# Saint Mary's Hospital

**Department of Reproductive Medicine** 

# Frozen Embryo Transfer Booklet

Please bring this booklet with you to every appointment

Patient Name:

**Hospital Number:** 





# **Table of Contents**

		Page
1.	Overview	3
2.	Buserelin chart	4
3.	Buserelin plus HRT tablet chart	5
4.	Buserelin information	6
5.	HRT (Oestrogen tablets) information	7
6.	Progesterone (Luteal Support) information	8
7.	Day of embryo transfer	9
8.	The embryo transfer procedure	10
9.	Your contact date	10
10.	Outcome of treatment	11
11.	Own notes	11

#### **Overview**

The injection you will administer is called Buserelin. Buserelin is used to temporarily suppress your hormones before you commence Oestrogen tablets (HRT).

This injection will commence in the luteal phase, usually around day 21 (this will depend on your cycle lengths), and will continue until day 15 of your HRT cycle (of taking Oestrogen tablets).

After approximately 14 days of injecting Buserelin you will attend for a blood test to check that your oestrogen and luteinising hormone levels are low. You will be advised of this date by a nurse. If your blood test is satisfactory, you will be asked to commence your Oestrogen tablets (HRT) together with your Buserelin. The nurse will explain this information and will fill in your chart on page 5.

#### Do not start your Oestrogen tablets unless advised to do so.

Following approximately 15 days of taking Oestrogen tablets you will then be asked to attend for an ultrasound scan. This is to make sure the lining of your womb (endometrium) is thick enough to receive the embryo.

If the lining of the womb is too thin, you may be asked to:

- 1. Continue on the Oestrogen tablets for a few more days then attend for a further scan.
- 2. Double the dose of your Oestrogen tablets for a few more days, and then attend for a further scan.
- 3. Stop this treatment cycle.

You will be informed of any change to your treatment plan.

On the day of your planned embryo transfer, a member of the laboratory team will ring you and let you know if the embryo(s) have survived the thaw process and what time to arrive on Ward 90. You will need a full bladder for the embryo transfer and you will be informed when to fill your bladder by a member of the laboratory team.

All medication will be delivered to you at your home address.

Please ensure all your contact telephone numbers are correct and please inform the nurses of any changes.

If you experience any problems throughout treatment, please call the nursing team on (0161) 276 6000 and select Option 2. Monday to Sunday, 8.00 am – 4.00 pm.

## **Buserelin Chart**

Date	Buserelin	Please tick
L		

Paperwork completed by:
Name and signature:
Please attend the Department of Reproductive Medicine for a blood test between 7.45 am and 8.30 am on:

If you have not started a period by the day before you are due for this blood test, please contact the unit on (0161) 276 6000 (Option 2).

Please choose a convenient time between 4.00 pm and 7.00 pm to take your injections. Then continue to take your injections at the same time each day.

# **Buserelin plus HRT tablet chart**

	Treatment	Date	
Day 1-5	Buserelin Injection Oestradiol Valerate tablets 2mg to be swallowed whole once each day		
Day 6-9	Buserelin Injection Oestradiol Valerate tablets to 2mg to be swallowed whole twice a day		
Day 10 Onwards	Buserelin Injection Oestradiol Valerate tablets to 2mg to be swallowed whole three times a day		
Day 15 Scan	Attend the unit for a scan at		
Day 0	Last Buserelin Injection. Oestradiol Valerate tablets 2mg to be swallowed whole three times a day. Progesterone Pessary 1x 400mg vaginally at night.		
Day 1	Oestradiol Valerate tablets 2mg to be swallowed whole three times a day. Progesterone Pessary 1x400mg vaginally at night.		
Day 2	Oestradiol Valerate tablets 2mg to be swallowed whole three times a day. Progesterone Pessary 1x400mg vaginally morning and night.		Day 2 embryo transfer
Day 3	Oestradiol Valerate tablets 2mg to be swallowed whole three times a day. Progesterone Pessary 1x400mg vaginally morning and night.		Day 3 embryo transfer
Day 4	Oestradiol Valerate tablets 2mg to be swallowed whole three times a day. Progesterone Pessary 1x400mg vaginally morning and night.		
Day 5	Oestradiol Valerate tablets 2mg to be swallowed whole three times a day. Progesterone Pessary 1x400mg vaginally morning and night.		Day 5 embryo transfer

Paperwork	comp	leted	by:

Name and signature:....

#### **Buserelin**

Buserelin is a medication that stops the ovaries producing oestrogen. It works by acting on the pituitary gland in your brain to stop the production of natural hormones that control the release of eggs from your ovaries.

#### Possible side effects:

- Mood swings.
- Hot flushes.
- Vaginal dryness.
- Headaches.
- Nausea.
- Local irritation at injection site.

#### How to use Buserelin:

- 1) Remove Buserelin vial from the box.
- 2) Flick the blue cap off the lid (this does not need to be replaced afterwards).
- 3) Take out a needle from the pack you were given.
- 4) Remove the orange cap from needle.
- 5) Pierce grey bung of Buserelin with the needle.
- 6) Tip the vial upside down.
- 7) Pull down the plunger to just past your required dose.
- 8) Remove the needle from the vial.
- 9) With the needle pointing upwards, flick the syringe so that any air bubbles move to the top.
- 10) Pull the plunger down and push out the air, ensuring the top of the black plunger lines up with your required dose.
- 11) Pinch an inch of fat below your belly button.
- 12) Inject the needle at a 45 degree angle.
- 13) Push the plunger to give yourself the whole injection.
- 14) Remove the needle and dispose of it in the sharps bin that you have been provided with.
- 15) Put the remaining Buserelin in the refrigerator.

# **Storage information**

Buserelin needs to be stored in a refrigerator once opened.

# **HRT** – Oestrogen tablets

## What does it do?

These tablets help thicken the lining of your womb ready to accept your embryo(s). The day you start these will vary. The nurse will inform you when to start these tablets.

#### Possible side effects:

- Headaches.
- Hot flushes.
- Nausea.
- Vaginal dryness.

These tablets are to be taken orally (swallowed whole) as directed by the nurse. This information is on your chart on page 5.

# **Storage information**

Please store in a cool dry place.

# **Progesterone (luteal support)**

This is often given in the form of a vaginal or rectal suppository.

#### What does it do?

Progesterone is a natural female hormone, produced in the body.

It is used in IVF treatment to help support the endometrium (lining of the womb) and a possible early pregnancy.

Possible side effects:

- Diarrhoea.
- Flatulence (wind).
- Soreness in your vagina or rectum.
- Headaches.

After using progesterone you may notice some leakage after the pessary has dissolved. Do not worry; this is quite normal when using medicines that are inserted into the vagina or rectum.

#### How to use

Always wash your hands before and after inserting the pessary.

To insert into the:

**Vagina** – place the pessary between the lips of the vagina and gently push the pessary upwards and backwards using your finger; or applicator if one is available. Insert as far as it feels comfortable.

**Rectum** – gently push the pessary into the rectum for about one inch. Your muscles will hold the pessary in place when it is in far enough. Squeeze your buttocks together for a few seconds. This route can only be used with cyclogest pessaries.

# **Storage information**

Store below 25 degrees centigrade in a dry place.

## Day of embryo transfer

On the day of your planned embryo replacement, a member of the laboratory team will ring you and let you know if the embryo(s) have survived the thaw process and what time you need to arrive on Ward 90. You will need a full bladder for the embryo transfer; you can fill your bladder by drinking water. You will be advised when to fill your bladder by a member of the laboratory team.

You will be able to go straight home after your replacement if you feel well enough. If required, you may use Paracetamol to relieve any mild pain or discomfort.

You may experience mild pain, slight vaginal discharge/water loss from the cervix and/or vaginal bleeding. These are common symptoms and do not indicate if your treatment has or has not been successful.

Please use your pessary today once you get home and one tonight. Continue with your tablets and pessaries until the outcome of your treatment is known. A delayed period does not necessarily indicate a pregnancy as the **Progesterone** may stop you from having a bleed. If you do have any bleeding, this could be due to a number of reasons and does not always mean that the treatment has not worked.

We advise you to live normally but avoid strenuous exercises and activities over the next 2 weeks. Avoid additional medication unless specifically prescribed by a doctor.

The only way to confirm a pregnancy is to do a pregnancy test. We advise that you only do the test on the date given to you by the nurses as you may otherwise get a false result (please see overleaf for this date).

You should use the first urine sample in the morning and a good quality pregnancy test kit available from your local chemist.

A nurse will ring you on your contact date to confirm your pregnancy test result.

If you have any concerns, questions or worries please do not hesitate to call the nursing staff on **(0161) 276 6000 (Option 2).** Monday to Sunday, 8.00 am – 4.00 pm.

We appreciate that this can be an anxious time in your treatment. If you feel that you require any extra support please do not hesitate to contact us to make an appointment with one of our counsellors on **(0161) 276 6000 (Option 7)**, Monday to Friday, 9.00 am – 4.00 pm

## The embryo transfer procedure

When you arrive on the ward, a member of the nursing team will see you and explain what will happen next and go through the rest of the treatment schedule with you.

You will then be escorted to theatre, where the doctor, nurse and a nursing assistant will introduce themselves to you.

Together with an embryologist, your details will be checked prior to the procedure.

You will then be asked to remove your lower garments, including your underwear. You will lie on the couch and the nurses will place your legs in stirrups.

The nurse will then place the scan probe on your abdomen to show the uterus lining of the womb.

A speculum (the same instrument used during a smear test) is inserted into your vagina; this instrument is used to open the vagina to allow the doctor to see your cervix. The vagina is then cleaned before a small catheter (tube) is inserted through the cervix; this may take a few minutes. When the doctor is ready the embryo(s), which are loaded into another small catheter, is passed to the doctor who will insert it through your cervix and into your uterus.

The procedure will take approximately 20 minutes to complete and can cause some discomfort, however pain relief is not normally required or given. Your partner is welcome to attend.

#### Your contact date

test.

You must continue taking the Oestrogen tablets and Progesterone until advised otherwise. You will be given a contact date, at which time you will be required to do a pregnancy

You can buy a good quality pregnancy kit from your local chemist.

You should use the first urine sample in the morning.

Please do a pregnancy test on	
Date	
Use the first urine sample of the morning.	

A nurse will ring on this date to confirm your result and inform you of what you need to do next.

Please do not stop any medication until advised to do so.

#### **Outcome of treatment**

On your contact day, a nurse will ring you to confirm your pregnancy test result.

If your test is negative you will be asked to stop all your medication and will be offered a follow up appointment.

The counsellors are also available for support at this difficult time. If you wish to make an appointment you can ring the appointments line on **(0161) 276 6000 (Option 7)**. Monday – Friday, 9.00 am – 4.00 pm.

If you wish to start a new frozen embryo cycle, you need to wait until your next period starts. If you do not have any embryos left in storage, your notes will be reviewed and a decision made as to what the next steps will be. You will receive a letter advising you of the outcome of this.

If your test is positive, you will be asked to attend for a scan a few weeks later to check the position of the pregnancy as well as the number and heartbeat(s) of the implanted embryo(s).

The tablets and pessaries should be continued until week 12 of your pregnancy. Once your pregnancy is confirmed by scan, the nurse will give you further instructions regarding these medications. Folic acid should also be continued until 12 weeks of pregnancy.

Please use this space to make your own notes:

## **No Smoking Policy**

Please protect our patients, visitors and staff by adhering to our no smoking policy. Smoking is not permitted in any of our hospital buildings or grounds, except in the dedicated smoking shelters in the grounds of our Central Manchester site.

For advice and support on how to give up smoking, go to http://www.nhs.uk/smokefree.

## **Translation and Interpretation Service**

It is our policy that family, relatives or friends cannot interpret for patients. Should you require an interpreter ask a member of staff to arrange it for you.

ننص سياستنا على عدم السماح لافراد عائلة المرضى او اقاربهم او اصدقائهم بالترجمة لهم. اذا احتجت الى مترجم فيرجى ان تطلب ذلك من احد العاملين ليرتب لك ذلك.

ہماری یہ پائیسی ہے کہ خاندان ، رشتہ دار اور دوست مریضوں کےلئے ترجمہ نہیں کرسکتے۔ اگر آپ کومترجم کی ضرورت ہےتو عملے کےکسی رُکن سے کہیں کہ وہ آپ کےلئے اس کا بندوبست کردے۔

ইহা আমাদের নীতি যে, একজন রোগীর জন্য তার পরিবারের সদস্য, আত্মীয় বা কোন বন্ধু অনুবাদক হতে পারবেন না। আপনার একজন অনুবাদকের প্রয়োজন হলে তা একজন কর্মচারীকে জানান অনুবাদকের ব্যবস্থা করার জন্য।

Nasze zasady nie pozwalają na korzystanie z pomocy członków rodzin pacjentów, ich przyjaciół lub ich krewnych jako tłumaczy. Jeśli potrzebują Państwo tłumacza, prosimy o kontakt z członkiem personelu, który zorganizuje go dla Państwa.

Waa nidaamkeena in qoys, qaraaboamasaaxiiboaysanu tarjumikarinbukaanka. Haddiiaad u baahatotarjumaankacodsoxubinka mid ah shaqaalahainaykuusameeyaan.

我们的方针是,家属,亲戚和朋友不能为病人做口译。如果您需要口译员,请叫员工给您安排。







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