



FERTILITY FACT SHEET

San Ramon / Orinda / San Jose

INFERTILITY EVALUATION

The following tests may be done as part of your infertility evaluation. Not all of these tests are appropriate for every patient.

1. **Semen Analysis (including strict morphology):** Evaluates male factor.
2. **Blood FSH and Estradiol Levels:** These hormones, when measured on the second or third day of a menstrual cycle, are predictive of a woman's ovarian reserve (whether she is running out of eggs).
3. **Blood Anti-Mullerian Hormone (AMH):** This blood test measures a hormone that predicts the number of functional eggs that remain within the woman's ovaries. The AMH test may be done at any time in a woman's cycle.
4. **Antral Follicle Count:** This test uses an ultrasound exam to count the number of antral follicles (fluid filled cysts containing immature eggs) within the ovaries. This test is used in conjunction with AMH and FSH to best determine a woman's ovarian reserve.
5. **LH Surge Testing (urinary):** This testing is done each morning at home using a urine sample and testing kit. When an LH surge (color change) is seen, you should call our office to schedule an ultrasound or other appropriate test/procedure. When combined with an ultrasound LH testing is a reliable predictor of ovulation.
6. **Ultrasound Verification of Folliculogenesis/Ovulation:** This is a painless office procedure which uses a vaginal ultrasound probe to accurately identify ovulation and egg development. It is often used to time inseminations and to evaluate ovarian reserve (antral follicle count).
7. **HSG:** An x-ray study to evaluate the uterus and Fallopian tubes.
8. **Saline Sonogram:** An ultrasound study to evaluate the uterus.
9. **Laparoscopy/Pelviscopy/Hysteroscopy/Tubal Dye Study:** An out-patient surgical procedure which enables us to visually examine the tubes, ovaries, uterus, and pelvic cavity. We can also determine if one or both tubes are open. Surgical repair of adhesions (scar tissue), endometriosis, ovarian cyst(s) or other abnormalities can frequently be done at the same time in order to eliminate the need for further surgery. You are asleep for this procedure and are generally able to return to normal activities within 2-3 days.