

WELCOME TO...

C.A.R.E

Center of Assisted Reproduction & Endocrinology

FOR THE BAY AREA

At C.A.R.E. for the Bay Area, our mission is to provide families with personalized care from an experienced and passionate team of medical professionals. Our services include fertility consultation, intrauterine insemination, in vitro fertilization, third party reproduction, and reproductive surgery including tubal reversal. Many of these services are discussed in this pamphlet.

We care deeply about our patients and their families. We understand the physical and emotional toll that comes with infertility, and we are genuinely committed to helping our patients realize their dreams of having a healthy family. C.A.R.E. for the Bay Area welcomes all patients, and we look forward to meeting you.

TABLE OF CONTENTS

About Dr. Karen Purcell

Honors and Awards
Commentary..... p.3

Contact Information

Phone number
Fax number
E-mail address
Office Address
Website..... p.4

Directions from

San Jose
Cupertino and Sunnyvale
San Francisco and Palo Alto
Oakland
Santa Cruz..... p.5

Treatment Options

Timed Intercourse p.7
Intrauterine Insemination p.8-9
Treatment with Clomid® p.10-11
Treatment with injectable gonadotropins..... p.12-13
In Vitro Fertilization p.14-15
Third Party Reproduction p.16-17
Tubal Reversal p.18

Karen J. Purcell, MD/PhD, FACOG

Medical Director

Dr. Karen Purcell, founder and director of C.A.R.E of the Bay Area, has over sixteen years of medical experience with a focus on fertility and endocrinology. Her professional experience includes leading several medical research projects, earning her award-winning recognition.

What makes Dr. Karen Purcell unique is her vast experience alongside her personal and warm style. She is compassionate and deeply committed to her patients.

Honors and Awards

- Endocrine Fellows Foundation Grant, University of California, San Francisco
- NIH Reproductive Sciences Training Grant, University of California, San Francisco
- PacRim Grant, University of California, San Francisco
- Administrative Chief Resident, University of California, Los Angeles
- Berlex Resident Teaching Award, University of California, Los Angeles
- Wyeth-Ayerst Resident Reporter for ASRM, University of California, Los Angeles
- Wyeth-Ayerst Resident Reporter for ACOG, University of California, Los Angeles

Meet the Doctor...

“My name is Dr. Karen Purcell. I am the Founder and Medical Director of the Center for Assisted Reproductive Endocrinology (C.A.R.E). Wanting to provide patients with a comfortable setting where the focus was a personalized approach, I created CARE. We are located at 555 Knowles Drive Suite 212, Los Gatos, California.

I would like to offer my services for patients needing a referral for fertility-related issues. Please feel free to contact me if you have any questions or would like to set up an introductory meeting.”



Contact Information

Telephone

(408) 628-0783

Call to schedule, change, or cancel an appointment or to find out more information

**Available during clinic hours*

Facsimile

(888) 850-3405

Fax documents, lab results, and/or medical record information

**Available to receive 24 hours a day*

E-mail

PatientCare@CARE4BA.com

Info@CARE4BA.com

Address

555 Knowles Drive

Suite #212

Los Gatos, CA 95032

Website

www.CARE4BA.com

For medical or psychiatric emergencies, please call 911.

Directions to C.A.R.E for the Bay Area

From San Jose

- ❖ Take CA-87 South
- ❖ To I-280 North (toward San Francisco) ->
- ❖ Merge onto CA-17 South (toward Santa Cruz) ->
- ❖ Exit San Tomas Expressway (#23) ->
- ❖ Turn right onto San Tomas Expressway ->
- ❖ Take the Winchester Blvd South exit -> merge onto Winchester Blvd. ->
- ❖ Turn Right onto Knowles Drive -> **555 Knowles Dr., Suite 212, Los Gatos, CA 95032**

From Cupertino and Sunnyvale

- ❖ Take 280 North ->
- ❖ To CA-85 South (toward Gilroy) ->
- ❖ Exit Winchester Blvd (#11B) ->
- ❖ Turn left onto Winchester Blvd ->
- ❖ Turn left onto Knowles Drive -> **555 Knowles Dr., Suite 212, Los Gatos, CA 95032**

From San Francisco and Palo Alto

- ❖ Take 101 South ->
- ❖ To CA-85 South (toward Santa Cruz/Cupertino) ->
- ❖ Exit Winchester Blvd (#11B) ->
- ❖ Turn left onto Winchester Blvd ->
- ❖ Turn left onto Knowles Drive -> **555 Knowles Dr., Suite 212, Los Gatos, CA 95032**

From Oakland

- ❖ Take 880 South ->
- ❖ To CA-17 South ->
- ❖ Exit San Tomas Expressway (#23) ->
- ❖ Take the Winchester Blvd South exit -> Merge onto Winchester Blvd
- ❖ Turn right onto Knowles Drive -> **555 Knowles Dr., Suite 212, Los Gatos, CA 95032**

From Santa Cruz

- ❖ Take CA-1 South ->
- ❖ To CA-17 North ->
- ❖ Exit Lark Avenue (#21) ->
- ❖ Turn left onto Lark Ave
- ❖ Turn right onto Winchester Blvd
- ❖ Turn left onto Knowles Drive -> **555 Knowles Dr., Suite 212, Los Gatos, CA 95032**

**555 Knowles Drive will be on the right-hand side.
Suite 212 is located in the main building on the second floor**

YOUR TREATMENT OPTIONS

- ❖ Timed Intercourse
- ❖ Intrauterine Insemination (IUI)
- ❖ Treatment with Clomid®
- ❖ Treatment with Injectable Gonadotropins
- ❖ In Vitro Fertilization (IVF)
- ❖ Third Party Reproduction
 - Donor Sperm (insemination)
 - Donor Egg
- ❖ Reproductive Surgery
 - Tubal Reversal

Timed Intercourse

What is Timed Intercourse?

Timed Intercourse may be the first approach you take in the journey to becoming pregnant. For women with regular cycles, having intercourse prior to ovulation can lead to pregnancy. You can use an Ovulation Predictor Kit (OPK) to inform you of when you are most fertile. Having intercourse before ovulation is ideal and, therefore, it is recommended to have intercourse every 2-3 days the week before you expect to ovulate and then again when the OPK shows a color change (which indicates you are starting to ovulate.)

What lubricants should be used for timed intercourse?

It is recommended that vegetable (cooking) oil and/ or mineral oil is used as lubricants during intercourse. Many other over-the-counter lubricants can decrease sperm motility and viability.

Where can I find an Ovulation Predictor Kit?

You may purchase an OPK at any Walgreens, Target, or your closest neighborhood store. Brands and prices may vary. Usually 5-7 sticks are provided in each kit with instructions included.

Do I need to see a doctor to start this treatment?

Although timed intercourse can be done without the assistance of a health professional, it is recommended that a consultation is done beforehand to make sure this is the right approach for you and your family. It is wise for any woman attempting pregnancy to undergo a general health evaluation.

Intrauterine Insemination (IUI)

What is an IUI?

Intrauterine Insemination is the process of depositing “washed” sperm inside the uterus of the woman. It is often paired with a treatment to stimulate the ovaries, such as Clomid® or injectable gonadotropins.

How is it performed?

A semen sample is collected into a sterile cup by masturbation. The semen is then prepared (washed) and injected into the uterus using a thin catheter.

Where is the semen specimen collected?

The semen specimen should be collected in our office. In rare cases, it can be collected at home; however, you must obtain a sterile specimen cup from us in advance. In anticipation of the collection, your partner should not ejaculate for 24-48 hours. However, he should not abstain for more than five days; prolonged abstinence may impair semen quality.

When is an insemination done?

Insemination is usually performed one or two times at the time of ovulation as best determined by an ovulation predictor kit (OPK). If you are using a kit, insemination should be performed the day after a color change (which indicates that you are ovulating). If you are not using an OPK and receive a Human Chorionic Gonadotropin (hCG) injection instead, insemination will usually take place two days after the injection.

What testing is required before I have an IUI?

Infectious Disease screening for the male partner is *required by law* and treatment cannot be continued without it. Donor sperm will also have requirements for infectious disease screening. These tests include HIV, HTLV, Hepatitis C Antibody, Hepatitis B Surface Antigen, and RPR. (See table on next page).

Prenatal Labs and Infectious Disease screening for the female patient is highly recommended but not required.

Tests	Description	Female Partner	Male Partner
Semen Analysis	A test to check sperm count, motility and morphology		X
HIV	Test for infection (state requirement)		X
HTLV-1&II	A virus that can cause leukemia and neurologic disease		X
VDRL/RPR	Test for syphilis		X
Hep B S Ag	Test for Hepatitis B Surface Antigen		X
Hep C Ab	Test for Hepatitis C Antibody		X

Treatment with Clomiphene Citrate (Clomid®)

What is treatment with Clomiphene Citrate?

Fertility treatment using clomiphene citrate (Clomid®) will cause one or more follicles (the fluid-filled sac that contains the eggs) to develop in your ovaries. This medication is taken in tablet form in a 50mg dose.

What are the steps in treatment with Clomid®?

Fertility treatment with Clomid® is timed to your menstrual cycle. Generally, the course of therapy proceeds as follows; however, the doctor may modify some of these steps:

- 1) You will be directed to take Clomid® on the third day of your period. The medication will be taken every day for five days.
- 2) Two days after your last dose of Clomid®, you will begin using an ovulation predictor kit (OPK). If the OPK shows a strong color change, it means you have produced an egg and are ovulating. If you do not detect color change within 10 days of testing, it is likely that the Clomid®, at the current dosage, did not cause you to produce an egg. At this point, you and the doctor will plan for the next cycle.
- 3) If this treatment is to be combined with insemination therapy, refer to the insemination information sheet for instructions. If pregnancy will be attempted through intercourse, plan on having intercourse sometime the next morning and following day.

What testing is required before I have treatment with Clomid®?

Infectious Disease screening for the male partner is *required by law* and treatment cannot be continued without it. Donors will also have requirements for infectious disease screening. These tests include HIV, HTLV, Hepatitis C Antibody, Hepatitis B Surface Antigen, and RPR. (See table on next page).

Prenatal Labs and Infectious Disease screening for the female patient is highly recommended but not required.

Tests	Description	Female Partner	Male Partner
HIV	Test for infection (state requirement)		X
HTLV-1&II	A virus that can cause leukemia and neurologic disease		X
VDRL/RPR	Test for syphilis		X
Hep B Ag S	Test for Hepatitis B Surface Antigen		X
Hep C Ab	Test for Hepatitis C Antibody		X
Semen Analysis	A test to check sperm count, motility and morphology		X

Treatment with Injectable Gonadotropins (Gonal® or Follistim®)

What is treatment with Injectable Gonadotropins?

Fertility treatment with Gonadotropins (Gonal-F® or Follistim) will cause one or more follicles (the fluid filled sac that contains the eggs) to develop in your ovaries. This medication is taken by needle injection.

What are the steps in treatment with Injectable Gonadotropins?

Treatment with Injectable Gonadotropins is timed to your menstrual cycle. Generally the treatment plan proceeds as follows; although, the doctor may modify some of these steps:

- 1) At the beginning of your period, you will get an ultrasound and blood work done. Then, you will start taking the Injectable Gonadotropins. This medication will be taken every day for four days.
- 2) Then, another ultrasound will be done to determine whether the Injectable Gonadotropins has helped your follicles grow to an ideal size. If so, you will stop taking it and start taking Human Chorionic Gonadotropin (hCG).
- 3) If this treatment is to be combined with insemination therapy, refer to the insemination information sheet for instructions. If pregnancy will be attempted through intercourse, plan on having intercourse sometime the following morning and the following day.

How many screenings will I need?

Ultrasounds will be performed every couple of days to decrease the risk of having multiple births

What testing is required before I have treatment with Injectable Gonadotropins?

Infectious Disease screening for the male partner is *required by law* and treatment cannot be continued without it. Donors will also have requirements for infectious disease screening. These tests include HIV, HTLV, Hepatitis C Antibody, Hepatitis B Surface Antigen, and RPR. (See table on next page).

Prenatal Labs and Infectious Disease screening for the female patient is highly recommended but not required.

Tests	Description	Female Partner	Male Partner
HIV	Test for infection (state requirement)		X
HTLV-1&II	A virus that can cause leukemia and neurologic disease		X
VDRL/RPR	Test for syphilis		X
Hep B Ag S	Test for Hepatitis B Surface Antigen		X
Hep C Ab	Test for Hepatitis C Antibody		X
Semen Analysis	A test to check sperm count, motility and morphology		X

IN VITRO FERTILIZATION (IVF)

What is IVF?

In Vitro Fertilization involves removing eggs from the ovaries and letting sperm fertilize in a fluid medium. Once fertilized, the egg is then transferred into the uterus.

What are the steps for IVF?

In Vitro Fertilization is timed to your menstrual cycle; therefore, sometimes the use of birth control pills can be used to provide period regularity. Generally, the IVF cycle plan proceeds as follows; however, the doctor may modify some of these steps:

- 1) You will receive Injections of Lupron (a hormone that regulates the pituitary gland) a week before your expected period.
- 2) Once you start your period, you will get an ultrasound and blood work done. When approved by the doctor, you will start taking your fertility medication. Medications are daily injections taken for 10-12 days and assist in follicle growth.
- 3) Then, an ultrasound will be done to determine whether your follicles have grown to an ideal size. If so, you will stop taking the medication and start taking Human Chorionic Gonadotropin (hCG).
- 4) A day or two after the hCG injection, the eggs will be retrieved and a progesterone injection will be given.
- 5) The sperm (from your husband, partner, or donor) are then combined with the retrieved eggs and a few days later, the insemination is performed with a small plastic catheter through the cervix.

What testing is required before IVF?

Many tests are *required by law* and treatment cannot be continued without it. Donor sperm will also have requirements for infectious disease screening. The following table lists these requirements in more detail (see next page).

Tests	Description	Female Partner	Male Partner
FSH	Blood test done on the second or third day of a menstrual cycle to check the ability of the ovaries to respond to fertility medication and to determine the ovarian reserve	X	
Estradiol	Same as above	X	
Prolactin	A hormone secreted by the pituitary gland which can interfere with ovulation and implantation.	X	
TSH	A test to check on thyroid function	X	
HIV	Test for infection (state requirement)	X	X
HTLV-1 & II	A virus that can cause leukemia and neurologic disease	X	X
VDRL/RPR	Test for syphilis	X	X
Hep B S Ag	Test for Hepatitis B	X	X
Hep C Ab	Test for Hepatitis C	X	X
CMV-IgM	Test for Cytomegalovirus that can cause fetal damage if a woman is pregnant with active infection		
Rubella	Check for rubella immunity	X	
ABO/Rh	Blood type	X	
Hysteroscopy/ Sonohysterogram/ Hysterosalpingogram	Test to check on the status of the uterus	X	
Semen Analysis	A test to check sperm count, motility and morphology		X
Pap Smear	Results must be current within 1 year	X	
General Medical Exam	For women >40 years old to include letter of medical clearance from primary care physician and, when necessary, complete cardiovascular screening (e.g. EKG, lipid profile, stress test, etc.)	X	
High Risk Obstetrical Consult	For women >40 years of age	X	
Third Party Counselor	For all parties involved in ovum donation, surrogacy, and/or sperm donation	X	X

THIRD PARTY REPRODUCTION

Donor Sperm (Insemination)

What is Donor Insemination?

Donor Insemination is the process of depositing prepared (washed) sperm from an anonymous donor, usually obtained from a sperm bank that is licensed for the State of California, into your uterus (Intrauterine Insemination).

How do I obtain donor sperm?

You may either contact a licensed sperm bank and/or view a referral list provided by the doctor. The sperm bank will have a catalog from which to select an appropriate donor. You then notify the sperm bank of your choice and complete the required paperwork to have the sperm sent to our clinic prior to the timing of the insemination.

What are the steps for sperm donation?

The sperm donation treatment process is similar to Intrauterine Insemination (pg. 8-9).

- 1) After choosing a donor and filling out the required paperwork, the prepared (washed) sperm is brought to our office.
- 2) The insemination process involves a small catheter containing the prepared sperm. The catheter is introduced into your cervix and the sperm is deposited deep inside your uterus. The procedure is essentially pain free.

When is the insemination done?

Insemination is done one or two times during ovulation; this is best determined by an ovulation predictor kit (OPK). If you are using a kit, insemination should be performed the morning after a color change. Another option is receiving an hCG injection; in this case, Insemination will usually take place two days after the injection.

THIRD PARTY REPRODUCTION

Donor Egg

What is egg donation?

Egg donation is a type of *in vitro* fertilization that allows the eggs of one woman to be given to another. This process gives women with fertility difficulties, an excellent chance to become pregnant and subsequently deliver a healthy baby.

Who are egg donors?

Most egg donors are healthy young women under the age of 34 years old and come from all walks of life and ethnic backgrounds. Once you have chosen a potential donor, she will undergo medical and psychological screen tests. This includes a careful medical history check, pelvic examination, blood tests, cervical cultures, and hormone blood tests.

What are the steps for egg donation?

The egg donation treatment process is similar to In Vitro Fertilization (pg. 14-15).

- 1) Both women are directed to take birth control and fertility medication at the same time for a few weeks to synchronize the menstrual cycles.
- 2) For 7-12 days the donor receives injections of fertility medication daily, while you receive estrogen twice a week.
- 3) The eggs are retrieved from the donor and are immediately given to the embryologists. Sperm (either from a partner or a male donor) is then prepared (washed) and added to the eggs.
- 4) Three to five days later, the eggs are inseminated into your uterus using a plastic catheter that enters through the cervix. This procedure can be comparable with a pap smear and is usually always painless.

REPRODUCTIVE SURGERY

Tubal Ligation Reversal

What is Tubal Ligation Reversal?

Tubal ligation reversal is a surgical procedure that rejoins the fallopian tube that was once separated and blocked at the ends, for sterilization purposes. This may give the woman a chance to become pregnant again.

What are the steps for Tubal Ligation Reversal?

Before tubal reversal, a copy of the operative report from your tubal ligation surgery is required. If not available, a laparoscopy examination may be done to check if the fallopian tubes are of adequate length.

- 1) A two inch incision is made just above the pubic bone to gain access to the blocked ends of the fallopian tubes.
- 2) Then, the tubes are surgically reopened, realigned, and reconnected.
- 3) The procedure is approximately one hour long, and stitches are used to close up the incision. With the doctor's approval, patients are usually allowed to go home the same day.

How soon can I attempt pregnancy after my Tubal Ligation Reversal surgery?

In order to allow the tissue to heal appropriately, it is best for most patients to wait six weeks after the surgery to begin attempting pregnancy. The amount of time it takes to get pregnant varies depending on each individual's age and the method of tubal ligation that was originally performed. It is important to set up a follow-up appointment to discuss findings and future treatment plans.