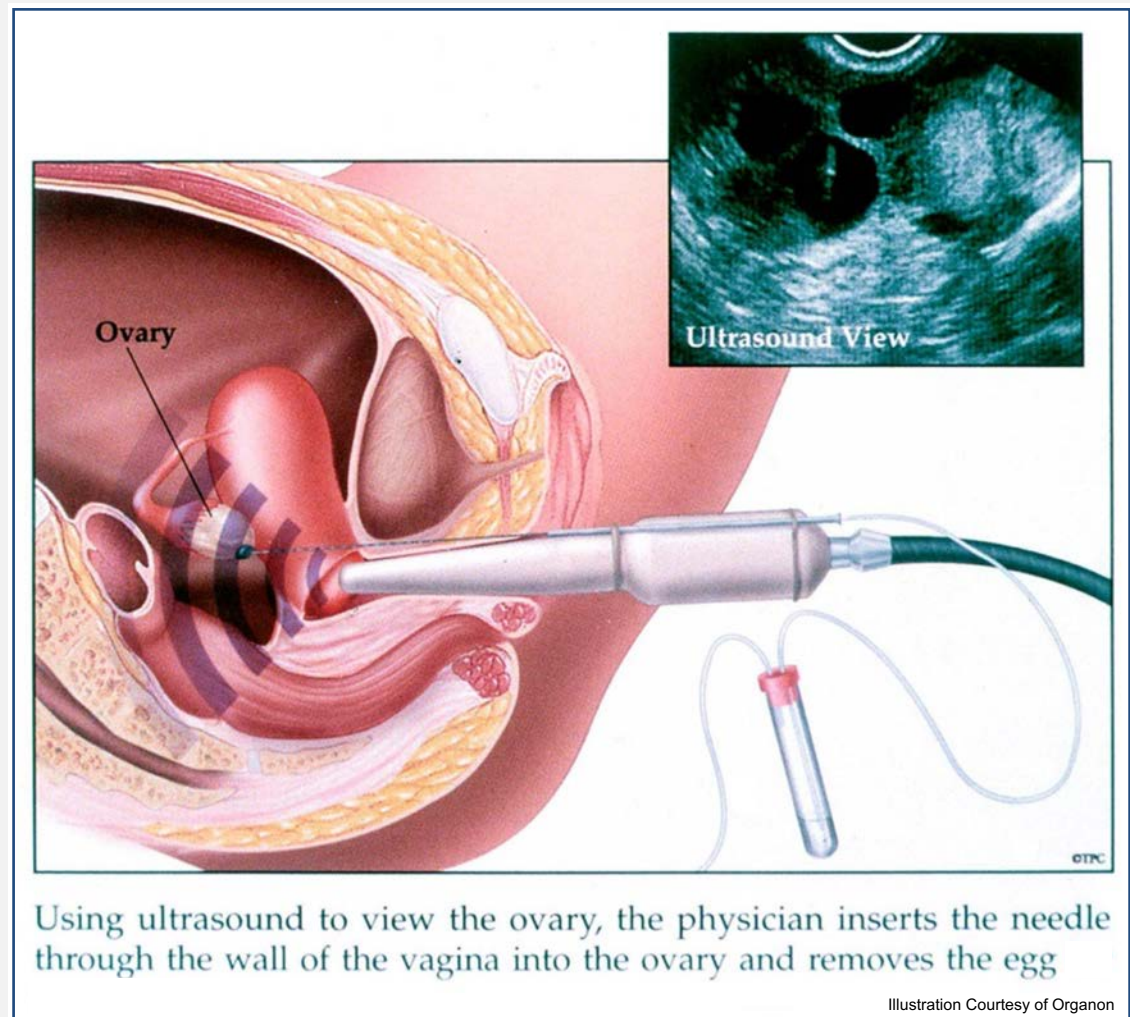
Plan to rest at home for the full day of your egg retrieval.



Oocyte Retrieval: Reminders

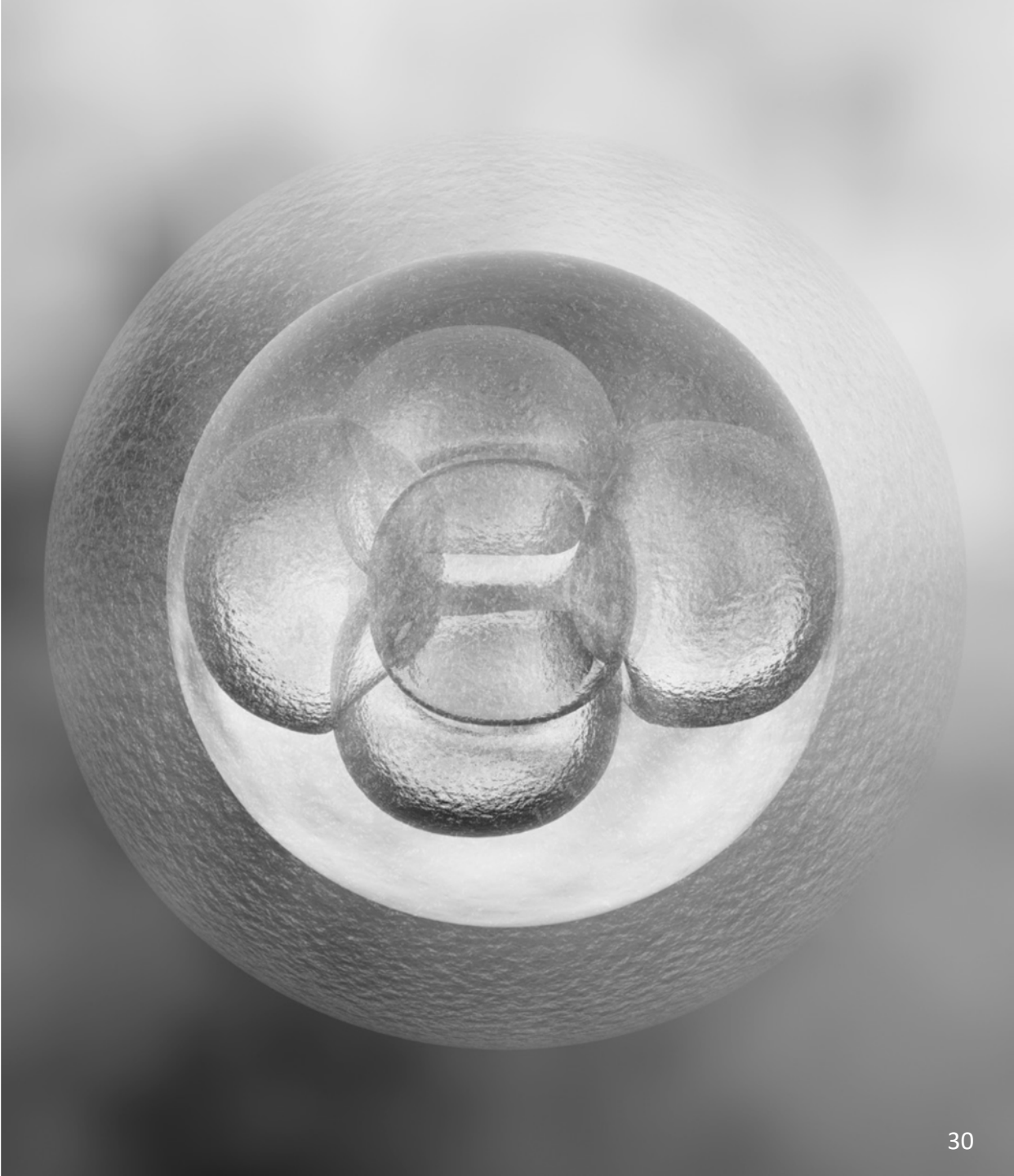
- Retrievals begin around 9:30AM ET each day. Retrievals are scheduled approximately every 30 minutes until all are completed.
- Your retrieval will occur 34-36 hours after your trigger injection. Your trigger injection must be taken within 10 minutes of the scheduled time and in the exact dose instructed. **Please set your alarm clock for your trigger injection!**
- When you wake up on the morning of your scheduled egg retrieval, please remember that you cannot eat or drink within 6 hours of your egg retrieval. If directed, take your medications with a sip of water.
- Small lockers are available onsite, but please do not bring any valuables. Come as you are! Please do not wear jewelry or make-up to your egg retrieval procedure.
- When you arrive at 660 First Avenue, you will check in on the 5th floor in our main reception area. You will then be directed to the 6th floor where our procedure room is located. Our nursing team will perform an intake evaluation and prepare you for the egg retrieval. You will be introduced to the anesthesiologist who will administer intravenous sedation. The egg retrieval procedure typically takes 5-10 minutes. You will be sedated for the duration of the procedure. Recovery generally takes 1 hour, but can be longer. During the recovery period, you will be evaluated for pain and given post-operative instructions.
- Because you will receive anesthesia, you must be discharged to the care of a responsible adult who will bring you home safely. This is a safety measure mandated by NYU Langone Medical Center and AAAASF. **No Escort. No Retrieval.**
- Plan to rest at home on the day of the egg retrieval. Congratulations on making a plan to achieve your future family-building goals! The day after your retrieval, we will call you to share the final number of mature eggs cryopreserved, and will review the cryostorage plan for your eggs. During your next conversation with your physician, you will discuss the outcome of this retrieval and review your care plan.

Oocyte Retrieval



Section 3: Cryopreservation

**Oocyte
Cryopreservation
("Egg Freezing")**



Oocyte Cryopreservation

At retrieval, eggs are evaluated by an embryologist.

Mature eggs are frozen using liquid nitrogen in a process called “vitrification.”

The process of **vitrification** has three critical components: first, eggs are exposed to high concentrations of cryoprotectants to allow rapid dehydration of cells; then the eggs are loaded into tiny storage straws that will facilitate ultra-rapid cooling; finally, the straws containing the eggs are cooled as fast as possible, typically at thousands of degrees per minute.

Once frozen, eggs can be stored indefinitely in liquid nitrogen at -180°C .

Frozen eggs are stored onsite at NYU Langone Fertility Center. All NYULFC patients will receive an account with our tissue management partner, Embryo Options.

Patients may log in to the Embryo Options portal at any time to manage their cryostored tissue (online education, appointment requests to use cryopreserved eggs, online bill-pay, disposition management, and more). **If you wish to use your tissue, contact your Patient Care Coordinator to start a new cycle.** If you wish to transport your tissue elsewhere, transport fees may apply. If you wish to discard your tissue (meaning you do not wish to use the tissue), you can complete your tissue disposition consents in Embryo Options.



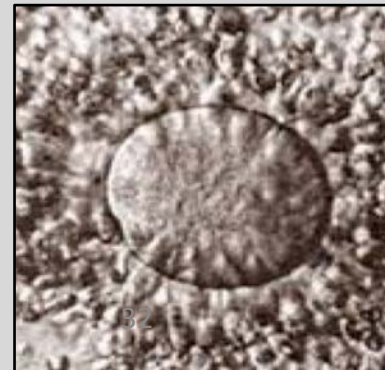
After Your Egg Retrieval...

Plan to rest at home on the day of the egg retrieval. Coconut water, PJs, and Netflix are your friend.
Do: Rest & Relax! *Don't:* Operate heavy machinery.

The day after your retrieval, we will call you to share the final number of mature eggs cryopreserved. During your next conversation with your physician, you will discuss the outcome of this retrieval and review your care plan.

Your next menstrual period will occur approximately two weeks after the egg retrieval if an Ovidrel trigger shot was administered and one week after if a Lupron® trigger shot was administered.

You must keep our office informed of your current address, email address, and telephone number. If the office is unable to contact you via phone or mail for necessary correspondence, your eggs may be discarded. Please update us if/when your contact information changes!



Egg with surrounding cells immediately after retrieval



Mature egg with surrounding cells removed



All NYULFC patients will receive an account with our tissue management partner, **Embryo Options**.

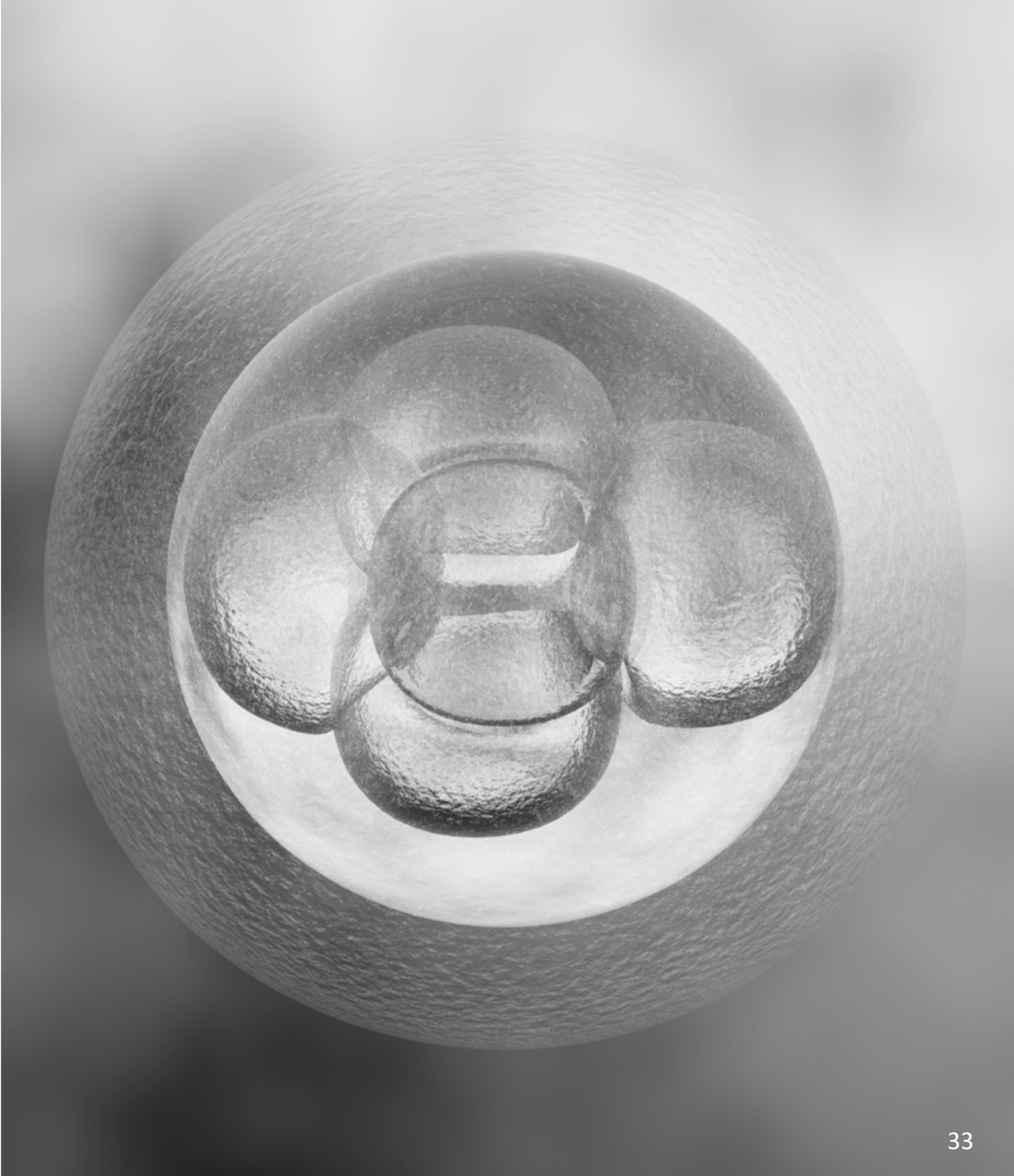
Patients may log in to the Embryo Options portal at any time to manage their cryostored tissue (online bill-pay, appointment requests to use cryopreserved eggs, online education, disposition management, and more).

Learn more at: nyulangone.embryooptions.com/About.aspx 32



Section 4: Wellness

Wellness & Support for NYULFC Patients



Mind & Body Support

Acupuncture Services



Acupuncture services are provided by Lara Rosenthal, L.Ac.

Acupuncture is offered onsite at NYULFC 4 days per week.*

Acupuncture can be safely used prior to and concurrently with fertility medications and procedures.

If you are interested in acupuncture for fertility, please call 212-807-6769.

(*This service is temporarily suspended due to COVID-19.)

Mind-Body Support Group



NYULFC patients have access to a Mind-Body support group provided by Helen Adrienne, LCSW, BCD.

Mind-Body support is offered as a series of individual classes, a one-day group program, or on an individual consultation basis.

The main goal of Mind-Body support is to help patients realize that while they cannot control infertility, they can control how they navigate it.

If you are interested in Mind-Body support, please call 212-758-0125.

Yoga for Fertility



Yoga for Fertility is provided by Barrie Raffel.

Yoga for Fertility is safe to practice at any time during your fertility treatment cycle.

If you are interested in Yoga for Fertility, please contact Barrie at barrieraffel@earthlink.net.

Nutrition for Fertility

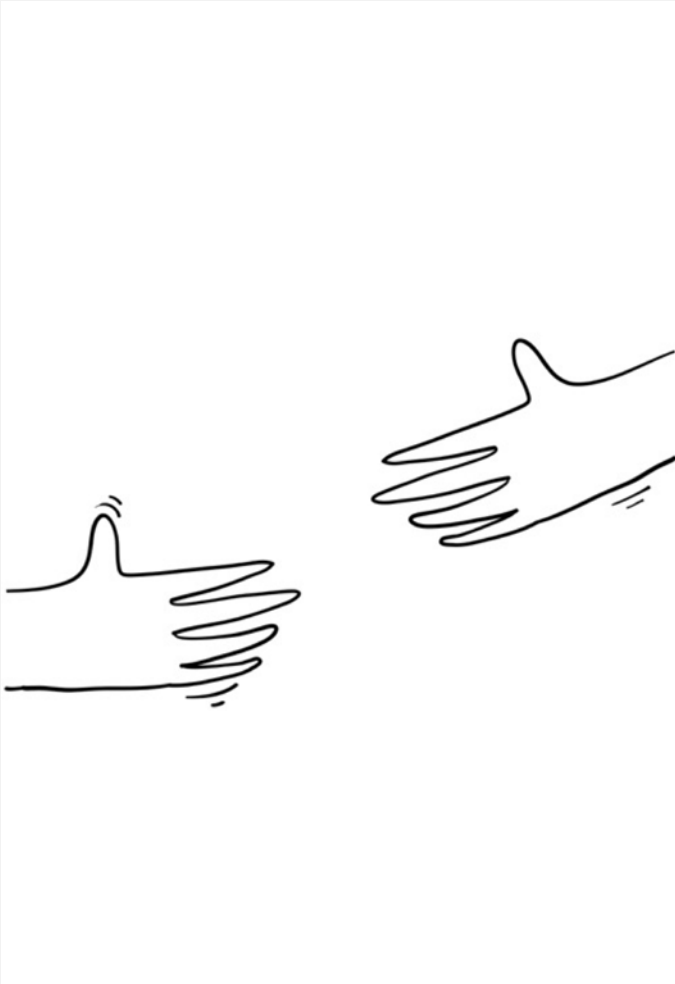


Nutrition for Fertility is provided by dietitians at Rooted Wellness.

Nutrition for Fertility can be started at any time during your fertility treatment cycle.

If you are interested in Nutrition for Fertility, please email sarah@rootedwellness.com (Sarah Rueven) or claire@rootedwellness.com (Claire Virga).

Psychological Support Services



NYULFC patients have access to onsite and offsite psychologists, all of whom have decades of experience helping couples to navigate the stressors created throughout the fertility treatment journey.

Consultations, treatment, and support sessions are available for couples and/or individuals.

Consultations are mandatory for all patients using donor gametes.

If you are interested in psychological support, please call 212-263-0054 for information or to book your appointment.

Information & Support

We recognize that you have a choice in care providers, and we are committed to providing compassionate, individualized, and cost-effective service.

We're happy to go at your pace and answer any questions you may have. Ask questions during your visits, or call us at **212-263-8990**. We're here for you.

Information resources are available online at

- ASRM.org
- Resolve.org
- SART.org
- cdc.gov/art

Visit our website at www.FertilityNY.com for more information, including a **Patient Resources section** with patient forms, orientation slides, and Injection Training videos.

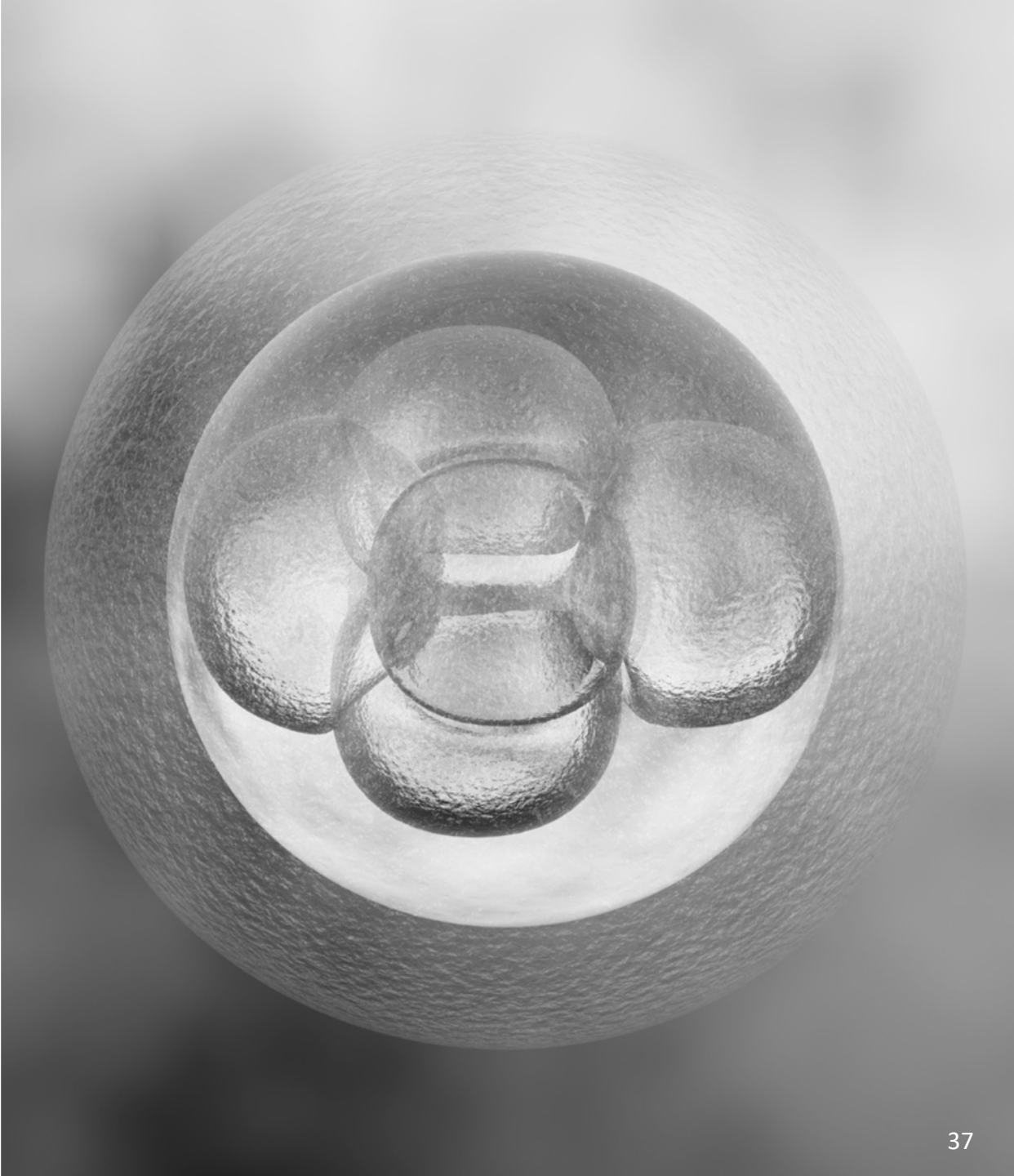
Issues to Consider Before Beginning an Egg Freezing Cycle: Potential Health Risks & Side Effects of Egg Freezing

- Severe ovarian hyperstimulation (OHSS) which can result in hospitalization.
 - Depending on a woman's sensitivity to fertility medications, moderate to severe hyperstimulation can occur, and may require frequent monitoring or changes to the cycle, including cancelation or postponement of the embryo transfer, or hospitalization.
 - Please call our office immediately if you feel very bloated or have a rapid weight gain. Consult the OHSS information sheet in your patient information packet for details.
- Adverse reaction to medications
 - Allergic reaction to anesthesia or fertility medications.
 - Anesthesia medication may cause constipation. Colace® is available over-the-counter for this side effect.



Section 5: Research

Research Studies & Participation Options





Research Studies at NYULFC

NYULFC is dedicated to the mission of advancing science and improving healthcare through scientific discovery.

As a leading center in academic research, our faculty and staff are actively engaged in multiple research studies at any time which we hope will advance and improve infertility benchmarks and fertility treatment options.

The purpose of our sample collection and repository is to enable the research use of superfluous biospecimens, which are not needed for diagnostic or clinical use, and which would otherwise be discarded

Participation in research studies is voluntary, which means it is your choice if you would like to participate or not. Your decision as to whether or not to participate will not affect the care you receive during your treatment cycle.

Providing consent for research does not impact your medical treatment in any way. Research consents must be witnessed by an NYU Langone Fertility staff member.

Our research studies follow a transparent process of independent Institutional Review Board (IRB) evaluation and careful informed consent. The IRB reviews all proposed studies and ensure that they are conducted in a manner which safeguards and promotes the health and welfare of subjects.



Research Studies at NYULFC

The goal of our research is to optimize fertilization, embryo development and culture, in vitro maturation, cryopreservation, understanding egg and embryo viability as well as other clinical indications of infertility.

Our research studies use biological material (procedural by-products, non-viable specimens or materials deemed non-usable to create live-born pregnancies) from your cycle that would normally be discarded during the routine course of your cycle.

Discarded biological materials may include collection of minimal residual sample from sperm preparations, granulosa cells, cumulus cells, fluids from the ovarian follicles that are harvested during oocyte retrieval, immature oocytes, abnormally fertilized oocytes or embryos of such poor quality that are not suitable for transfer.

Tissue donated to research is never transferred to human subjects. NYULFC will only collect, use, and store de-identified specimens that are donated for research. Donated research specimens – including DNA material – will not be used to identify patients and will be destroyed once research has been done.

Research conducted using these otherwise discarded biological materials will help us learn more about factors of fertility and infertility in order to better understand various reproductive disorders.

If you have questions about the research or your participation,
please e-mail the senior clinical research coordinator at

Fang.Wang@nyulangone.org

Questions?



E: Haley.Penny@nyulangone.org



T: 212-263-8990



F: 212-263-7853

