



The
Fertility
Centre



Welcome

The Fertility Centre, Liverpool

Supporting you throughout every stage of your journey

The Fertility Centre brings together a team of highly experienced fertility experts; including specialist fertility doctors, nurses and scientific staff. Working together, we provide affordable IVF to help you achieve your dream of having a baby.

At The Fertility Centre, we believe that everyone should have the opportunity to access 'a little extra' help with starting their family, without the financial strains often associated with IVF treatment or long waiting lists.

We do this through our simplified and standard approach to IVF treatment,

whilst still maintaining high quality care for our patients. With The Fertility Centre, the family you've always wanted could now be within reach.

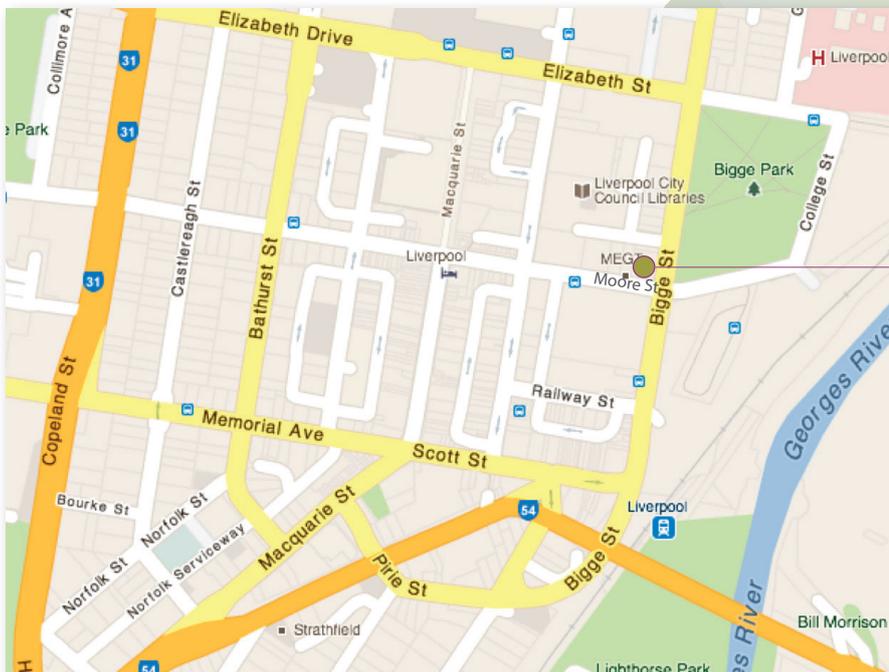
Located in Liverpool, in Sydney's South West, The Fertility Centre offers:

- Comprehensive fertility investigations and assessment (both male and female);
- Fertility diagnosis and affordable IVF and ICSI by experienced fertility specialists;
- A trusted referral to the full service clinic, IVFAustralia,

if standard IVF or ICSI are not the preferred treatment for you.

The Fertility Centre is open
7am – 4pm
Monday to Friday

T (02) 8797 4000
thefertilitycentre.com.au



The Fertility Centre
Suite 301 | Level 3
1 Moore St Liverpool NSW 2170
Enter from Bigge St

Car parking available behind
the clinic

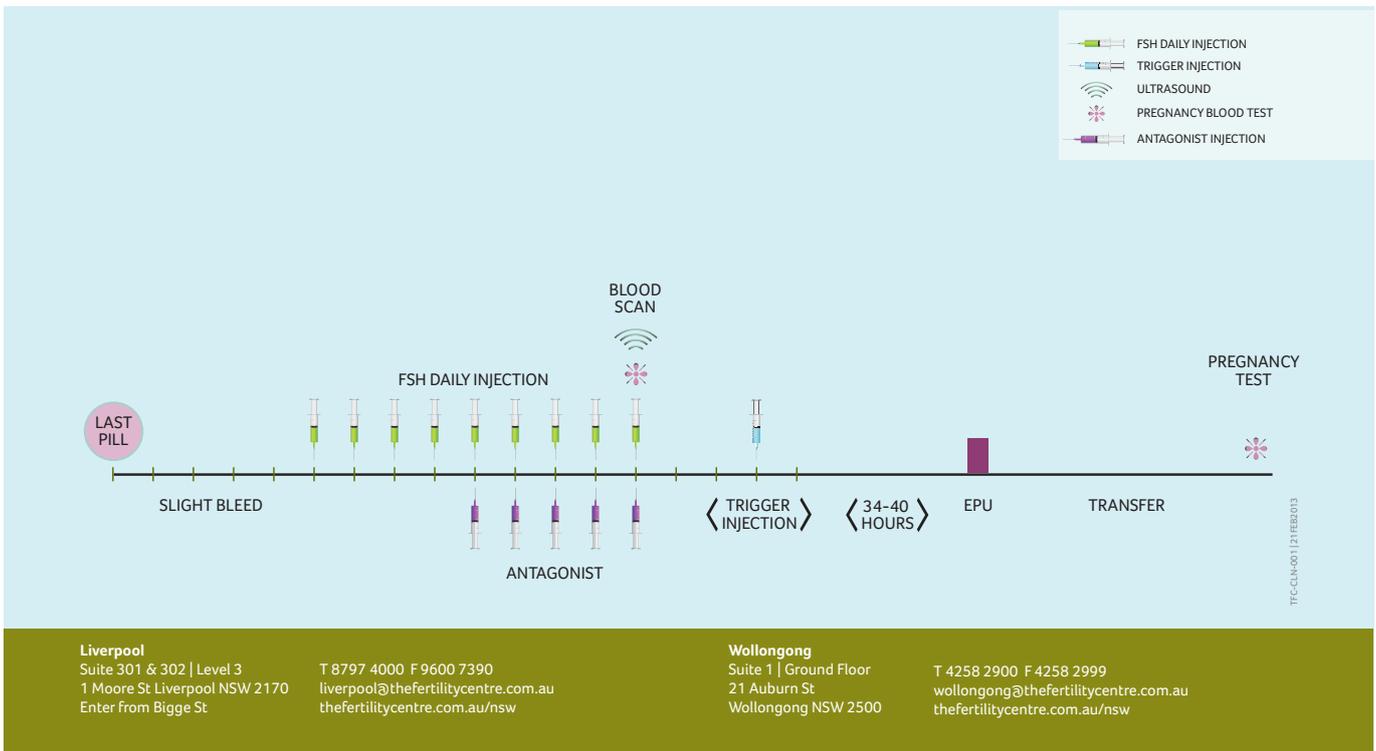
liverpool@thefertilitycentre.com.au
T (02) 8797 4000
F (02) 9600 7390



The
Fertility
Centre

In Vitro Fertilisation (IVF) & Embryo Transfer (ET)

Patient's guide to fresh IVF treatment



Commencement on the oral contraceptive pill

Before we stimulate your ovaries it is usually necessary to suppress your own hormonal cycle.

This may be achieved using the oral contraceptive pill. Sometimes you are put on the pill to enable the planning of your medication protocol and the Egg Collection to occur at a determined time.

Stimulation of ovarian follicular growth

Stimulating the ovaries will allow us to collect more oocytes (eggs) increasing

your chances of achieving fertilisation and a subsequent pregnancy. We do, however, need to be very cautious to avoid overstimulation of the ovaries and we will schedule regular blood tests and ultrasounds to monitor your progress.

The hormones given to stimulate egg growth are given by a 'pen' and are injected just under the skin with a very fine needle. We will provide you with all the equipment necessary to perform these injections in the comfort of your own home. Our nurses will teach you how to administer these injections and are happy to supervise your first injections to make sure you are confident with the technique.

For your convenience we will provide you with written instructions on the medications and the technique for administration of these medications. We appreciate that this is difficult for some people and our nursing staff are always available to provide support as needed.

Treatment monitoring

The blood tests will measure your hormone levels and the ultrasound measures ovarian follicle size and number. This reflects your individual response to the Follicle Stimulating hormone injections and allows the clinic staff to see the follicles growing on the ovaries.



The
Fertility
Centre

Egg Collection or "Pick-Up" (EPU)

The procedure to collect the eggs from the ovary is known as TRANSVAGINAL ULTRASOUND EPU. Using a vaginal ultrasound probe the follicles are identified and the needle guided into them. The contents of each follicle are in turn drained and passed to the scientist who identifies the eggs using a microscope. Not all follicles contain a mature or retrievable egg and the number of follicles provides a rough guide only to the number of eggs which can be expected to be found. You can expect to be ready to go home within an hour of the procedure. It would be preferable for you to have a family member or friend to drive you home following the procedure as you will have had light sedation.

Fertilisation of the Eggs

Once eggs are collected, sperm are added to them some hours later. The scientist will arrange an agreed time for a semen specimen to be provided. We may collect sperm before EPU. A dedicated room is available for semen collection. Semen is collected by masturbation, the best sperm isolated, and a controlled number added to the eggs. If you suspect that there will be any difficulty in the collection of the semen PLEASE discuss it with your doctor, nurse, or the scientist BEFOREHAND. There are a number of alternatives to deal with this problem. The eggs are checked the following day for signs of fertilisation. The developing embryos are kept in culture medium until they are transferred back to the woman's uterus.

Embryo transfer to the uterus

Approximately three to five days after the egg collection, dividing embryos can be transferred into the uterus using a fine catheter gently passed through the cervix. The procedure is performed in a matter of minutes and no sedation is required.

No more than one embryo will be transferred. This is to reduce the risk of multiple pregnancy. Your partner is more than welcome to be in attendance at the time of your embryo transfer. Occasionally, if your ovaries have responded excessively to the stimulation and a large number of eggs have been obtained, your doctor may decide that it is unwise to proceed with an embryo transfer due to the risk of developing ovarian hyper-stimulation syndrome (OHSS). In such cases the embryos will be frozen for later use. The Fertility Centre has a separate information sheet on OHSS.

After Embryo Transfer

Normal activities, including intercourse, may be resumed after the embryo transfer. Activities not recommended for pregnant women (like squash or aerobics or anything that can leave you gasping for breath) should probably be stopped, although there is no firm data about this. You should keep up the regular exercise that you are used to, providing it is not strenuous. Try to avoid excessive rises in body temperature.

Maintaining your hormone levels

You will be required to use a Progesterone Supplement (Crinone 8% Vaginal Gel) and or progesterone pessaries until the pregnancy blood test is known. Progesterone is a hormone that maintains your uterus in a receptive state for embryo implantation and pregnancy.



The
Fertility
Centre

Potential problems associated with Assisted Reproductive Technologies (ART)

IVF-ET treatment is complex and problems can arise at each step

1. Inadequate ovarian response to stimulation

Your treatment cycle may be cancelled before pick-up due to unsatisfactory response by your ovaries to hormonal stimulation.

2. No eggs collected

At egg collection it is possible that we may be unable to collect any eggs.

3. Eggs do not fertilise

Sometimes eggs fail to fertilise, this occurs most frequently when the sperm are of reduced quality.

4. Pregnancy rate

Pregnancy rate per cycle can be expected to be up to 40%. Factors such as your age, the number of embryos available for transfer, and the cause of your infertility affect this potential success rate.

5. Pregnancy loss

Sadly, 20% of pregnancies may result in a miscarriage or ectopic pregnancy. This rate will vary according to many factors such as your age, the cause of your infertility, and whether you smoke.

6. Ovarian Hyperstimulation Syndrome (OHSS)

In the mild form of the condition Ovarian Hyperstimulation Syndrome there is lower abdominal pain, nausea and some breathlessness while in the rare severe form the complications can cause serious illness requiring

hospitalisation. This is more frequent in patients who become pregnant.

You should contact the clinic immediately any of these symptoms are seen after embryo transfer.

7. Post-procedure complications following transvaginal egg collection

Occasionally post-procedure complications arise. If any of the following symptoms occur: high temperatures over 38°C, severe pelvic pain which does not settle following pain relief or a vaginal discharge heavier than spotting, it is important to contact the clinic immediately. Please present to the closest accident and emergency centre in the case of an after hours emergency.

8. Multiple pregnancy

Occasionally twins may result from a single embryo transfer if the embryo divides naturally.

9. Congenital abnormalities

The risk of health problems at birth or in the first year of life in children conceived naturally is approximately 4%. However, recent research, carried out in Western Australia and elsewhere, has suggested that, in children conceived after IVF, the risk of health problems at the time of birth is slightly higher at around 5 - 6%. This increase does not appear to affect any specific conditions. It is not clear why this small increase occurs. It may be related to the

processes of creating a child through IVF. Alternatively, it is possible that men and women who find it difficult to conceive naturally, may already be at higher risk of having health problems in their children. At present, it does not seem that variations in IVF, such as sperm injection or embryo freezing have any specific effect on the child. The available data does not currently suggest any long term effects on the child's health. IVF children have been shown to have normal intellectual and physical development and do not appear to be at higher risk of childhood illnesses. New research is, however, going on continually in this area and it is possible that these findings may change with time. If you have any concern about this or consequences of the procedures we encourage you to discuss them with the infertility doctor.

10. Stress and coping

IVF treatment can be extremely stressful. This is normal for most couples and support systems are available. All our team are highly experienced in helping patients cope with the emotional aspects of IVF. Please contact the clinic to discuss this with the friendly nurse coordinators.

We also have an experienced fertility counselling team (all members of ANZICA) to assist couples with emotional or relationship issues which may arise throughout the course of infertility treatment. For enquiries and appointments for this service please ask our team.



The
Fertility
Centre

Your Rights & Responsibilities

As a patient of The Fertility Centre you are entitled to expect:

- An environment that provides the diagnosis and treatment of infertility in a manner that meets recognised standards and practices.
- Awareness of your needs as an individual to be treated with dignity, empathy, and respect for your beliefs and practices.
- Respect for your personal privacy and confidentiality of your personal information except where authorised by you or mandated under law.
- A clear understanding of your diagnosis and proposed treatments, including possible risks, expected outcomes, possible side effects, and likely costs as part of informed consent.
- The right to withdraw consent for a treatment up until the actual time of the treatment.
- The right to request information in writing and copies of any written consent given.
- The right to request access to your personal information.
- The right to lodge a complaint with The Fertility Centre about any aspect of your treatment with The Fertility Centre.
- The right to bring a medical interpreter should you require one.

As a patient of The Fertility Centre it is your responsibility to:

- Provide the doctor and clinic staff, to the best of your knowledge, with accurate personal details, complete information on past and present medical history and treatments received, and details of any current medications that you are taking.
- Ensure that you have, from the doctor and clinic staff, a full understanding of your diagnosis, any proposed treatments, and the likely cost of the proposed treatments.
- Provide the doctor and the clinic with written consent for any proposed treatments.
- Follow all medical and nursing directions given to you and to report any unexpected side effects.
- Treat The Fertility Centre personnel as you would wish to be treated yourself – in a polite, friendly and efficient manner.

Complaints & Compliments

At The Fertility Centre we welcome your feedback; this assists us in improving services to our clients. Please feel free to share your feedback with us by completing a feedback form that is available in the reception waiting area at The Fertility Centre.

We will endeavour to solve problems as they arise. If you are not satisfied with our service, attitude or management, please feel free to discuss your issues with any member of The Fertility Centre personnel.

In the event you wish to lodge a formal complaint please submit this in writing addressed to The Fertility Centre.

Each complaint will be investigated by the Operations Manager and Medical Director who will respond to the complainant following a review of the complaint.

If you feel that your complaint has not been resolved to your satisfaction, you may wish to contact the Health Quality and Complaints Commission. The Health Quality and Complaints Commission is an independent organisation that review and investigate health complaints.



The
Fertility
Centre

Your Privacy - Our Privacy Policy

Our approach to your privacy

The provision of quality health care is our principal concern. It requires a doctor-patient relationship of trust

and confidentiality. The treatment of infertility involves a multi-disciplinary team of doctors, nurses, scientists and counsellors working towards the desired outcome. All require some degree of access to your personal information which they regard as confidential and only collected with your consent.

Your personal information is handled in accordance with our privacy policy and in compliance with privacy legislation. You are entitled to know what personal information is held about you, how you may access it, why it is held, how it is used, to whom it may be disclosed and when consent is required for this purpose.

Every effort will be made to discuss these matters with you at the time that the information is collected and this pamphlet is designed to summarise the policy to enable you to fully understand it.

Collection, use & disclosure of your information

Information about your medical and family health history is needed to provide the most accurate diagnosis and appropriate treatment. Most of the information will be collected directly from you. Should we receive information about you from others we will endeavour to inform you that we have received this information.

A quality assisted reproduction program requires appropriate knowledge of your health information by all members of the team. Some information is also provided to Medicare and private health funds, if relevant, for billing and rebate purposes. Our accrediting body, the Reproductive Technology Accreditation Committee (RTAC) and its agents also have access to your records to validate the appropriateness of your treatment. Members of RTAC and its agents sign a confidentiality agreement with The Fertility Centre to protect your privacy.

As a condition of its accreditation The Fertility Centre is obliged to release de-identified details of your treatment to the Australian and New Zealand Assisted Reproduction Database, and this information may be further supplied to other government and statutory bodies.

The diagnosis and treatment of infertility involves two partners. It is our policy to disclose all information to both partners.

There are circumstances where your doctor is legally bound to disclose personal information. Examples include the mandatory reporting of communicable diseases and the provision of details of your treatments (without your name) to the national infertility statistics database.

Your access to the information

You have a right to access your information. You may view it or ask for a full or partial copy of it. In rare circumstances access may be denied in which case you would be given a reason and have a right of appeal. Depending on the nature of the access a charge may be payable where the clinic incurs costs in providing access.

If you find that the information held on you is not accurate or complete it is your right to have the information amended accordingly. Upon your request, health information held about you by The Fertility Centre will be made to another health service provider.

It is important to us that your expectations about the way that we handle your information are the same as ours. Please do not hesitate to discuss any issues related to the privacy of your information with the doctors or any member of The Fertility Centre staff.

Information on support & counselling services

All our team are highly experienced in helping patients cope with the emotional aspects of IVF. We also have an

experienced fertility counselling team (all members of ANZICA) to assist couples with emotional or relationship issues which may arise throughout the course of infertility treatment. For enquiries and appointments for this service please ask our team.



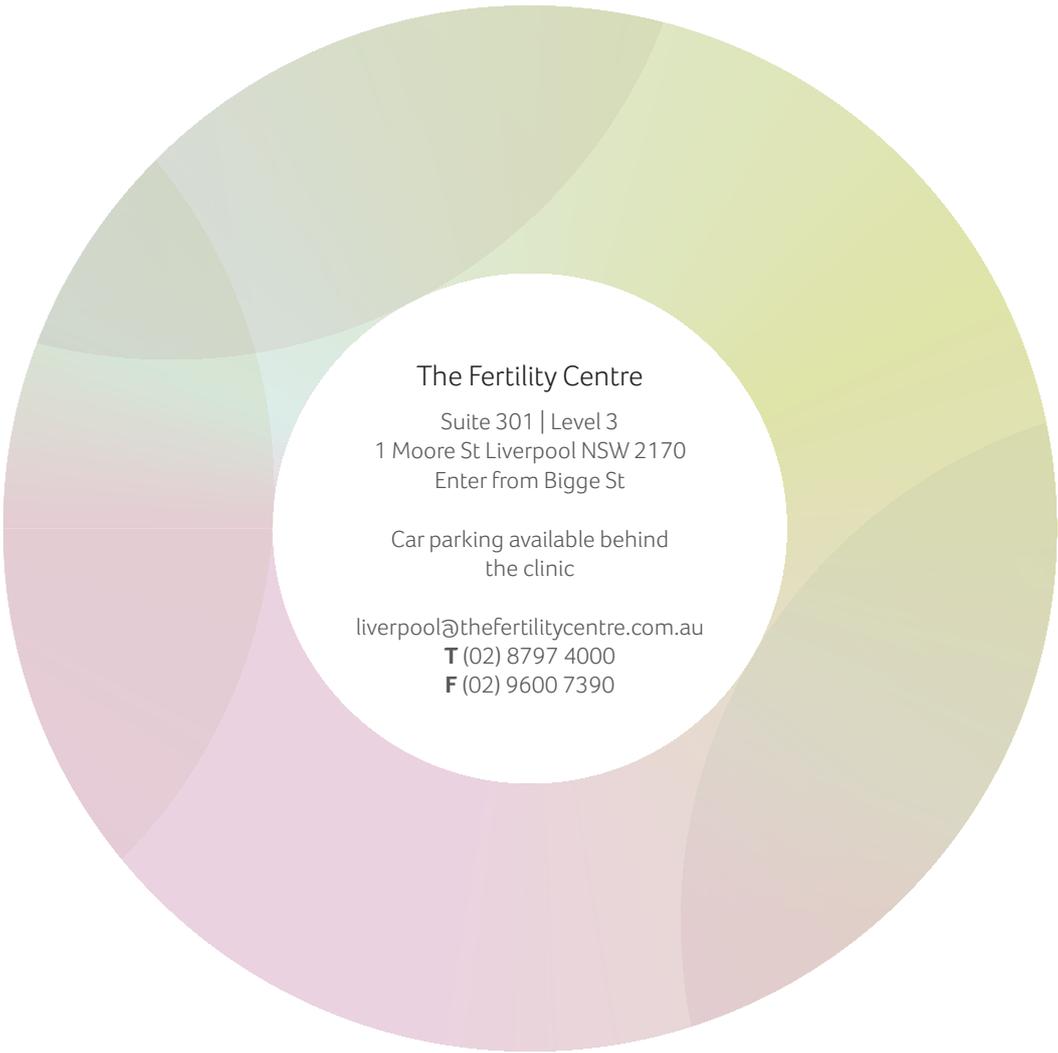
Acronyms & glossary of terms used in assisted reproduction

Treatment Procedures

IVF	In vitro fertilisation The fertilisation of eggs (oocytes) outside the human body by sperm, usually in a test-tube or a petri-dish in an incubator.
ET	Embryo transfer The transfer of fertilised eggs or embryos from a test-tube or dish in an incubator back into the uterus via the cervix
FET	Frozen embryo transfer The transfer of frozen/thawed embryos back into the uterus.
EPU	Egg pick-up The aspiration and collection of eggs from follicles on the ovaries. This is usually done via the vagina (trans-vaginally) using an ultrasound scanner (TV-EPU)
Microinjection	Assisted fertilisation of eggs by the micro-injection of the husband's sperm into them to aid fertilisation. Such sperm will usually have previously failed to fertilise eggs in conventional IVF.
ICSI	Intra cytoplasmic sperm injection The procedure of micro-injection where a single sperm is injected into the cytoplasm of the egg.

Hormones & Drugs

FSH	Follicle stimulating hormone The drugs used to stimulate the ovaries to produce one or more eggs. Gonal f / Puregon / Menopur belong to a group of hormones called gonadotrophins and contain follitropin alfa, which is a naturally occurring follicle stimulating hormone.
Ovidrel	Human chorionic gonadotrophin/ Ovidrel The drug used to trigger ovulation is a form of the naturally occurring hormone Human chorionic gonadotrophin, which is given via injection.
LH	Luteinizing hormone The natural hormone which triggers ovulation. A genetically engineered equivalent known as Luveteris may be used.
Antagonist	These injections are used to stop the natural ovulation of eggs from follicles. These drugs are named Cetorelix (the drug in Cetrotide), and Ganirelix (the drug in Orgalutran).
Crinone	Progesterone in a gel formulation administered vaginally around embryo transfer time to enhance pregnancy chances. An alternative to progesterone pessaries which also may be used and administered vaginally to maintain your hormone levels.
OCP	In addition to their designed role of prevention of pregnancy, the oral contraceptive pill is also used in ART programs to regulate and modify the timing of cycles during preparation for ART procedures.



The Fertility Centre

Suite 301 | Level 3
1 Moore St Liverpool NSW 2170
Enter from Bigge St

Car parking available behind
the clinic

liverpool@thefertilitycentre.com.au
T (02) 8797 4000
F (02) 9600 7390