



IVF – key steps explained



1. Obtain a GP referral

A GP referral is needed before seeing a Newlife IVF fertility specialist.



2. Consult with a fertility specialist

The doctor will order baseline tests and discuss your treatment plan.



3. Meet with other team members

A fertility nurse, counsellor and finance officer will make sure you are fully informed about all aspects of the IVF process, including costs and medications.



4. Await your period

On the first day of your period, you will notify our nursing team, with medication starting on day 2 of your menstrual cycle.

For IVF to increase the chances of a successful pregnancy, it helps to collect a number of eggs at one time. This requires you to:



5. Start medication

You will self-administer medications to stimulate the ovaries to produce multiple eggs for collection, including:



Commences on day 2 until days 12-13
Stimulates the ovaries to produce multiple eggs



Commences on day 6 until days 12-13
Prevents ovulation before egg collection

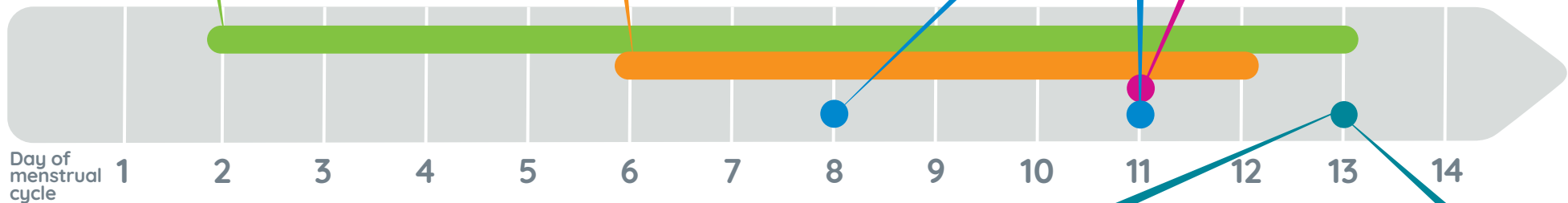
6. Undergo blood tests and ultrasound scans

Blood tests and ultrasound scans enable us to monitor follicle growth and adjust medication dosages as needed. Timing of tests and scans may vary per person.
Blood tests & ultrasound scans occur around days 8 and 11



7. Administer a trigger injection

A trigger injection facilitates/induces egg maturation leading up to collection.
Given around day 11 (approximately 36 hours before egg collection)



8. Attend day surgery for egg collection

Egg collection is performed under light sedation. The procedure takes 20-30 minutes with an average of 8-10 eggs typically collected.
Egg collection occurs around day 13



9. Collect and prepare sperm

On the day of egg retrieval, a fresh semen sample is collected from the male partner. If you're using frozen or donor sperm, our embryologists will ensure the sample is thawed and ready for use.



This timeline is a guide only and may vary depending on individual factors. Variations in menstrual cycle length and response to medications can affect the timing of each stage. Your fertility specialist will tailor your treatment plan accordingly.

IVF – key steps explained (continued)

Over the next two weeks, the following steps take place to complete your IVF cycle:



10. Perform insemination

The egg and sperm that have been collected can be combined in two ways:



In standard IVF, an egg is placed in a laboratory dish and exposed to thousands of sperm, allowing the strongest to fertilise the egg.



If there are concerns about sperm quality or quantity, ICSI (intracytoplasmic sperm injection) may be used instead. This involves injecting a single sperm directly into an egg to improve the chances of fertilisation.

It's important to remember that not all eggs may fertilise successfully.



11. Nurture embryo development

If fertilisation occurs, the developing embryos are placed in an incubator that mimics the conditions of the female body. Over the next 3-5 days, they develop into blastocysts – ready for implantation into the uterus. Not all embryos reach this stage, but those that do can be used in a fresh embryo transfer or frozen for future use.



12. Transfer the embryo

Guided by ultrasound, your fertility specialist will use a soft catheter to gently place the embryo in the uterus. The procedure is similar to a Pap test – quick, painless and requires no anaesthetic – and you can return to your normal activities shortly afterwards.

Fresh vs frozen embryo transfer

A fresh transfer occurs 3-5 days after egg collection, avoiding the freeze-thaw process and potentially shortening the time to pregnancy.

A frozen embryo transfer offers more flexibility and is timed to commence after your hormone levels return to baseline.



13. Perform a pregnancy blood test

To determine if the IVF cycle has been successful, a blood test is performed around 10 days after your embryo transfer.

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