

The IUI Process

The IUI takes place in the comfort of our office and takes under 15 minutes. A tiny catheter is inserted into the cervix, which allows sperm to be injected directly into the uterus. We strongly recommend IUI for all patients. A patient can decline the IUI; however, the IUI treatment has been shown in numerous studies to increase the pregnancy chances for most patients. The IUI is performed in the morning and semen specimens should be dropped off within 60 minutes from collection or collected in office. The highly motile (swimming) sperm are concentrated in a washing process to eliminate components of semen that shouldn't ordinarily reach the uterus.

What To Expect After Your Cycle

One week after ovulation, you will need to get a blood test drawn at one of our offices to check your progesterone level. This helps us assess the quality of your ovulation and determines if you need to change your dose in a future cycle.

After two weeks, a blood pregnancy test is drawn to confirm pregnancy. If you are not pregnant after 3 cycles we usually recommend that you make an appointment for another consultation in our office to discuss other treatment options available to you.

Our Locations

Sewell

📍 570 Egg Harbor Road
Suite B4
Sewell, NJ 08080

☎ P 856.218.8863

Marlton

📍 400 Lippincott Drive
Suite 130
Marlton, NJ 08053

☎ P 856.596.2233

sjfert.com

Egg Harbor Township

📍 2500 English Creek Avenue
Suite 225
Egg Harbor Twp, NJ 08234

☎ P 609.813.2192

Our Specialists

*Board Certified in
Reproductive Endocrinology*



Stephen Sawin
MD



Peter Van Deerlin
MD



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Oral Ovulation Induction & IUI



“South Jersey Fertility has given us more joy than we could have ever imagined. We are so thankful!” - *The Laska family*



South Jersey
Fertility Center

About Ovulation Induction

Ovulation induction cycles are treatment cycles that use either oral or injectable follicle stimulating medications to help a woman's body release egg(s) during her reproductive cycle. Because ovulation induction also allows us to control the timing to egg release, this method is often paired with an IUI to help ensure that sperm and egg meet to achieve pregnancy.

Commonly used oral medications include Letrozole and Clomid. They are taken throughout a period of time to stimulate the growth of egg follicles. Once the follicles have reached a size that indicates egg maturity, an injectable medication is given to induce ovulation, also known as a trigger shot. Once the trigger shot is administered, an IUI is typically scheduled 24-36 hours later to increase the chances of sperm reaching a mature egg. The effectiveness of this therapy depends on many factors, such as age, the condition of the woman's fallopian tubes, and sperm quality. In general, the average success rates are 10-20% per try. There is a 7% risk of twins and 10% risk of mild side effects such as hot flashes, moodiness, nausea, headaches or breast tenderness.

Directions For Use

Not all women will ovulate with this treatment and not all those that ovulate will conceive. Usually 3 cycles constitutes a sufficient try with this therapy, but in some situations we will allow up to 6 cycles.

Your care team will inform you of your dosage. Take the medication every day for 5 straight days. If your dose is more than one pill per day, take them together once a day. Begin the pills on the 3rd day of your cycle (though if you have missed that "start day," you can begin them as late as day 5 of the cycle). We count the first day of full flow (not just spotting) as "day one." If your period seems odd, do a home pregnancy test or call our office before starting the Clomid. Call our office on the first day of your cycle to set up an ultrasound on day 2 to 5 to visualize the ovaries and obtain a blood draw for Estradiol and FSH. You will then be instructed to begin Clomid and an appointment will be set up for an ultrasound in our office to visualize the ovarian follicle(s). This is usually around day 12 or 13 of your cycle. The ultrasound allows us to confirm that an egg-containing follicle has matured to full size and to see how many eggs might be released. Sometimes a second ultrasound visit is

needed a few days later if the follicle is not yet full size. A blood draw is usually necessary at each ultrasound visit to confirm follicle readiness by checking estradiol and LH levels. In the case of women who don't ovulate reliably prior to the treatment, approximately 80% will ovulate if taking up to 3 pills per day. If there are no follicles larger than 10 mm at the first ultrasound (day 11-14), then we might have you initiate another 5-day course of Clomid or Letrozole at a higher dose right away without waiting for a period. In that case a repeat ultrasound will then be done one week later.

About Ovidrel

We usually recommend that a single shot of Ovidrel (HCG) be administered when a follicle reaches mature size. This increases the likelihood of a good ovulation. It also helps pinpoint the optimal day for sexual intercourse or for the insemination.

Typical Oral Ovulation Cycle Timeline

