



Michigan Center for Fertility & Women's Health

Ovulation Induction

You will be receiving medications that are given through injections. These medications stimulate your ovaries to produce follicles. A follicle may or may not contain an egg.

Cycle Day One: call the office @ 586) 576-0431, leave a message in the ovulation induction/nurses voicemail. Day one is considered the first day of “full flow”. If you start after 6 p.m., the next day is considered day one. Someone will return your call to schedule baseline blood work and ultrasound.

Cycle Day Three: you will have a transvaginal ultrasound and blood work. We expect the ovaries to be “quiet” at the beginning of a cycle. Two hormone levels are assessed; FSH: follicle stimulating hormone and E2: estradiol (blood level of estrogen). Once your results have been reviewed by the doctor, we will call you with an update. If everything is within normal range, you will start your injections. These will continue for three nights. A return visit will be scheduled at this time.

We will be assessing your response to the medication through ultrasound and estradiol levels. You can plan on returning every other day or so from that point. The closer you get to ovulation, the more often we need to assess you. The average number of days on the stimulation medication is 10-12.

Once your follicles are in the mature range (18-20mm), you will stop the gonadotropins. You will be instructed on when to take your HCG (Ovidrel). This is a one time per cycle medication used to “trigger” ovulation. It needs to be given subcutaneously or into the “fatty layer”, just beneath the skin. Whether it is given in the abdomen or thigh, its mechanism of action is the same. If you are using Ovidrel for the first time, you may bring it with you on the day of your mid cycle ultrasound. Providing you have follicles in the mature range, we can give (demonstrate) how to administer the medication. You will then be scheduled for insemination or instructed to have intercourse every other day for a week.

One week from the HCG injection you will be asked to return for a progesterone level. This tells us that you have ovulated and confirms that the level is sufficient to maintain the endometrial lining.

Two weeks from HCG you will be asked to come in for a blood pregnancy test.

If you are not pregnant, you can expect a period to start approximately 12-14 days after the HCG injection. If you have not started a period within 17 days after HCG, please call the office.

Please avoid any product that contains ibuprofen or aspirin such as: Motrin or Nuprin. Ibuprofen has the potential to interfere with ovulation. Tylenol is acceptable.

Avoid *strenuous* exercise such as high impact aerobics or heavy lifting.

Please notify the office of any medications you are currently taking.

Common side effects:

You may experience irritability, depression or fatigue. You may notice bloating and/or lower abdominal discomfort when close to ovulation. Mild irritation and/or bruising at the injection site are not uncommon. Please notify us if you are concerned about reactions you may be experiencing.

NOTES: