



The Fertility Centre

Guide & FAQs

Fertility treatment works best when couples fully understand the process. We understand that often you have questions about your treatment. We hope that the following guide and FAQs will address many of these concerns. If you are still unsure, please ask one of the team or book a follow-up appointment with your Consultant.

The Fertility Centre Team

Admin Team

The admin team are available for all appointment bookings; they can also give you information about prices and take payments for treatments. Funding queries are made through the funding liaison officer.

Nursing Team

All our nurses are specially trained in fertility medicine and are the main point of contact with you during your treatment. They will be liaising with all of the team. They can deal with some clinical questions, but will sometimes ask to get back to you having discussed issues with the Doctors. Please note that the nursing team work closely together and you may not see or speak to the same person every time.

Medical Team

We have Consultants, Mr Nikolaou, Mr Norman-Taylor, Miss Maclaran whom oversee all fertility treatment in the Centre. Please visit [our website](#) to see their detailed biographies.

The Consultants are supported by research and clinical fellows. These are Doctors that have chosen to specialise in fertility medicine, and they take responsibility for dealing with day to day clinical issues.

You will see one of the medical team to plan your treatment; this will include a detailed protocol tailored to you. Please note that the medical team work closely together and you may not see or speak to the same person every time.



Embryology Team

The Embryologists will speak to you about your eggs/sperm and embryos and all laboratory-created techniques relevant to your treatment. They can be reached directly over the phone by calling the main unit number and selecting the option for laboratory.

What is the Fertility Pathway?

This is the path that you will follow through your fertility investigations and treatment, sometimes called the Fertility Journey. It will usually consist of an initial consultation, a follow-up, treatment and follow-up of treatment, though of course there are many variations.

Initial Consultation & Follow-up

At your first consultation the doctor will take an initial history and organise basic investigations. Please bring any relevant test results that you have already had done. Usually you need to be seen for a follow-up consultation when we have the test results. During the follow-up consultation you will discuss the factors affecting your case, the chances of conceiving, the options for treatment and the treatment itself.

Nurse Consultation

Your treatment starts with a nurse consultation. Both you and your partner will need to attend this meeting. You cannot start treatment before seeing the nurse, as there are some very important practical issues to be addressed before you start your medication.

The nurse consultation will last approximately 60 minutes and will cover practical issues such as:

- To provisionally schedule your treatment date and confirm provisional scan dates.
- To show you how to administer your medication and equip you with teaching literature and visual media to take home.
- To go through your consent forms which you and your partner have completed on line ensuring that you have fully understood everything you have signed.
- To sight your original photo ID (passport) and confirm a true likeness.



- To check that you and your partner have done all necessary blood tests for infection screening as required legally by the Human Fertilization and Embryology Authority (HFEA) and/or give you the request forms to get the tests done.
- To arrange any pre-treatment or procedures planned for you by the doctor.
- To be given a copy of the price list and made aware of what to expect and associated costs.

Understanding your fertility treatment is an important part of the process. If you are unclear about any of these elements, please discuss this with the nurse or make an appointment to see your Doctor.

The nurse will ask you, and your partner, to complete a number of in-house and HFEA consent forms; these are now completed on-line. These include:

- Forms for the use and storage of eggs, sperm and embryos (WT/MT)
- Welfare of the Child (WOC)
- Consent to disclosure of information (CD)
- Consent to IVF
- Consent to ICSI if necessary

Your infectious screening

All fertility units are obliged by HFEA regulation to have up-to-date records of screening for both partners, which must include: Hepatitis B core antibody, Hepatitis B surface antigen, Hepatitis C, HIV and Rubella immunity (female partner only). These must be within 3 months prior to egg collection for new patients, and 2 years for existing patients.

If you have already done these tests elsewhere it is your responsibility to bring official laboratory copies of the results to the nurse. Unfortunately, treatment cannot proceed without the results of this screening and you will NOT have an egg collection if you fail to provide valid evidence of these blood tests.

Your prescription

The nurse will give you a prescription signed by one of our Doctors to use at the hospital pharmacy (located on the ground floor). The pharmacy is open during the following hours:



Monday, Tuesday, Thursday & Friday 9am-6pm

Wednesday 9am-7:30pm

Saturday and Sunday 10am-4pm

Telephone number: 020 735 17830

Unfortunately, if you require drugs outside of The Fertility Centre or opening hours (for example over a bank holiday weekend) then it would be unlikely that we can help you. Therefore you do need to plan ahead to avoid running out of drugs.

Your Treatment

Scanning

Your treatment scans (IVF) will be trans-vaginal, for which you need an empty bladder. For your first scan, when you start treatment, you might still be bleeding from your period.

Whilst the scan itself may only take a few minutes, please allow an hour or so for the scan, as it may also include hormonal blood tests, collecting prescriptions and speaking to the nurses.

Egg collection

A nurse will call you 2 days before your egg collection at around 5pm, with the final instructions and times. On the day of the egg collection you will need to fast from midnight before. This means no food or drink. Only sips of water up to two hours before the procedure.

If you are on other medication such as tablets for high blood pressure, diabetes, depression etc., then inform the nurse when she calls you and we will give you advice. Usually we advise that you take your normal medication with a very small amount of water, except for insulin when you usually omit the morning dose on the day of the procedure.

We advise patients not to wear perfume, nail-varnish, nail extensions or make-up the day of the procedure. This is so that we can monitor your skin colour for anaemia, allergy, hypoxia etc.



Please do not wear any jewellery on the day of the procedure. We do not accept responsibility for loss of any personal belongings.

Egg collections are performed under conscious sedation. This will make you feel drowsy and some women do fall asleep. You will have some awareness of what is going on. If you need more analgesia during the procedure we will give you as required. The procedure normally takes between 10-20 minutes.

Someone will need to be there to escort you home after the procedure, and should ideally stay with you in case you begin to feel unwell.

You should not drive for at least 24 hours after the procedure, or undertake anything that would put yourself or others at risk. It is also important that you abstain from alcohol consumption during this time.

Embryo transfer

This is a straight forward procedure, similar to having a smear test, and only lasts for 10-15mins. You need to have a full bladder, which may cause you some discomfort. Some patients have a very narrow cervix (neck of the womb) and in these cases the transfer may be more difficult. However, you will normally have done a cervical assessment or endometrial scratch before you started treatment, part of this being to assess your cervix, so we can identify patients in whom embryo transfer may be difficult.

You should allow up to 1.5 hours for the appointment as you need to speak to the Embryologists before the procedure and be given instructions by the nurses following the procedure. Additionally, you may be given a prescription to collect further medication from the pharmacy.



Frequently Asked Questions

How do I contact The Fertility Centre?

Call us on 020 3315 8585. For all appointment bookings and admin related issues select option 1, option 2 for nursing queries and option 3 for the laboratory.

What are your success rates?

Our success rates can be viewed on our local website, and by going to the HFEA website (Choose a fertility clinic <https://www.hfea.gov.uk/choose-a-clinic>), which features a detailed breakdown of results across different patient groups. The HFEA website also contains a wealth of other information which you might find beneficial when considering fertility treatment.

The laboratory team, within The Fertility Centre, would also be able to provide you with our current success rates; they can be contacted by calling 020 3315 8585 and selecting option 3.

Do I meet the criteria for treatment?

There are age restrictions on treatment in the unit: for those looking to undergo IVF normally the female upper age limit is 45, and for the egg donation program (to be the recipient of donated eggs) 50 years of age.

The criteria for NHS funded treatment vary depending on Clinical Commissioning Group (CCG). Typically to meet the criteria for NHS funded treatment you would need to have been actively trying to conceive for 2 years, be a female of 40 years or below, have a healthy body mass index (BMI), neither partner should be a smoker, and there must be no existing children from the present relationship or those prior.

I have approval for NHS funded treatment - what am I expected to pay for?

Each Clinical Commissioning Group (CCG), who funds your NHS treatment, has their own set of funding regulations. Most CCGs will pay for the fresh IVF cycle package, which normally includes one nurse consultation, scans, counselling, egg collection, embryo transfer and all associated drugs.

Your doctor or nurse may discuss with you optional additional investigations or treatments ('add-ons') which may not be covered by your NHS funding. These include:



saline scan, endometrial scratch, assisted hatching and embryo glue. The HFEA website contains information about the current evidence base for these additional treatment options (for independent reviews please visit [the HFEA website](#)).

Any additional Consultations with the doctors after your initial consultation may require payment.

Who do I talk to about payment issues?

Please contact the admin team on 020 3315 8585 and select option 1 for any queries about payment.

Can I pay in instalments?

We do not offer payment plans and therefore full payment is required following your baseline scan.

What Doctor's consultations do I have to pay for?

All private patients pay per individual consultation. An initial consultation is very important as the Consultant will take a thorough history and make an individualized plan for your treatment. You may be asked to do some further investigations or tests and may be required to have an additional appointment to discuss these results prior to treatment.

If there are any changes to your clinical situation, and/or a significant period of time has elapsed since the initial meeting, you will need to make a further follow-up appointment so that any treatment plan may be adjusted accordingly.

For private patients the first follow-up doctor's appointment after a fresh IVF cycle is included in the package price.

Why do I need to have blood tests performed?

Our governing body the HFEA require us to screen all patients for HIV, Hepatitis B, Hepatitis C and Rubella (for the female only). Regulations state that these must have been done within three months of treatment starting for first cycles and within two years for subsequent cycles.



Can I have a copy of my results?

Our admin team can provide a copy of your blood or semen analysis results.

Can I discuss my AMH or any other blood results?

It is not practical to discuss results by email or telephone. Please make an appointment to see your doctor if you have any concerns.

What are my chances of success?

When you meet with the Doctor to plan your treatment they will be able to give you a prognosis, or estimated chance of success; this will take into account the factors which have contributed to infertility, making it specific to each individual/couple.

Is there anything else I can do to increase my chances?

Do not smoke.

Do not take recreational drugs.

It is good to try and optimize your weight, and have a healthy diet pre-treatment and into pregnancy. There is no evidence that any particular diet, such as high protein diet or similar, is more effective for pregnancy.

You should be on folic acid (400mcg daily is the standard recommendation, a higher dose might be appropriate in some instances) in the weeks leading up to treatment, but there is no evidence that other supplements are necessary.

Would it be beneficial to explore alternative therapies? Would this increase my chance of success?

There is currently no evidence to suggest that alternative therapies, such as acupuncture, homeopathy or Chinese medicine, will increase your chance of conceiving. If you do wish to explore these things please let us know your intentions, so that we may assess whether it is safe to do so and not of detriment to both your health and your treatment with ourselves.



Can I have caffeine and alcohol?

During treatment it is a good idea to refrain from excessive intake of caffeinated products, however it is unclear at present whether there is any direct association between caffeine intake and infertility.

When trying to conceive women should ideally avoid alcohol entirely, if they do decide to continue having alcohol it should not exceed 1 or 2 units of alcohol once or twice per week. When pregnancy is confirmed, current guidelines advise abstinence from alcohol consumption; this is especially important during the first 3 months. In terms of male fertility, 3 to 4 units of alcohol per day is unlikely to be detrimental, however drinking in excess of these values could affect semen quality.

I am currently taking medication for a health problem, is it safe to continue during treatment/pregnancy?

When you come for your initial consultation please let the Doctor know if you have any known health problems, and bring a list of medications that have been prescribed. Some medications may be contraindicated during treatment/pregnancy, and the doctor will advise if this is the case.

After the initial consultation if anything changes in terms of your health, please notify us so that if need be we can make any necessary alterations to your treatment.

What if I need donor sperm?

We regularly treat patients who are using sperm from either known or unknown donors. If someone you know has volunteered to donate sperm for your treatment, they will be required to attend the clinic to undergo several checks to ensure they are a suitable donor. In cases where an unknown donor is required, the unit will be able to point you in the direction of several donor sperm banks which have frequently been used for patient treatment in The Fertility Centre. *Please note that procurement of donor sperm is not routinely covered by CCG funding.*

When is day 1 of my cycle?

Day 1 of the period is considered to be the first day of full red flow; spotting or a light brownish/reddish discharge is not considered to be the period. If your period starts past 7pm in the evening we would consider day 1 to be the following day.



Can I buy my medications elsewhere?

NHS funded prescriptions can only be dispensed by the pharmacy in the hospital. External private prescriptions are valid for use in any pharmacy, though please be aware there is wide variation in pricing and other pharmacies will typically need time to obtain fertility medication.

Will my Consultant be performing my scans?

All scans are performed by trained sonographers and nurses. The results are reviewed by the Consultant on duty every day between 3 and 5pm. If there are any particular concerns the Doctor may call you to discuss your treatment, but typically it is the nurses who will relay any necessary changes in dose after the Consultant's review.

Will my Consultant be performing my egg collection or embryo transfer?

You may not be seen by your Consultant for egg collection and embryo transfer, but by another equally highly experienced doctor. The unit operates as a cohesive team, with each clinician having a full understanding of your personalised treatment plan.

Am I able to request a particular gender of doctor for my treatment?

No. Whilst we have both male and female doctors, we cannot guarantee which gender will be available for you on the day of your treatment.

What if I run out of drugs out of hours?

You are responsible for monitoring how much medication you have remaining, please come to each appointment with this information, if you do require additional medication let the nurse know.

Do not despair if you happen to run out of stimulation drugs, as long as you are taking your Fyremadel or Buserelin (to prevent ovulation) it is not a disaster if you miss the odd day of stimulation, it will just delay the growth of eggs and your date of egg collection. If you urgently require medication please call the nurse on 07854 666461, who will liaise with the doctor on-call.



How will the date and time of egg collection be decided?

The Consultant overseeing the operation of the unit on the day of your scan will decide whether you have reached the optimal stage for egg collection. The nurse will then call you to give specific timings for medication administration and inform you of the time you have been allocated to undergo the egg collection procedure.

Can my partner be with me during the procedure?

Partners are not allowed in the treatment room during the egg collection procedure. Due to infection control, unfortunately we have to restrict the numbers of people in the unit, therefore partners may not be able to attend all appointments. The team will update you on this during your cycle.

When does my partner need to give his semen sample?

If giving a fresh semen sample it would be required on the day of egg collection, this can be produced within the unit or at home (if the sperm can reach the unit within an hour of production; please request a sterile pot from the lab). If there are any problems with producing a semen sample on the day of egg collection please let a member of the medical team know before treatment commences (a sperm sample can be frozen beforehand). We advise that the male abstain 3-5 days before giving his semen sample. All male partners must have had an in-house semen analysis at the start of treatment.

Will I be asleep during the egg collection?

During egg collection you will be having intravenous conscious sedation, and many patients do feel sleepy. Conscious sedation is not the same as a general anaesthetic, but you will feel comfortable and drowsy, probably with awareness of the procedure taking place. Additional analgesia can be given if necessary.

How do I contact the staff in the event of an emergency?

There is an on-call phone (07854 666461) carried by a member of the nursing team which is checked for urgent messages in the early evening and on the weekend. If you have an acute medical problem requiring immediate treatment please do not delay obtaining help by calling this number, but instead proceed directly to your



closest Accident and Emergency department (for example, in the unlikely event of experiencing significant pain and/or bleeding post vaginal egg collection).

What laboratory add-ons are available for my treatment?

Information about all the add-ons currently available in the unit can be found under the '[Treatment Options](#)' tab.

During your treatment the embryology team will liaise with you directly about what treatment options may increase your chances of success.

Is Embryo Transfer Painful?

This is a straight forward procedure, similar to having a smear test, and only lasts for 10-15mins. You need to have a full bladder, which may cause you some discomfort. Some patients have a very narrow cervix (neck of the womb) and in these cases the transfer may be more difficult. However, you will normally have done a cervical assessment or endometrial scratch before you started treatment, part of this being to assess your cervix, so we can identify patients in whom embryo transfer may be difficult.

Do I have to stay in bed after embryo transfer?

No, there is no evidence that bed rest after embryo transfer increases pregnancy rates. In fact, keeping mobile will help increase blood flow to the uterus and help prevent blood clots in the legs or lungs (deep vein thrombosis). You should follow the advice given to you at the time of the embryo transfer regarding exercise, and just avoid strenuous physical activity. We want you to move around, and there is no need to take any leave from work.

Can we have sex?

There is no evidence that it will stop you from conceiving, however we usually recommend waiting one week following egg collection to allow the wounds to heal. To minimise the chance of infection you should also avoid swimming and bathing for one week.



Is this discomfort normal?

It is very common for patients to have non-specific aches and pains following IVF. If you are worried please contact the nursing team. They may advise you to go to your GP, the Early Pregnancy Unit or A&E if there are concerns out-of-hours and/or in the early stages of pregnancy.

What if I get spotting after the transfer?

Try not to worry, and please continue taking your medication. There are many reasons why you may have spotting at this stage; it could be blood coming away from the cervix, or residual wound healing post egg collection. It may also be an implantation bleed: this is where the embryo implants itself into the lining of the uterus (womb) and releases a small bleed. You may or may not experience an implantation bleed as the embryo imbeds. If you have had 2 embryos transferred, it might be that 1 embryo has implanted and the other has not. If the bleeding is substantial, it may be a better idea to insert the Cyclogest pessaries rectally rather than vaginally.

What happens if I get my period any time after the embryo transfer?

If you get spotting/pink discharge/brown discharge following the procedure you should follow the advice above. If your period clearly commences before the time of the urine pregnancy test (2 weeks' post embryo transfer) or the urine pregnancy test is negative on the day we have asked you to check, then unfortunately the cycle has been unsuccessful. Please stop all of your medication and call the admin team (020 3315 8585, press 1) to book a follow-up appointment with a Doctor, to review the IVF cycle. There is also a counsellor available in the unit, and the admin team would be able to book you an appointment to see her.

Can my period be different after embryo transfer?

If your cycle is unsuccessful your next period may be heavier than usual due to the medication given to stimulate your ovaries, and the resulting thickened lining.

How soon can I start another cycle?

If your cycle has been unsuccessful, you need to have a follow-up appointment with one of the Doctors to review the cycle and plan future treatment. Typically, there should be an interval of at least one month before starting another cycle, but in some



instances it might be appropriate to wait for a longer period of time, this is what the Doctor will discuss with you at the follow-up appointment.

How accurate is the urine pregnancy test? Can I have a blood test to check if I am pregnant?

There is no need for a blood test as the urine pregnancy test is very accurate.

Can I do my pregnancy test early?

We ask that you do not do your urine pregnancy test too early as you may have a false reading. The Ovitrelle which you may have taken contains the pregnancy hormone hCG which can give a false positive result. On the other hand implantation of the embryo can take some time and this may not have taken place yet so will give a false negative result.

What are the side effects of Cyclogest? What can I do?

Side effects of Cyclogest include: bloating, constipation, flatus or change in bowel habits. You can reduce these symptoms by staying well hydrated and by adjusting your diet to suit your altered bowel habits.

After embryo transfer if you are experiencing troublesome side effects you may use the Cyclogest as a vaginal pessary instead. It should not be used vaginally just before embryo transfer, so make sure the dose prior to embryo transfer is rectally administered.

I'm pregnant... What happens next?

Congratulations! Let us know and continue with your medication.

If there are no problems, we routinely carry out early pregnancy assessment scans at 8 weeks of pregnancy and you will then be discharged from The Fertility Centre to the antenatal care team. Please ask about how you can be referred to Chelsea and Westminster Hospital for your antenatal NHS care, or privately on the Kensington Wing.



I'm pregnant but I am having pain or bleeding – what should I do?

Bleeding or pain is common in early pregnancy, however occasionally it can be a sign of ectopic pregnancy or miscarriage. Let us know and we will discuss with you whether you need to see your GP or attend A&E. They may then arrange for you be seen in the Early Pregnancy Assessment Unit (EPAU).

Contact Numbers

020 3315 8585

Option 1: The Admin Team

Option 2: The Nursing Staff

Option 3: The Laboratory

Out of Hours

For emergency calls only: 07854 666461