



30  
QUESTIONS  
TO ASK  
YOUR DOCTORS

ABOUT INFERTILITY AND TREATMENTS

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# Chapter 1: Are You Trying to Get Pregnant?

## ***Ask Your Ob/Gyn These 10 Questions***

When you and your partner make the decision that you are ready to start your family it can be a very exciting time in your life. First of all, you get to use baby-making as an excuse to rekindle some romance that may have slipped away with the daily routines of your lives. Second, the anticipation of a little one running around, while a bit scary, is invigorating. Finally, you're ready to join the mommy club.

You and your partner try month after month with no success. You're not worried yet because it has only been a few months. More than six months pass and you still are not pregnant. You start to become a little flustered. What do you do now? If you are under the age of 35, most doctors will tell you to try another six months before you consider alternative methods. Instead of just “trying” for twelve months, which can seem like forever when you want to conceive, I recommend talking with your doctor about some inexpensive initial fertility testing to rule out common problems, such as ovulation irregularities. However, if you are over age 35, then my advice is to talk with your doctor about fertility treatment options and the possibility of a referral to a Reproductive Endocrinologist (RE).

If you are new to the topic of infertility, you are probably not sure what to ask your doctor or where to look for resources or information. Below are ten important questions to ask your Ob/Gyn:

**Do you take a reproductive history?** This information gathering process should help the doctors determine if you have any infertility risks such as endometriosis, fibroids, recurrent miscarriages, etc.?

**Will you do preliminary testing to see if I have any risks for infertility?** If your doctor hasn't done preliminary fertility blood testing, ask for a full-range of tests to determine which, if any, infertility risks you might have. It is important to be aware that some of these tests must be done at certain times in your menstrual cycle. Ask your doctor to explain why she is doing the tests when she is, so that you can be certain that your doctor is performing the test at the appropriate time.

**Does your office perform or recommend male factor testing?** It is important to perform a semen analysis on your husband/boyfriend/partner since over thirty percent of infertility is male factor? For example, if your spouse has sperm issues there would be no reason for your Ob/Gyn to prescribe Clomid (a common drug to stimulate ovulation). The goal is to minimize the drugs to which your body is exposed, the expense, and the emotional ups and downs you may experience.

**What life style changes do you recommend when a woman is trying to conceive?** For example, dietary changes can help increase your fertility as can regular exercise. Dairy products, such as ice cream, eaten in moderation can sometimes help improve a woman's fertility. However, sometimes even diet and exercise are not enough to resolve your medical issues.

**What are examples of non-invasive options we can pursue first?** What medications do they recommend or procedures do they offer for your condition(s)? The goal is to minimize the expense, both emotionally and financially, of fertility treatments.

**What success have you had with prior patients in helping them conceive a baby?** How much experience does he/she have with helping patients overcome their fertility issues? This is an extremely important question, as you do not want to stay with an Ob/Gyn who “dabbles” in fertility treatments because it could cost you time as well as money.

**What procedures or tests will be covered by my health insurance?** Who within their office can help you understand your health insurance benefits so that you can maximize your coverage for the fertility testing and treatments?

**What is your Clomid protocol?** If they suggest Clomid, how many cycles will they recommend before considering additional testing or more advanced medications or treatments?

**Do you offer Inter-uterine Inseminations?** If so, do they monitor the number of follicles you produce via ultrasound before the insemination procedure takes place? Monitoring the number of follicles will alert them/you of the risk of twins or a high-order (three or more babies) multiple gestation pregnancy.

**Do they have any other doctors that they refer the more complex fertility patients to?** Which REs, Urologists, etc. do they recommend if advanced procedures are required?

There are four main organizations dedicated to helping the infertile community gather information as well as provide support either through articles, chat groups, or peer-lead support groups. INCIID, the InterNational Council on Infertility Information Dissemination, Inc., was founded in 1995 to provide infertility information and support. INCIID hosts discussion forums on its website, [www.inciid.org](http://www.inciid.org). RESOLVE: The National Infertility Association was founded in 1974 and advocates for the community in many ways, including mandated insurance coverage initiatives (see [www.resolve.org](http://www.resolve.org) for information on the Family Building Act of 2007). The American Fertility Association

was founded in 1999 and offers easy to read informational and educational content on their website, [www.theafa.org](http://www.theafa.org). Finally, Fertility LifeLines is a new educational resource for the community and offers discount coupons for certain medications, [www.fertilitylifelines.com](http://www.fertilitylifelines.com).

Two of the most effective methods for surviving your fertility journey are to gather information and ask questions. For most of you, your Ob/Gyn will be your first step in the information gathering process. I urge you not to waste the opportunity to both gain as much knowledge as possible from your Ob/Gyn and to know when it is time to move on and seek the assistance of a fertility specialist.

# **Chapter 2: Considering Medical Treatments to Conceive a Baby?**

## ***10 Questions to Ask Reproductive Endocrinologists Before You Hire One***

Something is wrong. You've been trying to get pregnant and it's not working. Is it you or is it your partner? You've talked with your Ob/Gyn and he may have recommended medical intervention to help you become pregnant. Perhaps you tried Clomid (an ovulation inducer, which is a common starting point) and it didn't work. Now you need to consider undergoing testing to pinpoint the cause of your inability to conceive.

Depending on your test results and the procedures offered by your Ob/Gyn, such as Intrauterine Insemination (IUI) - sometimes referred to as artificial insemination, you may consider seeking expert advice from a Reproductive Endocrinologist (RE). If you are new to the topic of infertility, you are probably not sure what to ask or where to look for resources or information. Below are ten important questions to ask an RE before you hire him/her to help you get pregnant:

**What type of testing is needed?** Depending on how seriously your Ob/Gyn considered your situation, you may or may not need to undergo additional testing. However, generally there will be some tests the RE will want to conduct anyway. Common testing would include a blood work-up, a Clomid Challenge (this is slightly different than just taking Clomid to induce ovulation), a Fluid ultrasonography (FUS) to look for irregularities or surface lesions within the uterine cavity, and a Hysterosalpingogram (HSG) to determine if there are blockages in the fallopian tubes.

**How long does the testing take?** One of the challenges, both emotionally and physically, during this time in your life is how long each step of the process can take. Ask your RE how long he expects the initial testing to take. Also, ask for the order in which the tests should be performed and how long between the results and the scheduling of the next test. Knowing the steps and time frame for each will provide some peace of mind.

**Do you take any insurance?** Even if the IUI or IVF procedures are not covered, some of the initial testing to determine the causes for your infertility might be. If you live in one of these states you have some form of infertility coverage (check your provider for more details): [Arkansas](#), California, Connecticut, Hawaii, Illinois, Louisiana, Maryland, Massachusetts, [Montana](#), [New Jersey](#), [New York](#), [Ohio](#), [Rhode Island](#), [Texas](#), and [West Virginia](#).

**Once we receive our diagnosis, what is the timeline for our designated procedure?** Something every couple wants to know. The testing is time-consuming, so once you finally determine what is "wrong" or which procedures

might work best for your situation, you'll want to know how soon you can begin treatment. During this time, ask questions about how the procedures will work from start to finish. This will give you an idea of the time frame as well. For example, pursuant to my IVF schedule I was on birth control pills for one month prior to starting any medications. I've heard that other REs use a different schedule.

**Do you have a waiting list?** Many REs have a long waiting list. Check with the REs to determine how long you would have to wait before you can start your first treatment cycle. Also, you might want to ask the REs how quickly they could fit you in if a second cycle was necessary.

**If the first procedure doesn't work, what do we try next?** Unfortunately, not all IUI or IVF attempts are successful the first time. Ask the REs how many times they'll try IUI before they recommend another procedure. Be aware, however, that many REs will not commit to a course of treatment until they see how you respond to their first effort.

**Do you have a specialization?** Some fertility clinics have a reputation for certain procedures. For example, there is a facility in Colorado that specializes in donor egg/sperm procedures. Other clinics specialize in managing patients that have experienced prior treatment failures. Determine what each RE specializes in so that you can determine if he/she is the right doctor for you and your circumstance.

**What are your success rates?** Often this information will be provided on each RE's website. However, you should still ask the question and tailor it to your specific situation. For example, "What is your success rate with couples over 35 dealing with endometriosis?" Or "What is your success rate with couples using donor egg?" Their success rates should be good regarding the area(s) in which they specialize and the specific area(s) in which you need treatment.

**Are you conservative or aggressive with treatments?** As with any physician, some REs are more aggressive than others. This difference in approach could be in the dosages they recommend, how they treat external issues that may/may not impact your treatment protocol, etc. One RE we met with wasn't going to treat my elevated prolactin levels during our IVF cycle, while another said he didn't want to take any chances that the prolactin could impact my ability to conceive.

**What do you consider a successful outcome?** The clinic we used to conceive our twins considered a live birth a success. If we had experienced a loss during our pregnancy or at birth, we could have attempted another IVF cycle at no additional

cost. On the other side, another clinic we considered using determined a successful outcome to be a 24-week pregnancy.

Hiring an RE may be one of the most important decisions of your life. Spend the time getting to know the RE you are about to hire to help you become pregnant; you might decide he/she is the doctor who will help you build your family. On the other hand, you may find that another doctor would be a better fit for your circumstances.

# Chapter 3: Before You Start Fertility Treatments

## ***10 Questions to Ask Your Reproductive Endocrinologist***

You've been trying to make a baby on your own, the old-fashioned way. It isn't working. You've decided to look into fertility treatments as an option to become pregnant. If you haven't yet interviewed a few Reproductive Endocrinologists (REs), read the previous chapter *Considering Medical Treatments To Create A Baby? 10 Questions to Ask Your Reproductive Endocrinologist Before You Hire One* before you choose your physician. Once you've hired your RE, there is still some information-gathering to be done. If you're not familiar with medical terminology, then an in vitro fertilization (IVF) cycle can be intimidating. Even one of my friends who is a nurse was intimidated by the medication schedules and procedures associated with IVF. You'll be less nervous and more confident if you have knowledge about your procedures and how the RE's office operates.

Below are ten questions to ask your RE before you start your first cycle:

**Do they offer clinical trials?** Fertility treatments are fairly expensive and not covered by insurance in most states. Ask what the requirements are for eligibility in a clinical trial. If you are eligible, ask how you can participate. Keep in mind, it may take longer to start your clinical trial than if you proceed as a general client. Sometimes trials are cancelled; ask your doctor about the possibility of this occurring.

**What are the side effects of the medications?** It is important to understand what all of the medications are used for and the possible side effects. For example, you should not exercise when taking Lupron, a hormone agonist used to decrease the production of hormones from the pituitary gland, as it weakens your bones and exercising could result in bone breakage. The clinic should be able to provide you with a detailed description of the purpose of each medicine you take, along with the side effects of each medicine.

**What are the steps in the procedure?** Fertility treatment procedures are stressful. Learn as much about your treatment schedule as possible. If they don't provide a schedule, ask for a calendar of your medication schedule, dates of appointments, and activities to be performed at each appointment (blood draw, retrieval, injections, etc.). It would be especially helpful if this is in written form for you to take home and read.

**Who will be your point of contact?** Learn who will be answering your questions. During our IVF procedure, we would ask the nurse questions about our medication schedule and we would ask the doctor other types of questions. If you

know the right person to contact, you'll be more likely to get a quick response. Have them describe how office communications work during your procedures.

**Who performs the procedures?** During your testing and actual fertility treatment you'll be poked and prodded. Determine who will be performing which procedures so you know when you'll be interacting with your RE and when you'll be interacting with the RE's colleagues or the nurses. For example, during our IVF cycle all of the invasive procedures, such as the Fluid Ultrasound, egg retrieval, and embryo transfer were conducted by our RE.

**How many embryos do they transfer during an IVF cycle?** Or, if you are proceeding with an IUI, you'll want to know what the maximum follicle count would be before they would cancel the cycle. If you are using injectables with timed intercourse, the follicle count is important as well. Each doctor has a different protocol and the number of follicles or embryos transferred for each patient might also differ. Our RE was initially only going to transfer two embryos, but when the day arrived he transferred three. The main reason for the change in his approach was based on the quality of our embryos.

**What are the risks of twins or high-order multiples?** This includes both the chances of having a twin or high-order multiples (triplets or more) pregnancy as well as the health risks to the mother and babies involved with such a pregnancy. The risk of having twins or high-order multiples is fairly high with IVF or IUI procedures. What will your doctor do to minimize those risks? In addition, you might want to ask them what percentage of their procedures result in twins or higher. This information might be available on their website. Know your risks and be prepared for them. For example, twin pregnancies are considered high-risk because one in three results in premature birth.

**What would cause the treatment to be cancelled?** You'll want to know the possibilities that a cycle could be cancelled. A few women I know have had their IVF cancelled because they responded poorly to the medications or because they developed cysts from the medications. Our RE never mentioned that it was possible a cycle could be cancelled. It's best to be prepared and know possible reasons this might occur.

**Do they encourage or recommend complementary or alternative medicine?** Studies are proving that acupuncture, massage therapy, homeopathy, Reiki, and other forms of alternative medicine can increase the success rate of fertility treatments. Does your doctor have a referral list for these types of practitioners? If they do not encourage complementary medicine, will they nonetheless try to

coordinate with your alternative efforts? This is important to know as some REs discourage use of alternative medicine.

**What outside resources do they recommend?** There are at least four national organizations that focus on infertility information or awareness. In addition, there are magazines, books, support groups, and therapists to help you manage the emotional and physical aspects of your treatment. Your RE may be aware of some of these resources that you would not find on your own.

The desire to become pregnant is often stressful and can become all-consuming to women and their partners. Knowledge is power. The more you know the less nervous you'll be. Remember, there is no such thing as a stupid question. Knowing the steps in the process and knowing the risks, whether that be of multiple gestation or a cancelled cycle, can help you manage the strong emotions you might experience during your treatment.

## Resources

### Infertility

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- INCIID, the InterNational Council on Infertility Information Dissemination, Inc., was founded in 1995 to provide infertility information and support. INCIID hosts discussion forums on its website, [www.inciid.org](http://www.inciid.org).
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- The American Fertility Association was founded in 1999 and offers easy to read informational and educational content on their website, [www.theafa.org](http://www.theafa.org).
- Fertility LifeLines is an educational resource and offers discount coupons for certain medications, [www.fertilitylifelines.com](http://www.fertilitylifelines.com).
- An information portal for infertility, About.com's infertility pages are full of information as well as a discussion forum, <http://infertility.about.com>

### Preconception and Pregnancy

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- March of Dimes portal for information about preconception, trying-to-conceive, miscarriage, infertility, pregnancy, and much more, [www.whatareyouwondering.com](http://www.whatareyouwondering.com).
- Information on preconception, pregnancy, and mother related topics, <http://newsmomsneed.marchofdimes.com>.
- Bed rest isn't about rest and relaxation, it can be stressful. Better BedRest provide emotional and financial support to women during pregnancy bed rest, [www.betterbedrest.org](http://www.betterbedrest.org).
- A non-profit organization committed to provide support, education, and advocacy to women with high risk pregnancies, [www.sidelines.org](http://www.sidelines.org).