# Reciprocal IVF | Co-Maternity



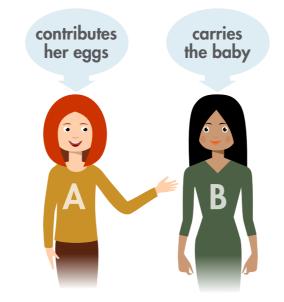
Reciprocal IVF (or co-maternity) is a fertility treatment process that enables both female partners to be involved in the family building process. With reciprocal IVF, the baby's genetics are from the partner who contributes the eggs and the baby is nourished by the partner who carries the pregnancy.

### Here are important steps to take when considering this option:



## Talk to your doctor

Consult with a reproductive endocrinologist to learn about both – you and your partner's – ovarian reserve and any issues that may need to be addressed before attempting pregnancy.



### Decide on roles

Decide who will contribute her eggs (Partner A) and who will carry the baby (Partner B). Consider the factors that go into this decision (age, health history, personal desire to undergo IVF or carry a baby, etc.).



### Choose a sperm source

There are two options when choosing a sperm source.

- Sperm banks (anonymous donor): you can learn about health history and can often hear recordings of a donor's voice.
- **Known donors** (or directed sperm donation): when a friend or family member (not related to Partner A) is donating his sperm.

## **The Treatment Process**





- Ovarian Stimulation: Once the standard medical exams are completed; Partner A will undergo the egg retrieval process which begins with ovarian stimulation.
  - Partner A will undergo daily injections of hormones (typically 10-14 days) to stimulate the ovaries to produce multiple follicles that contain eggs.





**Egg Retrieval:** When the eggs in Partner A's follicles are mature, they are retrieved via a transvaginal ultrasound with guided needle aspiration.



**3** Fertilization: The retrieved eggs are fertilized in the lab using donor sperm to create embryos.





Partner B's Role: The partner who will be carrying the baby will take hormones (estrogen and progesterone) to prepare her uterine lining for the embryo. Depending on the plans with their fertility specialist, Partner B may be prescribed additional medications. The embryo is then transferred to Partner B's uterus.

# Embryo Transfer Options

#### Fresh Transfer

The embryo is transferred three to five days after fertilization. The cycles of both women must be synchronized to perform a fresh transfer.

#### Frozen Transfer

If the couple is pursuing preimplantation genetic screening (PGS), the embryo is frozen while the cells are being analyzed and then transferred to Partner B at a later date.



Monitoring & Pregnancy Test: After two weeks, Partner B (the partner who had the transfer) will take a pregnancy test to see if the IVF transfer was successful.

If she is pregnant, she will then be monitored by her fertility specialist until she is transferred to her OB-GYN for the remainder of the pregnancy.





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