



Prerequisites Oocyte Donation

There are very few prerequisites needed. You could complete them within a couple of weeks and be ready to start your treatment cycle.

It may be possible to reduce the cost of your prerequisites by combining two or more prerequisites into a single office visit at Nova IVF. The prerequisites are usually considered a diagnostic part of the treatment and many times your insurance company may cover a portion or most of the cost. Some prerequisites can be done by your regular OB/GYN.

Once you have had your initial consultation, you will need to complete the following prerequisites:

Physical Examination (oocyte donor and recipient)

A brief physical examination is done together with a pelvic ultrasound and measurement of the uterus size. These are ideally done at the time of the initial consultation to reduce treatment cost.

Pathogen Testing

This testing is required by the State of California and FDA. You, your partner and your oocyte donor must be tested for several pathogens including Hepatitis B-Surface Antigen, Hepatitis C-Antibody, HIV I&II, HTLV I&II and RPR. Some of these tests do not need to be repeated if done within the last 12 months.

Genetic Testing (oocyte donor)

All potential egg donors are screened at Nova IVF for over 100 genetic diseases.

Reproductive Hormone Assay (oocyte donor)

Egg quality can vary in each menstrual cycle. Your treatment should not be started during a cycle in which there is no probability of a live birth or in which the probability is low. The reproductive hormone assay (RHA) can assess the likelihood that normal eggs will be produced.

Follicle stimulating hormone (FSH) and estrogen blood levels are measured in the RHA. FSH stimulates the ovaries to produce eggs. If the ovaries cannot produce normal eggs, the FSH level increases. Estrogen production by the ovaries influences the FSH secretion and is also related to the quality of the eggs.

Most women will have a normal reproductive hormone assay result. An abnormal result does not mean absolutely that normal eggs could not be produced and we typically recommend repeating the test up to three times.

Sonohysterogram

If you have not had a recent hysterosalpingogram (HSG, X-ray dye study of the uterus and the Fallopian tubes), a hysteroscopy or a sonohysterography, you will need to have a sonohysterogram (ultrasound examination) to assess the endometrial cavity of your uterus. Presence of polyps, fibroids or scarring inside the uterus can significantly reduce the probability of implantation. If any polyps, fibroids or scarring are found, their removal would require a simple outpatient procedure by your OB/GYN or a specialist.

Trial of Endometrial Lining Stimulation

Your endometrial lining must be stimulated to assess its response to estrogen administration. The endometrial response will determine the optimal stimulation of your endometrium for embryo implantation. You will be taking estrogen in the form of skin patches. We will measure your blood estrogen level and use ultrasound to assess the development of the endometrial lining.

Semen Evaluation

The male partner must have a semen test done at Nova IVF to determine the best laboratory method of fertilization.