



# EGG FREEZING (OOCYTE PRESERVATION)

New Patient Orientation



# Welcome to the NYU Langone Fertility Center Egg Freezing Orientation Class!

## **Section 1: NYULFC Overview**

Critical Information for Egg Freezing Cycles at NYULFC

## **Section 2: Stimulation & Retrieval**

The Egg Retrieval Process:

- Ovulation Induction
- Oocyte Retrieval

## **Section 3: Cryopreservation**

The Cryopreservation Process:

- Embryology
- Oocyte Cryopreservation

## **Section 4: Wellness**

Wellness & Support for NYULFC Patients

## **Section 5: Research**

Research Studies & Participation Options

# Hello & Welcome!

**Haley Penny, LMSW**  
**Eva Billik, LCSW**

Health Educators  
NYU Langone Fertility Center

**NYU Langone**  
**Fertility Center**

159 E. 53rd Street, Floor 3  
New York, NY 10022



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[Eva.Billik@nyulangone.org](mailto:Eva.Billik@nyulangone.org)



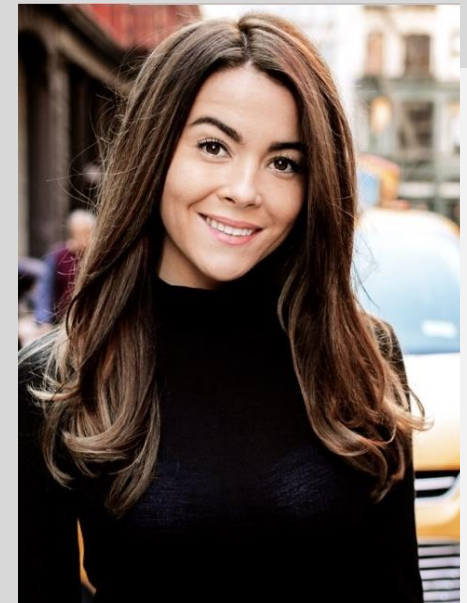
T: 212-263-8990



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**Haley Penny, LMSW**



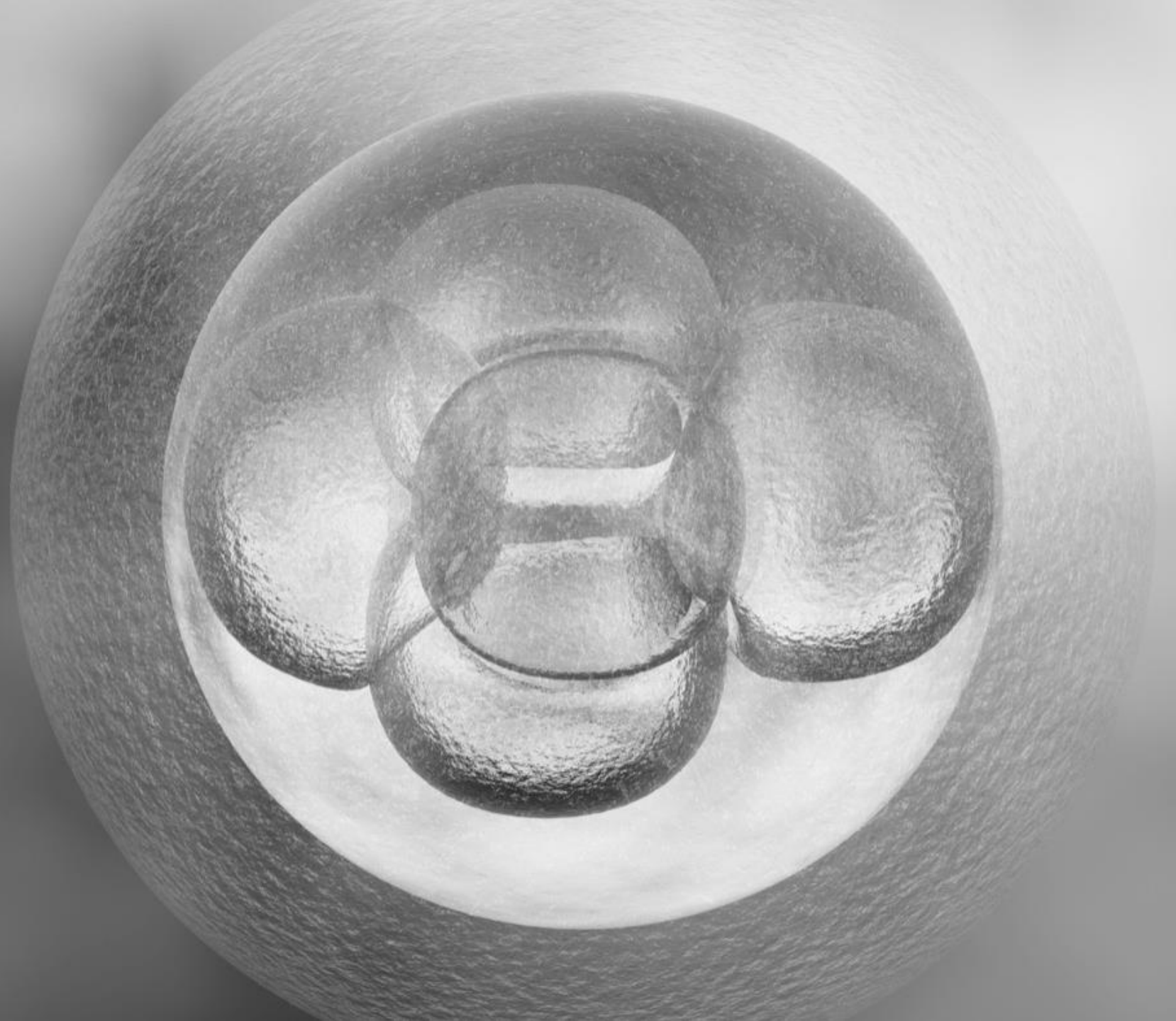
**Eva Billik, LCSW**





Section 1: NYULFC Overview

## Critical Information for Egg Freezing Cycles



# Communication: Your NYULFC Patient Portal Account

NYU Langone Fertility Center uses a Patient Portal to communicate with all patients undergoing treatment.

If you do not already have a patient portal account, please let me know in the Q& A. I will make sure your care team issues an invitation today.

**The NYULFC Patient Portal is the primary method of communication for all patients. Please plan to check your Patient Portal messages daily during your cycle.**

**Please Note: The NYULFC Patient Portal is not connected to the Epic MyChart portal used throughout the NYU Langone Health system. Epic's electronic medical record does not support fertility cycle management. Your NYULFC treatment information will only be accessible in the NYULFC Patient Portal.**

Sign In



Welcome to the NYU Langone Fertility Center Patient Portal. Log in below to securely access your healthcare information.

Please note: You must be a current patient at NYU Langone Fertility Center to log into this patient portal. To access your information about other care you are receiving at NYU Langone, please log into your NYU Langone Health MyChart account.

If you have questions about your care at NYU Langone Fertility Center, please call us at 212-263-8990.



Email Address



Password

Sign In

[Forgot your password?](#)

# NYULFC Office Locations

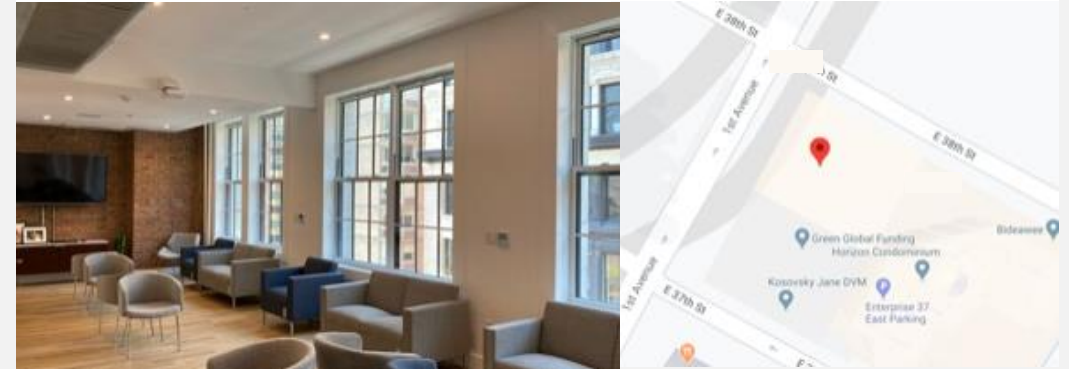
## Main Office



**159 East 53<sup>rd</sup> Street, 3<sup>rd</sup> Floor  
New York, NY, 10022**

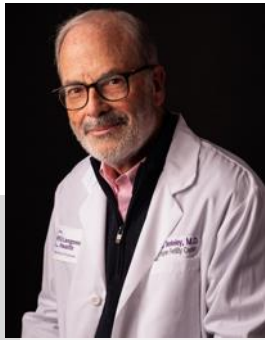
**212-263-8990**

## Satellite Office: NoMad



**109 West 27<sup>th</sup> Street, 9<sup>th</sup> Floor  
New York, NY, 10001**

**212-263-0040**



Alan Berkeley, MD



Jennifer Blakemore, MD



Shannon DeVore, MD



Elizabeth Fino, MD



James Grifo, MD, PhD



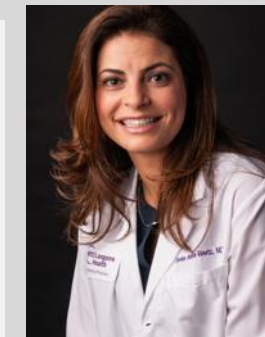
David Keefe, MD



Frederick Licciardi, MD



Jacquelyn Shaw, MD



Brooke Wertz, MD, MPH

# Meet the NYULFC Physician Team

**World Class Outcomes.  
Expert & Exceptional Care.  
Constant Collaboration.**

Our physicians have over 140 years collective experience performing fertility treatment cycles. Each member of the NYULFC physician team is dedicated to delivering exceptional clinical care, and all members of the team collaborate daily to deliver best-in-class outcomes for NYULFC patients.

NYULFC operates on a “Doctor-of-the-Day” model, which means one physician is assigned to perform all surgical procedures each day. You will see your physician throughout your treatment cycle, and your physician will direct your care plan (including medication dosage, monitoring frequency, and other clinical directives), however it is possible that your physician may not be the one assigned to perform surgery on the date of your procedure.

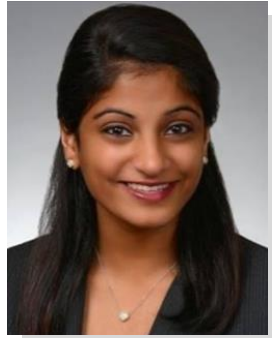
During your care at NYULFC, you may also meet our staff physician, Dr. Lisa Kump. While Dr. Kump is no longer accepting new patients, she provides outstanding care for all patients in-cycle at the Fertility Center.



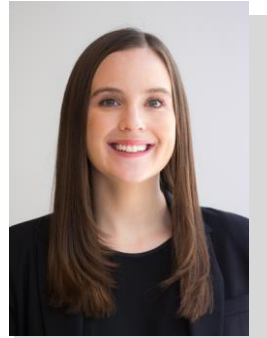
# Reproductive Endocrinology Fellows



Sarah Cascante, MD



Nirali Shah Jain, MD



Amelia Kelly, MD



Emily Weidenbaum, MD

NYULFC is part of the Division of Reproductive Endocrinology and Infertility (REI) at NYU School of Medicine's Department of Obstetrics and Gynecology.

We host a 3-YR fellowship training program in REI approved by the American Board of Obstetrics and Gynecology.

**Fellows are licensed physicians** and have completed a 4-year residency in OB-GYN prior to sub-specializing in REI.

Throughout your time at the NYULFC, you will interact with our fellows who provide clinical care and on-call responsibilities (including emergencies).



# Genetic Counseling

**Andria Besser** and **Hannah Green** are Board-Certified Genetic Counselors at NYULFC.

Typically, patients wait to consult a Genetic Counselor until preparing to create embryos.

## Indications for Genetic Counseling include:

- Personal or family history of genetic disease
- Couples who both carry the same autosomal recessive genetic disease
- Carriers of X-linked diseases, autosomal dominant diseases, or heritable chromosome abnormalities

## Available by appointment only.

Your doctor will let you know if they see any need for you to consult with a Genetic Counselor during your Fertility care.



Andria Besser, MS, CGC



Hannah Green, MS, CGC

## Carrier Screening for Recessive Genetic Diseases

NYULFC uses the laboratory “**Sema4**” (800-298-6470) for carrier screening, to assess the risk of having a baby with certain inherited disorders. Carrier screening is recommended for everyone and is performed via blood or saliva sample. Genetic counseling about your results is provided by Sema4.

## Preimplantation Genetic Testing for Aneuploidy (PGT-A)

NYULFC uses the laboratory “**Coopergenomics**” (877-282-3112) for PGT-A, to test embryos for chromosomal information. **If you are considering PGT, a phone consult with a Coopergenomics Genetic Counselor is required.**

*Please note that NYULFC does not provide testing or genetic counseling for hereditary cancers such as BRCA1/BRCA2.*

*These appointments are available through the NYU Perlmutter Cancer Center (646-754-1376).*

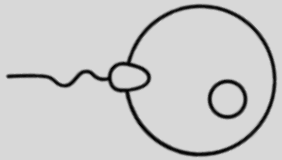
# Patient Care Coordinators

Your Patient Care Coordinator serves as your point person throughout your treatment cycle. At NYULFC, each physician collaborates directly with a Patient Care Coordinator to form a “Physician Pod” or care team.

**When contacting your Patient Care Coordinator, you may also include the Coordinator group: [FertilityCoordinators@nyulangone.org](mailto:FertilityCoordinators@nyulangone.org) in case your Coordinator is out of office.**

Physician	Coordinator	Coordinator Phone	Coordinator Email
<b>Dr. Alan Berkeley</b>	Joanna Marrero-Constantine	212-263-7976	<a href="mailto:Joanna.Marrero-Constantine@nyulangone.org">Joanna.Marrero-Constantine@nyulangone.org</a>
<b>Dr. Jennifer Blakemore</b>	Kianna Thompson	212-263-3395	<a href="mailto:Kianna.Thompson@nyulangone.org">Kianna.Thompson@nyulangone.org</a>
<b>Dr. Shannon Devore</b>	Lisa Valentine	212-263-0064	<a href="mailto:Lisa.Valentine@nyulangone.org">Lisa.Valentine@nyulangone.org</a>
<b>Dr. Elizabeth Fino</b>	Joanna Marrero-Constantine	212-263-7976	<a href="mailto:Joanna.Marrero-Constantine@nyulangone.org">Joanna.Marrero-Constantine@nyulangone.org</a>
<b>Dr. James Grifo</b>	Maribel Feliciano	212-263-7967	<a href="mailto:Maribel.Feliciano@nyulangone.org">Maribel.Feliciano@nyulangone.org</a>
<b>Dr. David Keefe</b>	Amanda Cosme	212-263-3659	<a href="mailto:Amanda.Cosme@nyulangone.org">Amanda.Cosme@nyulangone.org</a>
<b>Dr. Frederick Licciardi</b>	Amanda Cosme	212-263-3659	<a href="mailto:Amanda.Cosme@nyulangone.org">Amanda.Cosme@nyulangone.org</a>
<b>Dr. Jacquelyn Shaw</b>	Kianna Thompson	212-263-3395	<a href="mailto:Kianna.Thompson@nyulangone.org">Kianna.Thompson@nyulangone.org</a>
<b>Dr. Brooke Wertz</b>	Kimown Peters	646-754-1253	<a href="mailto:Kimown.Peters@nyulangone.org">Kimown.Peters@nyulangone.org</a>

# Embryology and Andrology Laboratory Schedule



The NYULFC embryology, andrology, and endocrinology laboratories are located at our main office: 159 E 53<sup>rd</sup> Street, Floor 3.



NYULFC’s laboratories close for 10 days each December to perform extended cleaning and maintenance (“**December Downtime**”).

NYULFC continues to provide monitoring, consultations, and non-IVF procedures during the closure periods.

Please contact your Patient Coordinator with any questions you have regarding the laboratory downtime period.

Your Coordinator will make sure you can complete your cycle prior to the December closure.

# Medical Clearances

## Specialist or Primary Physician Clearance

Your doctor will inform you and the NYULFC Clinical staff if Medical Clearance is required before your treatment cycle. If applicable, clearance must be obtained prior to receiving a cycle reservation.

## Anesthesia Clearance

The Egg Retrieval procedure is performed using monitored anesthesia care. In some cases, NYULFC will require an anesthesia clearance.

Anesthesia clearance is required:

- If the patient's BMI is 38 or greater
- If the patient has an illness that may compromise the airway or ability to breathe

*\*NOTE: We cannot perform the retrieval procedure on anyone with a BMI of 42 or greater.*

In these cases, the patient must see the anesthesiologist for an examination of the airway and to determine intravenous access **before starting medications**.

If the anesthesiologist concludes the airway is compromised or IV access cannot be determined, the patient will **NOT** be cleared for anesthesia.

In these cases, the treatment cycle may be cancelled, or the patient may have to undergo the egg retrieval without anesthesia. Alternatively, the patient may be asked to delay treatment until sufficient weight can be lost, or until medical clearance can be obtained.





# Reservation for Cycle Start

## Reservation Requirement



A **Cycle Start Reservation** is required for all patients undergoing care at NYU Langone Fertility Center.

## Reservation Timing

To account for variation in menstrual cycle timing, all Cycle Start Reservations are honored within a 7-day window of the confirmed cycle reservation date.

**Example:** if your reservation for Day 2 Start is confirmed for the 14th of a month, your reservation will be honored between the 7th and the 21st of the month.

## How do I make a Reservation?

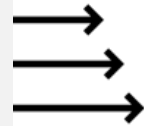
Please contact your Patient Care Coordinator to make a Cycle Start Reservation.

Your Coordinator will book your Cycle Start Reservation. Your Coordinator will also call you 1-week prior to your anticipated menses to confirm your Reservation.



# What is a “Day 2” Start?

**Day 1** of your menstrual cycle is considered full flow menstrual period before midnight (not staining or spotting).



**Day 2 is the following day.**

*Note:* if your period arrives late at night, do not call the overnight emergency service. In the morning, please call our office at 212-263-8990 for Day 3 cycle start instructions.

If you are taking birth control, this will be 4 days after the last active pill.



# Cycle Monitoring

The **average** number of days of injectable stimulation medications is **10-12 days**, however this will vary based on your body's individual response to the medications.

Cycle Day 1 Menstruation begins <i>Call Patient Coordinator</i>	Cycle Day 2 <b>Consents Due!</b> <b>Morning Monitoring</b> <i>If instructed, start Gonadotropin</i> <i>Gonadotropin (pm only)</i>	Cycle Day 3 <i>Gonadotropin (am/pm)</i>	Cycle Day 4 <b>Morning Monitoring</b> <i>Gonadotropin (pm)</i>	Cycle Day 5 <i>Gonadotropin (am/pm)</i>	Cycle Day 6 <i>Gonadotropin (am/pm)</i>	Cycle Day 7 <b>Morning Monitoring</b> <i>Gonadotropin (pm only)</i>
Cycle Day 8 <b>Morning Monitoring</b> <i>Possible Antagonist (am)</i> <i>Gonadotropin (pm)</i>	Cycle Day 9 <i>Possible Antagonist (am)</i> <i>Gonadotropin (pm)</i>	Cycle Day 10 <b>Morning Monitoring</b> <i>Possible Antagonist (am)</i> <i>Gonadotropin (pm)</i>	Cycle Day 11 <b>Morning Monitoring</b> <i>Antagonist (am)</i> <i>Gonadotropin (pm)</i>	Cycle Day 12 <b>Ovulation Trigger</b>  Egg retrieval in 34-36 hours	Cycle Day 13 <b>Morning Monitoring</b>  <b>No medications.</b> <b>Nothing to eat or drink after midnight.</b>	Cycle Day 14 <b>Egg Retrieval Anesthesia</b>  <i>Plan to rest at home. You will receive a call tomorrow with your retrieval results.</i>  <b>! Escort Required</b>

On Day 2 of your menstrual cycle, you will receive an appointment to visit our office between the hours of 7AM – 9AM for your “Day 2 Cycle Start.”

At your Day 2 visit, you will receive bloodwork and an ultrasound.

Following your Day 2 visit, you will receive a phone call with instructions from a nurse. The nurse will notify you if you can begin injectable medications that evening.

Your medications, the dosage, and the number of days until you return for your second morning monitoring visit have been predetermined by your doctor.

After your second morning monitoring visit, you will receive another phone call with instructions from a nurse, as your medication dosage may change throughout your cycle depending on your body's individual response to the medications.

The cycle calendar pictured above and included in your information packet is a generic guideline and will change as your cycle progresses.

# Morning Monitoring at NYULFC

## When & Where

Morning Monitoring services, including bloodwork and ultrasound, are available at both offices (Main Office & NoMad Satellite) on weekdays, and at the Main Office ONLY on weekends.

Morning Monitoring occurs between **7AM – 9AM**, 7 days per week.

**Appointments are required for morning monitoring.**

## Afternoon Instructions

**Expect a [portal message](#) or a phone call from a nurse during the afternoon following your morning monitoring visit.**

Please be sure to check your NYULFC Patient Portal account each day for important medication updates!

Please follow all instructions delivered by your nurse.

## Contact Information

Questions?

Please message your care team using the NYULFC Patient Portal or call the main office at 212-263-8990.

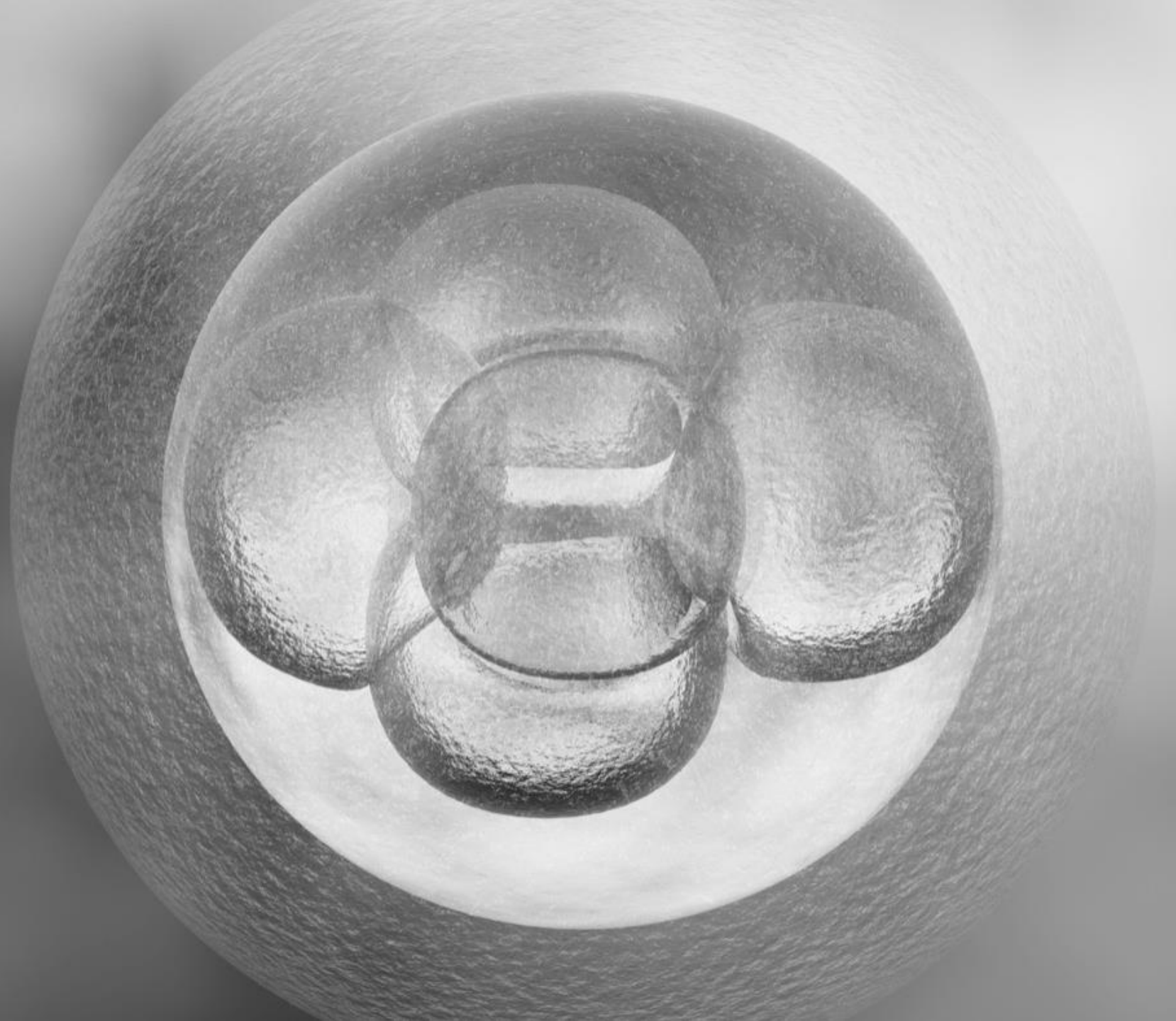
The best time to reach our nursing staff is between 10AM – 5PM ET.



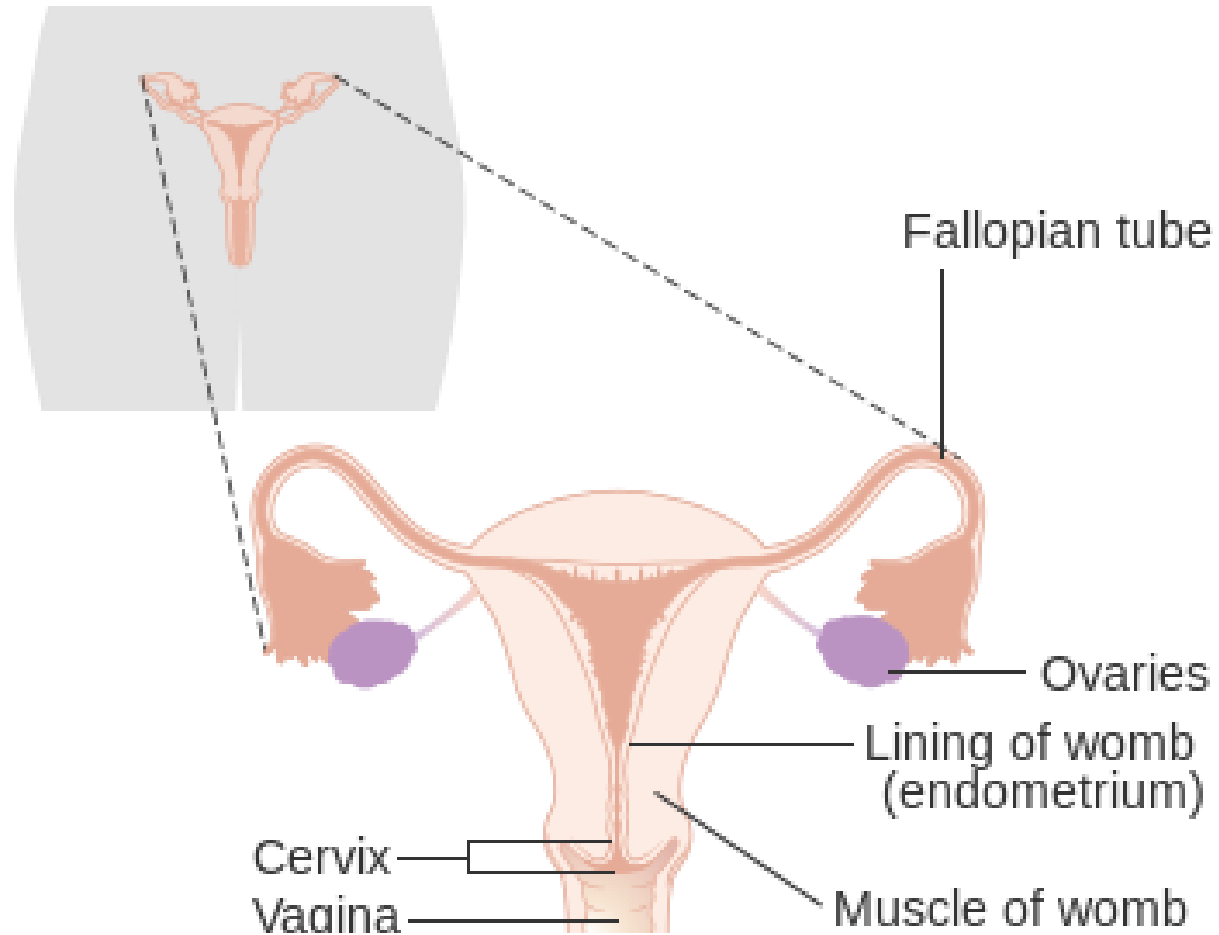


Section 2: Stimulation & Retrieval

## Ovulation Induction and Oocyte Retrieval



# The Reproductive System



# Egg Freezing Medications

## Day 2 Start

The decision to start medication is based on Day 2/Day 3 blood tests and ultrasound results, as well as approval from the insurance carrier, if applicable.

If you purchase your medications in advance and your cycle is cancelled, you will not be able to return medications to the pharmacy.

If stored properly, medications can typically be stored safely for one year.

## Insurance Coverage

If you do not have insurance coverage, please notify a nurse of your pharmacy of choice.

If you have insurance coverage, we must abide by the carrier's guidelines as to drug selection, dosage, and location of pharmacy.

Please arrange for pick-up/delivery of your medications ahead of time, especially if your carrier requires a mail-order pharmacy.

## Medication Types

**Gonadotropins**  
(FSH, HMG, HCG)

**GnRH Antagonists**

**GnRH Agonist**

**Ovulation Trigger Shot**



## Medication Pricing

Scan here to access discounted medication pricing available for NYULFC patients at **Apthorp**, **Metro Drugs**, and **Schrafts** specialty pharmacies.



Please review the specialty pharmacy sheet, located in your patient information packet.

Once received, please be sure to review your medications and store them appropriately.

# Gonadotropins (FSH, HMG, HCG)

## Purpose:

Gonadotropins are used to stimulate the ovaries to mature multiple follicles simultaneously.

## Types:

- FSH – Gonal F® or Follistim® administered via the redi-ject subcutaneous pen
- HMG – Menopur® administered via subcutaneous injection with the short needle
- Low Dose HCG - administered via subcutaneous injection with the short needle

## Possible Side Effects:

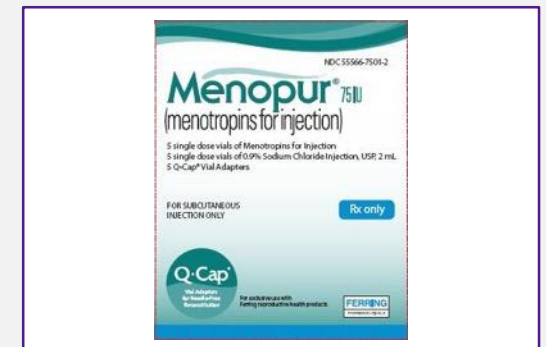
Breast tenderness, rash or swelling at injection site, mood swings, depression, abdominal bloating or discomfort, hyperstimulation syndrome (<1%)

## Special Instructions:

Once you begin ovarian stimulation using gonadotropins, limit exercise to walking. Stay well hydrated, and eat plenty of protein.

## Important Note:

Gonal F® and Follistim® are the same medication (different manufacturers). You may be required by your insurance carrier to use a specific medication. If NYULFC does not participate with your insurance, you may wish to shop around for either medication from several pharmacies to find the lowest price. It is best to do this in advance, then tell us where you would like us to send your prescription.





## GnRH Antagonists

### Purpose:

GnRH Antagonists are used to suppress the release of lutenizing hormone (LH), which helps to prevent premature ovulation.



**Types:** Cetrotide® or Ganirelix Acetate®

**Administration:**  
Subcutaneous injection

### Cycle Day Started:

Typically, patients begin GnRH Antagonists between Cycle Day 7-9, depending on the individual's response to gonadotropin injections. Once begun, this medication is continued up to and including the day of the trigger shot.

### Possible Side Effects: (Incidence <5%)

Abdominal bloating, bruising or reaction at injection site, headache, nausea, vaginal bleeding.

### Please Note:

Please notify nurse if you have a latex allergy.

## GnRH Agonist

### Purpose:

The GnRH Agonist is used to suppress the natural hormone cycle and to prevent premature ovulation.

**Types:** Lupron® (Leuprolide Acetate)

**Administration:**  
Subcutaneous injection



### Cycle Day Started:

Usually begun on Cycle Day 21 of the cycle prior to gonadotropin treatment, however this depends on your normal menstrual cycle length. Menses usually follow in 8-10 days post-injection.

### Possible Side Effects:

Bloating, bruising at injection site, hot flashes, headache, mood swings, insomnia, vaginal dryness. Most of these effects happen only after menses has occurred.

## Ovulation Trigger Shot

### Purpose:

The trigger shot mimics the natural surge of lutenizing hormone (LH) in the body and matures the oocytes (eggs).

**Types:** Ovidrel® (Human Chorionic Gonadotropin – hCG)

**Administration:** 2 subcutaneous Ovidrel® injections must be taken **within 10 minutes of the scheduled time and in the exact dose instructed**. Failure to perform the trigger shot appropriately may result in the cancellation of the egg retrieval.

**PLEASE – SET YOUR ALARM CLOCK!**



### Possible Side Effects:

Headache, bloating, irritability, pain at the injection site, ovarian hyperstimulation syndrome.

### Please Note:

Ovidrel® is a controlled substance in New York State and only certain pharmacies will dispense the drug. Please check to confirm if your pharmacy can accept an electronic prescription for Ovidrel®/hCG.

## Alternate Ovulation Trigger

### Purpose:

Your trigger medication will be decided based upon your response to the stimulation medications. While most cycles are triggered using Ovidrel®, if your physician deems it appropriate, you may receive instructions for Lupron® (Leuprolide Acetate) or Lupron® plus hCG/Ovidrel® instead of hCG/Ovidrel® as the trigger to cause the final maturation of the eggs.

### Administration:

Subcutaneous injection. If Lupron® is used as a trigger, it will be administered as a 40 units dose and the Ovidrel® dose may be lowered.



**If you do not have insurance coverage for medications (“self-pay”), we recommend waiting to buy the trigger injection until it is clear which type will be needed.**

# Medication Teaching Videos

Brand Names	Medication Type	Purpose	Training Video
<b>Gonal-F or Follistim</b>	Gonadotropin (FSH)	Ovarian Stimulation	Gonal-F: <a href="https://www.youtube.com/watch?v=K_MvNC3y1t0">https://www.youtube.com/watch?v=K_MvNC3y1t0</a> Follistim: <a href="https://www.youtube.com/watch?v=0iz5zu13Gnk">https://www.youtube.com/watch?v=0iz5zu13Gnk</a>
<b>Menopur</b>	Gonadotropin (HMG)	Ovarian Stimulation	Menopur: <a href="https://www.youtube.com/watch?v=HBrRpb436A0">https://www.youtube.com/watch?v=HBrRpb436A0</a>
<b>Low Dose HCG</b>	Gonadotropin (HMG)	Ovarian Stimulation	Low Dose HCG: <a href="https://www.youtube.com/watch?v=J08uaPgRRqw">https://www.youtube.com/watch?v=J08uaPgRRqw</a>
<b>Cetrotide or Ganirelix Acetate</b>	GnRH Antagonist	Prevent Premature Ovulation	Cetrotide: <a href="https://www.youtube.com/watch?v=UZIMyra_WNc">https://www.youtube.com/watch?v=UZIMyra_WNc</a> Ganirelix: <a href="https://www.youtube.com/watch?v=m1pDSK-1pHM">https://www.youtube.com/watch?v=m1pDSK-1pHM</a>
<b>Ovidrel or Pregnyl or Lupron</b>	Trigger Injections	Mature follicles & release eggs (TIMED CAREFULLY!)	Ovidrel: <a href="https://www.youtube.com/watch?v=mmD_Fi4LcS0">https://www.youtube.com/watch?v=mmD_Fi4LcS0</a> Pregnyl: <a href="https://www.youtube.com/watch?v=RtC49jsxcUc">https://www.youtube.com/watch?v=RtC49jsxcUc</a>

# Oocyte Retrieval

The oocyte retrieval procedure is scheduled  
**34-36 hours**  
 after the ovulation trigger.

You cannot eat or drink within 6 hours of your egg retrieval.



Do not take aspirin, NSAIDs (Motrin, Aleve, Advil, Naprosyn) or any medication, herb or other substance that can interfere with platelet function during your treatment cycle. Doing so will increase your risk of having a bleeding complication from the egg retrieval.

You will be introduced to the anesthesiologist who will administer intravenous sedation. The egg retrieval procedure generally takes  
**5-10 minutes**  
 and you will be sedated for the duration of the procedure.



Recovery typically takes

**1 hour**

but can be longer depending on your body's response to anesthesia.

During this time, you will be evaluated for pain and given post-operative instructions.

Because you will receive anesthesia, you **must be discharged to the care of an adult escort who will bring you home safely.**



No escort?  
 No retrieval.  
 No kidding.

This is a safety measure mandated by NYU Medical Center.



Oocyte Retrieval:  
**Complete!**

Plan to rest at home for the full day of your egg retrieval.

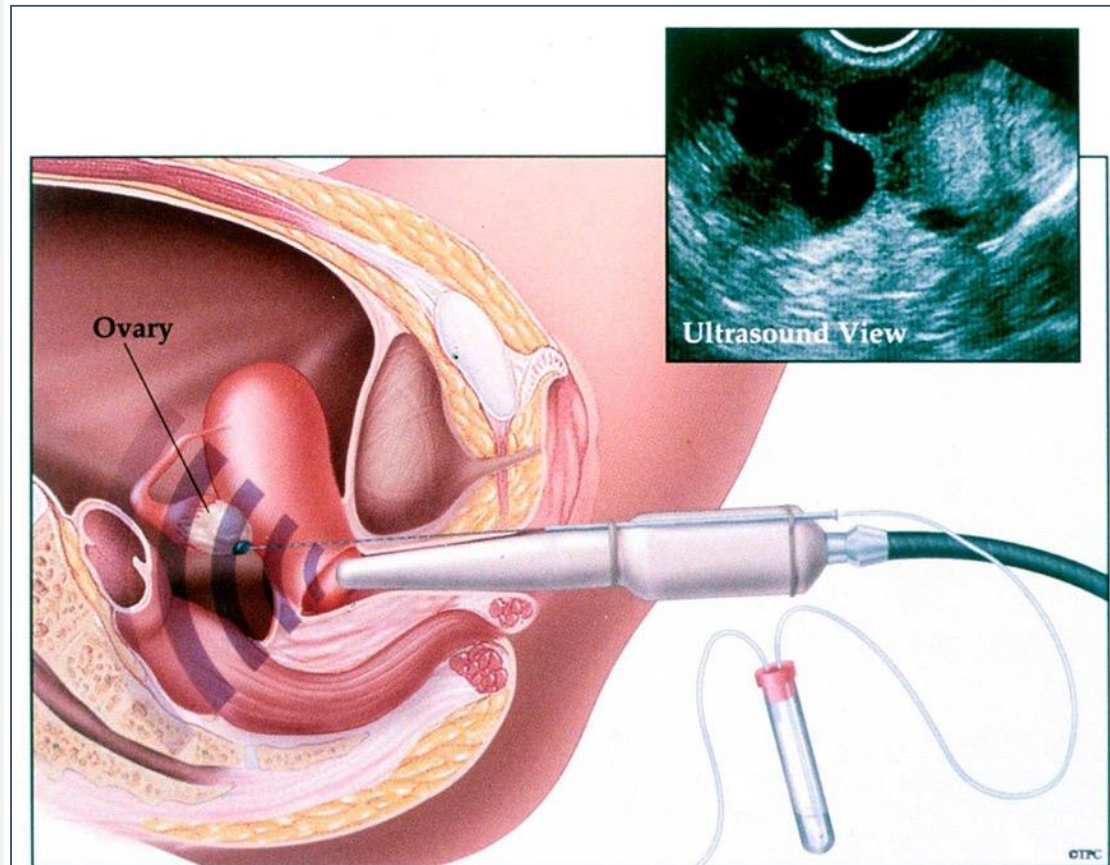


# Oocyte Retrieval: Reminders

- Retrievals begin around 9:30AM ET each day. Retrievals are scheduled approximately every 30 minutes until all are completed.
- Your retrieval will occur 34-36 hours after your trigger injection. Your trigger injection must be taken within 10 minutes of the scheduled time and in the exact dose instructed. **Please set your alarm clock for your trigger injection!**
- When you wake up on the morning of your scheduled egg retrieval, please remember that you cannot eat or drink within 6 hours of your egg retrieval. If directed, take your medications with a sip of water.
- Small lockers are available onsite, but please do not bring any valuables. Come as you are! Please do not wear jewelry or make-up to your egg retrieval procedure.
- When you arrive at 159 E 53<sup>rd</sup> Street, Floor 3, you will check in on the 5<sup>th</sup> floor in our main reception area. You will then be directed to the 6<sup>th</sup> floor where our procedure room is located. Our nursing team will perform an intake evaluation and prepare you for the egg retrieval. You will be introduced to the anesthesiologist who will administer intravenous sedation.
- The egg retrieval procedure typically takes 5-10 minutes. You will be sedated for the duration of the procedure. Recovery generally takes 1 hour but can be longer. During the recovery period, you will be evaluated for pain and given post-operative instructions.
- Because you will receive anesthesia, you must be discharged to the care of a responsible adult who will bring you home safely. This is a safety measure mandated by NYU Langone Medical Center and AAAASF. **No Escort. No Retrieval.**
- Because you will receive anesthesia, **you must be discharged to the care of a responsible adult** who will bring you home safely and remain with you for **12-24 hours post-discharge**. Your escort will need to enter our office to pick you up, and while onsite they will be required to sign discharge instructions. This is a safety measure mandated by NYU Langone Medical Center and AAAASF. **No Escort. No Retrieval.**
- The day after your retrieval, we will call you to share the final number of mature eggs cryopreserved and will review the cryostorage plan for your eggs. During your next conversation with your physician, you will discuss the outcome of this retrieval and review your care plan.



# Oocyte Retrieval



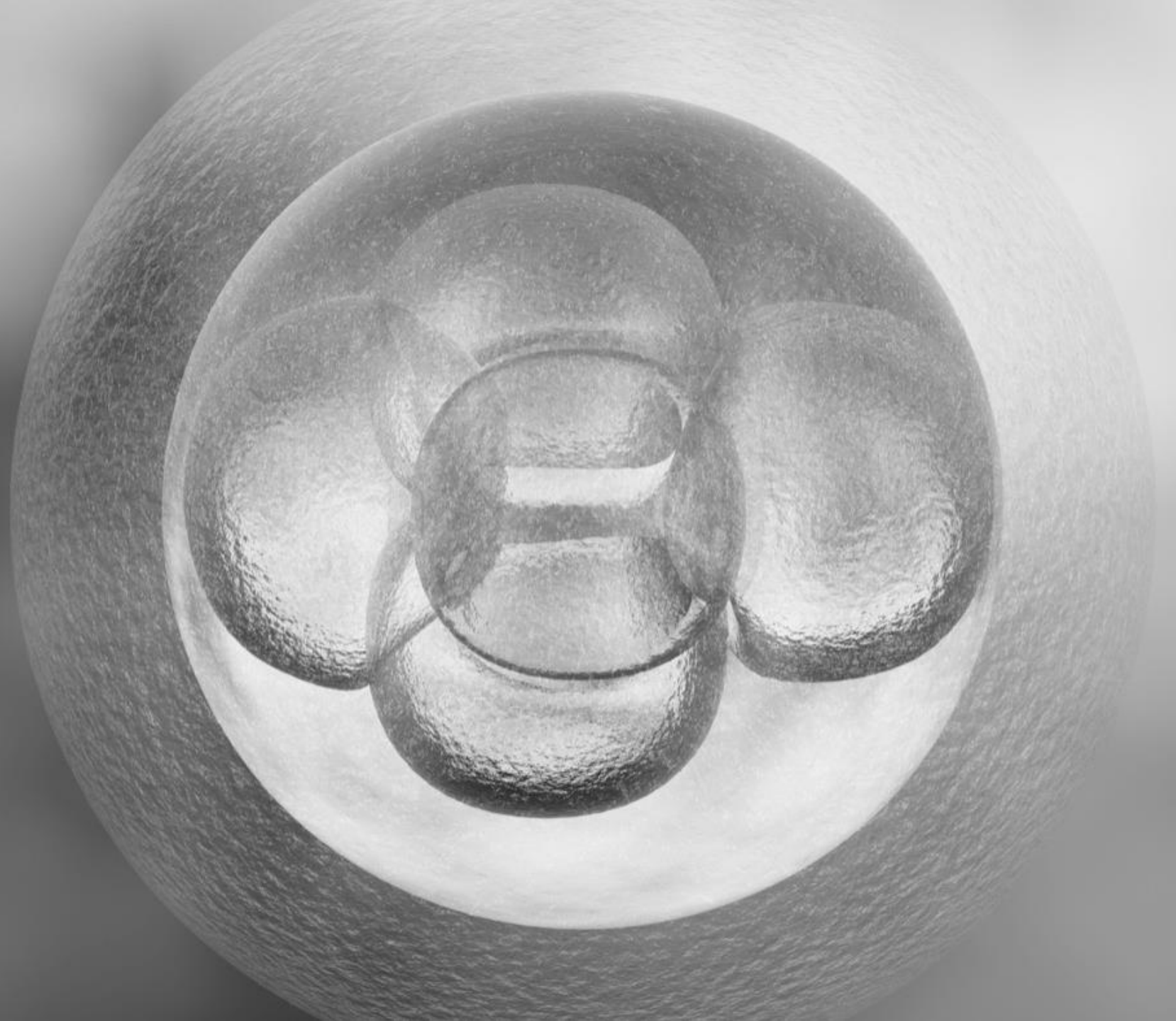
Using ultrasound to view the ovary, the physician inserts the needle through the wall of the vagina into the ovary and removes the egg

Illustration Courtesy of Organon



### Section 3: Cryopreservation

## Oocyte Cryopreservation ("Egg Freezing")



# Oocyte Cryopreservation

At retrieval, eggs are evaluated by an embryologist.

Mature eggs are frozen using liquid nitrogen in a process called “vitrification.”

The process of **vitrification** has three critical components: first, eggs are exposed to high concentrations of cryoprotectants to allow rapid dehydration of cells; then the eggs are loaded into tiny storage straws that will facilitate ultra-rapid cooling; finally, the straws containing the eggs are cooled as fast as possible, typically at thousands of degrees per minute.

Once frozen, eggs can be stored indefinitely in liquid nitrogen at  $-180^{\circ}\text{C}$ . Frozen eggs are stored onsite at NYU Langone Fertility Center. All NYULFC patients will receive an account with our tissue management partner, Embryo Options.

Patients may log in to the Embryo Options portal at any time to manage their cryostored tissue (online education, appointment requests to use cryopreserved eggs, online bill-pay, disposition management, and more). **If you wish to use your tissue, contact your Patient Care Coordinator to start a new cycle.** If you wish to transport your tissue elsewhere, transport fees may apply. If you wish to discard your tissue (meaning you do not wish to use the tissue), you can complete your tissue disposition consents in Embryo Options.





# After Your Egg Retrieval...

Plan to rest at home on the day of the egg retrieval. Coconut water, PJs, and Netflix are your friend.

*Do:* Rest & Relax! *Don't:* Operate heavy machinery.

The day after your retrieval, we will call you to share the final number of mature eggs cryopreserved. During your next conversation with your physician, you will discuss the outcome of this retrieval and review your care plan.

Your next menstrual period will occur approximately two weeks after the egg retrieval if an Ovidrel trigger shot was administered and one week after if a Lupron® trigger shot was administered.

You must keep our office informed of your current address, email address, and telephone number. If the office is unable to contact you via phone or mail for necessary correspondence, your eggs may be discarded. Please update us if/when your contact information changes!



Egg with surrounding cells immediately after retrieval



Mature egg with surrounding cells removed



All NYULFC patients will receive an account with our tissue management partner, **Embryo Options**.

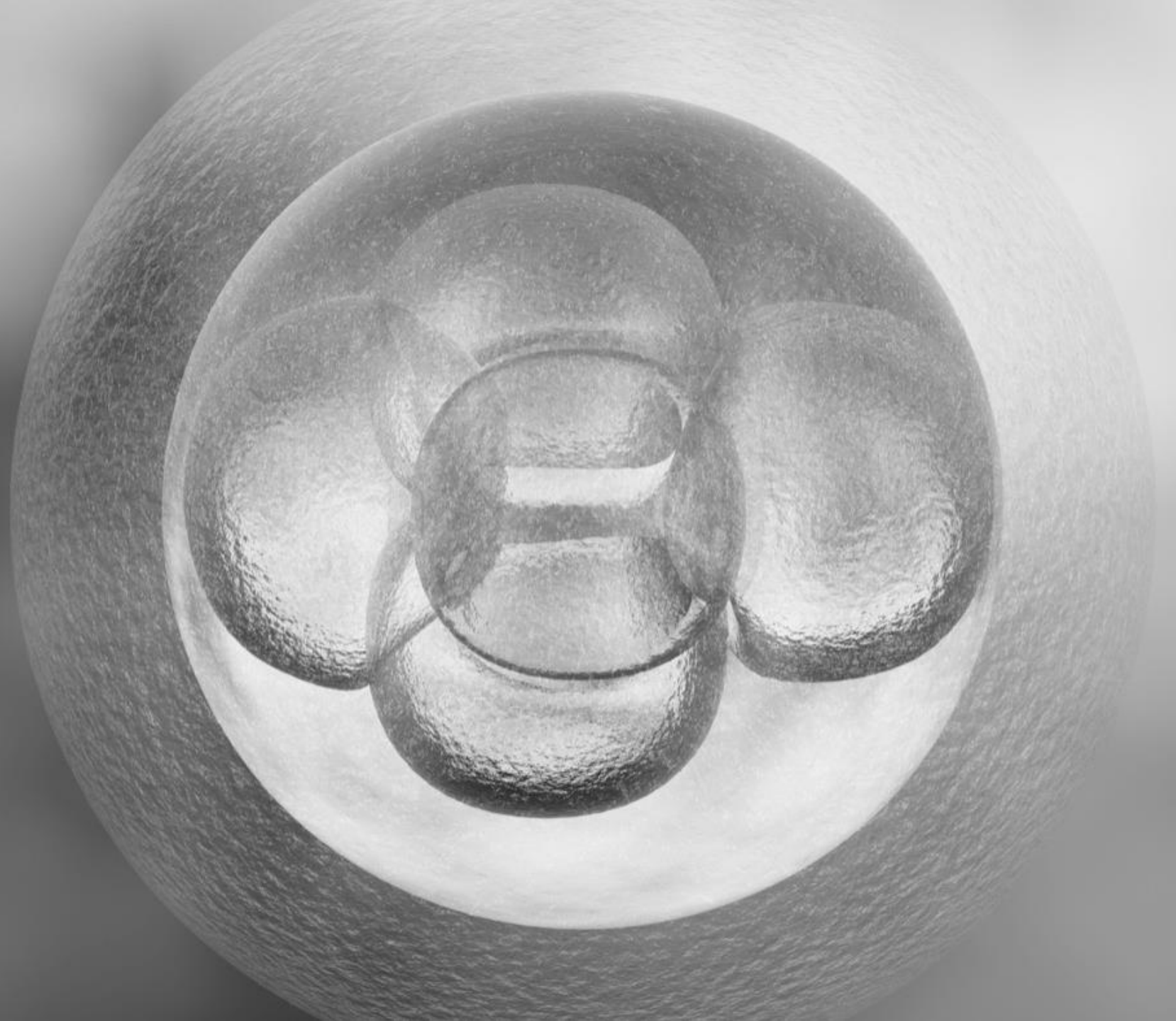
Patients may log in to the Embryo Options portal at any time to manage their cryostored tissue (online bill-pay, appointment requests to use cryopreserved eggs, online education, disposition management, and more).

Learn more at: [nyulangone.embryooptions.com/About.aspx](https://nyulangone.embryooptions.com/About.aspx)



Section 4: Wellness

## Wellness & Support for NYULFC Patients





# Mind & Body Support

## Acupuncture Services



Acupuncture services are provided by Lara Rosenthal, L.Ac.

Acupuncture is offered onsite at NYULFC 4 days per week.\*

Acupuncture can be safely used prior to and concurrently with fertility medications and procedures.

If you are interested in acupuncture for fertility, please call 212-807-6769.

(\*This service is temporarily suspended due to COVID-19.)

## Mind-Body Support Group



NYULFC patients have access to a Mind-Body support group provided by Helen Adrienne, LCSW, BCD.

Mind-Body support is offered as a series of individual classes, a one-day group program, or on an individual consultation basis.

The main goal of Mind-Body support is to help patients realize that while they cannot control infertility, they can control how they navigate it.

If you are interested in Mind-Body support, please call 212-758-0125.

## Yoga for Fertility



Yoga for Fertility is provided by Barrie Raffel.

Yoga for Fertility is safe to practice at any time during your fertility treatment cycle.

If you are interested in Yoga for Fertility, please contact Barrie at [barrieraffel@gmail.com](mailto:barrieraffel@gmail.com)

## Nutrition for Fertility

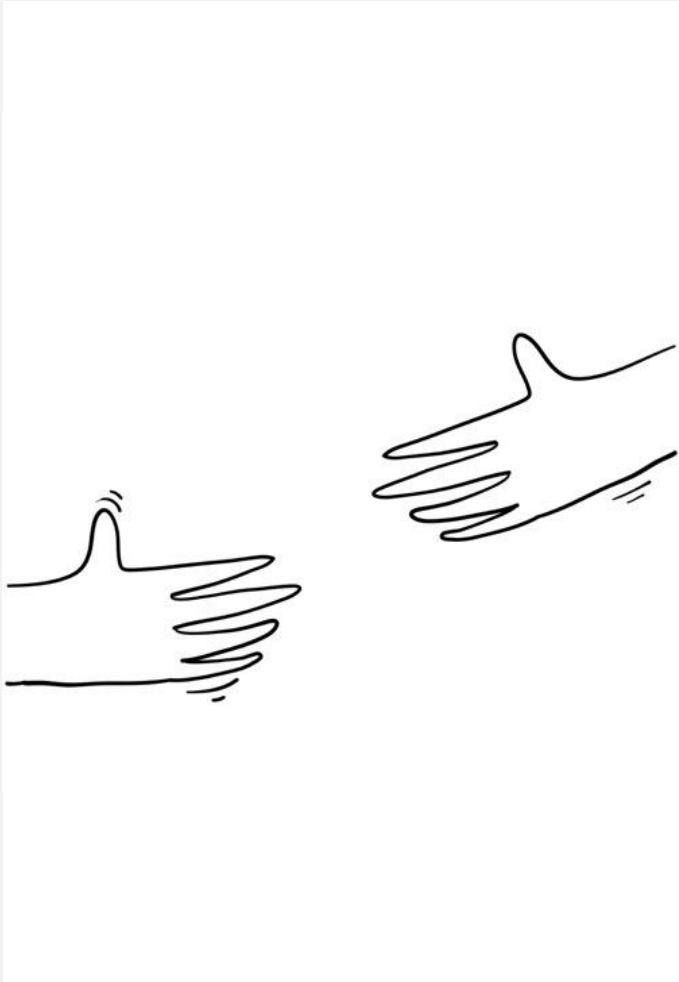


Nutrition for Fertility is provided by dietitians at Rooted Wellness.

Nutrition for Fertility can be started at any time during your fertility treatment cycle.

If you are interested in Nutrition for Fertility, please email [sarah@rootedwellness.com](mailto:sarah@rootedwellness.com) (Sarah Rueven) or [claire@rootedwellness.com](mailto:claire@rootedwellness.com) (Claire Virga).

# Psychological Support Services



NYULFC patients have access to onsite and offsite psychologists, all of whom have decades of experience helping couples to navigate the stressors created throughout the fertility treatment journey.

Consultations, treatment, and support sessions are available for couples and/or individuals.

Consultations are mandatory for all patients using donor gametes to create embryos.

If you are interested in psychological support, please call 212-263-0054 for information or to book your appointment.

## Information & Support

We recognize that you have a choice in care providers, and we are committed to providing compassionate, individualized, and cost-effective service.

We're happy to go at your pace and answer any questions you may have. Ask questions during your visits, or call us at **212-263-8990**. We're here for you.

Information resources are available online at

- [ASRM.org](http://ASRM.org)
- [Resolve.org](http://Resolve.org)
- [SART.org](http://SART.org)
- [cdc.gov/art](http://cdc.gov/art)

Visit our website at [www.FertilityNY.com](http://www.FertilityNY.com) for more information, including a **Patient Resources section** with forms, orientation slides, and Injection Training videos.

## Issues to Consider Before Beginning an Egg Freezing Cycle: Potential Health Risks & Side Effects of Egg Freezing

- Severe ovarian hyperstimulation (OHSS) which can result in hospitalization.
  - Depending on a woman's sensitivity to fertility medications, moderate to severe hyperstimulation can occur, and may require frequent monitoring or changes to the cycle, including cancelation or postponement of the embryo transfer, or hospitalization.
  - Please call our office immediately if you feel very bloated or have a rapid weight gain. Consult the OHSS information sheet in your patient information packet for details.
- Adverse reaction to medications
  - Allergic reaction to anesthesia or fertility medications.
  - Anesthesia medication may cause constipation. Colace® is available over-the-counter for this side effect.

# Anesthesia and Body Mass Index (BMI) Policy

**BMI 38 or Greater:**

**Anesthesia consult required prior to clearance for a procedure**

**Day of Retrieval: BMI  $\leq$  41.99**

**Retrieval may be performed with usual sedation as determined by anesthesiologist**

**Day of Retrieval: BMI  $42 \leq 44.99$**

**May be eligible for mild sedation. Patient may have recall and will likely move during procedure.**

**Day of Retrieval: BMI  $45 \leq 49.99$**

**May only receive monitored anesthesia care without any type of sedation.**

**Day of Retrieval: BMI  $50 \leq$**

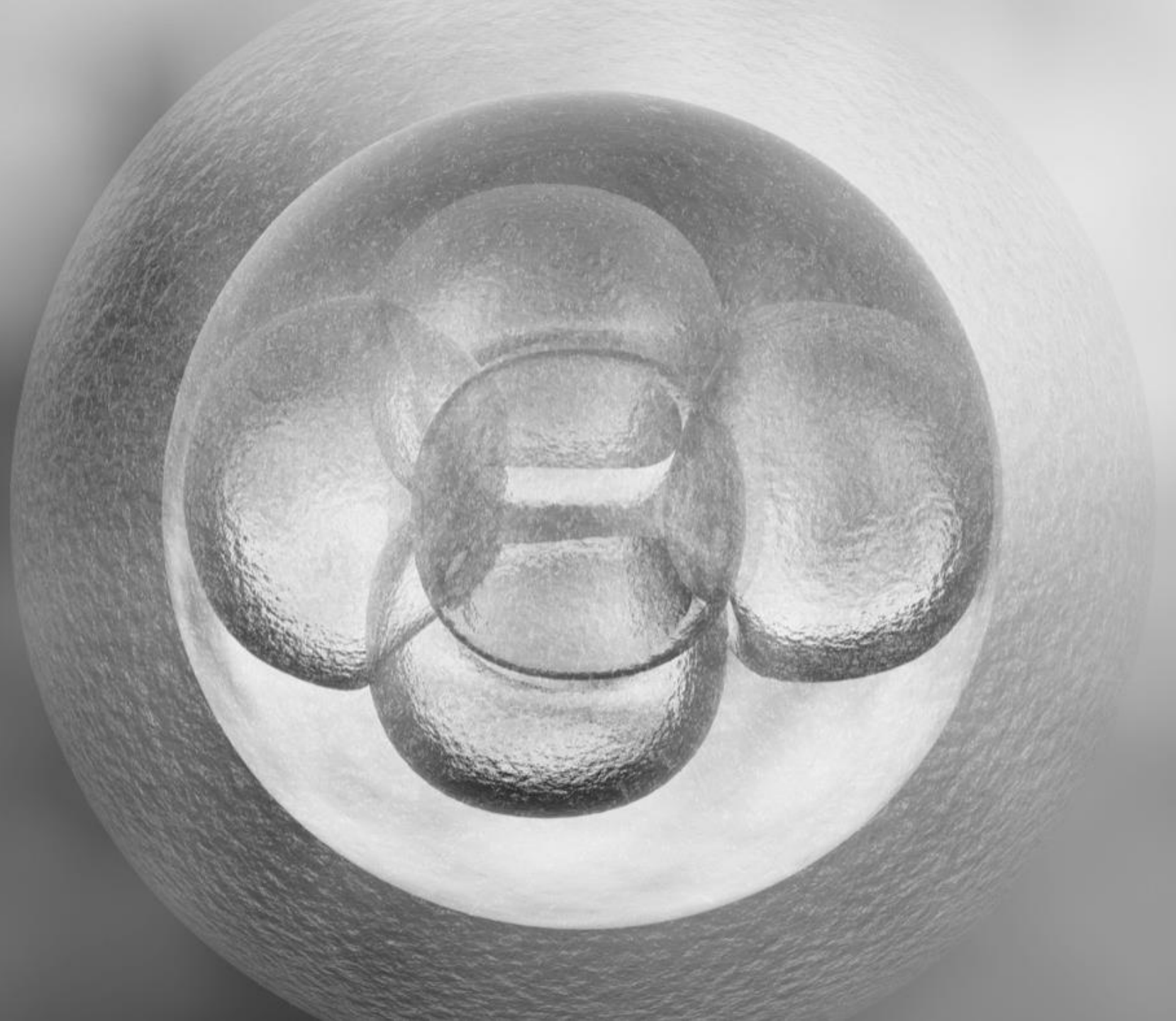
**Shall not undergo a procedure at this facility.**

**During the preoperative consultation, comorbidities such as hypertension, cardiovascular diseases, asthma, obstructive sleep apnea, cancer and other issues are also considered.**



**Section 4: Research**

**Research Studies and  
Patient Participation**







## Research Studies at NYULFC

**NYULFC is dedicated to the mission of advancing science and improving healthcare through scientific discovery.**

As a leading center in academic research, our faculty and staff are actively engaged in multiple research studies at any time which we hope will advance and improve infertility benchmarks and fertility treatment options.

The purpose of our sample collection and repository is to enable the research use of superfluous biospecimens, which are not needed for diagnostic or clinical use, and which would otherwise be discarded

**Participation in research studies is voluntary**, which means it is your choice if you would like to participate or not. Your decision as to whether or not to participate will not affect the care you receive during your treatment cycle.

**Providing consent for research does not impact your medical treatment in any way.** Research consents must be witnessed by an NYU Langone Fertility staff member.

Our research studies follow a transparent process of independent Institutional Review Board (IRB) evaluation and careful informed consent. The IRB reviews all proposed studies and ensure that they are conducted in a manner which safeguards and promotes the health and welfare of subjects.



## Research Studies at NYULFC

**The goal of our research is to optimize fertilization, embryo development and culture, in vitro maturation, cryopreservation, understanding egg and embryo viability as well as other clinical indications of infertility.**

**Our research studies use biological material** (procedural by-products, non-viable specimens or materials deemed non-usable to create live-born pregnancies) from your cycle that would normally be discarded during the routine course of your cycle.

**Discarded biological materials may include** collection of minimal residual sample from sperm preparations, granulosa cells, cumulus cells, fluids from the ovarian follicles that are harvested during oocyte retrieval, immature oocytes, abnormally fertilized oocytes or embryos of such poor quality that are not suitable for transfer.

**Tissue donated to research is never transferred to human subjects.** NYULFC will only collect, use, and store de-identified specimens that are donated for research. Donated research specimens – including DNA material – will not be used to identify patients and will be destroyed once research has been done.

**Research conducted using these otherwise discarded biological materials** will help us learn more about factors of fertility and infertility in order to better understand various reproductive disorders.

If you have questions about the research or your participation,  
please e-mail the senior clinical research coordinator at

**[Fang.Wang@nyulangone.org](mailto:Fang.Wang@nyulangone.org)**

## **STUDY PARTICIPANTS NEEDED: ASSESSING STRESS IN PATIENTS UNDERGOING ELECTIVE EGG FREEZING**

**Goal:** To better understand the varying degrees and types of stress experienced by elective egg freezing patients



### **Eligibility:**

- Voluntary participation
- Between ages 18 to 42
- Plan to undergo 1<sup>st</sup> cycle of elective egg freezing
- Able to complete a pre- and post-egg retrieval online survey
- **Optional:** post-egg retrieval interview to discuss experience during egg freeze cycle

**Compensation:** Amazon gift card

### **For more information:**

Dr. Frederick Licciardi (*Lead Investigator*)

Please email my research team at

[carlos.parra@nyulangone.org](mailto:carlos.parra@nyulangone.org)

# Questions?



E: [Haley.Penny@nyulangone.org](mailto:Haley.Penny@nyulangone.org)



T: 212-263-8990



F: 212-263-7853

