

A photograph of three women standing together in a brightly lit room with wooden walls and a staircase in the background. They are all smiling and wearing grey scrubs with the 'kindbody' logo on the chest. The woman on the left is looking towards the woman in the middle. The woman on the right is looking towards the camera. The overall mood is positive and professional.

kindbody

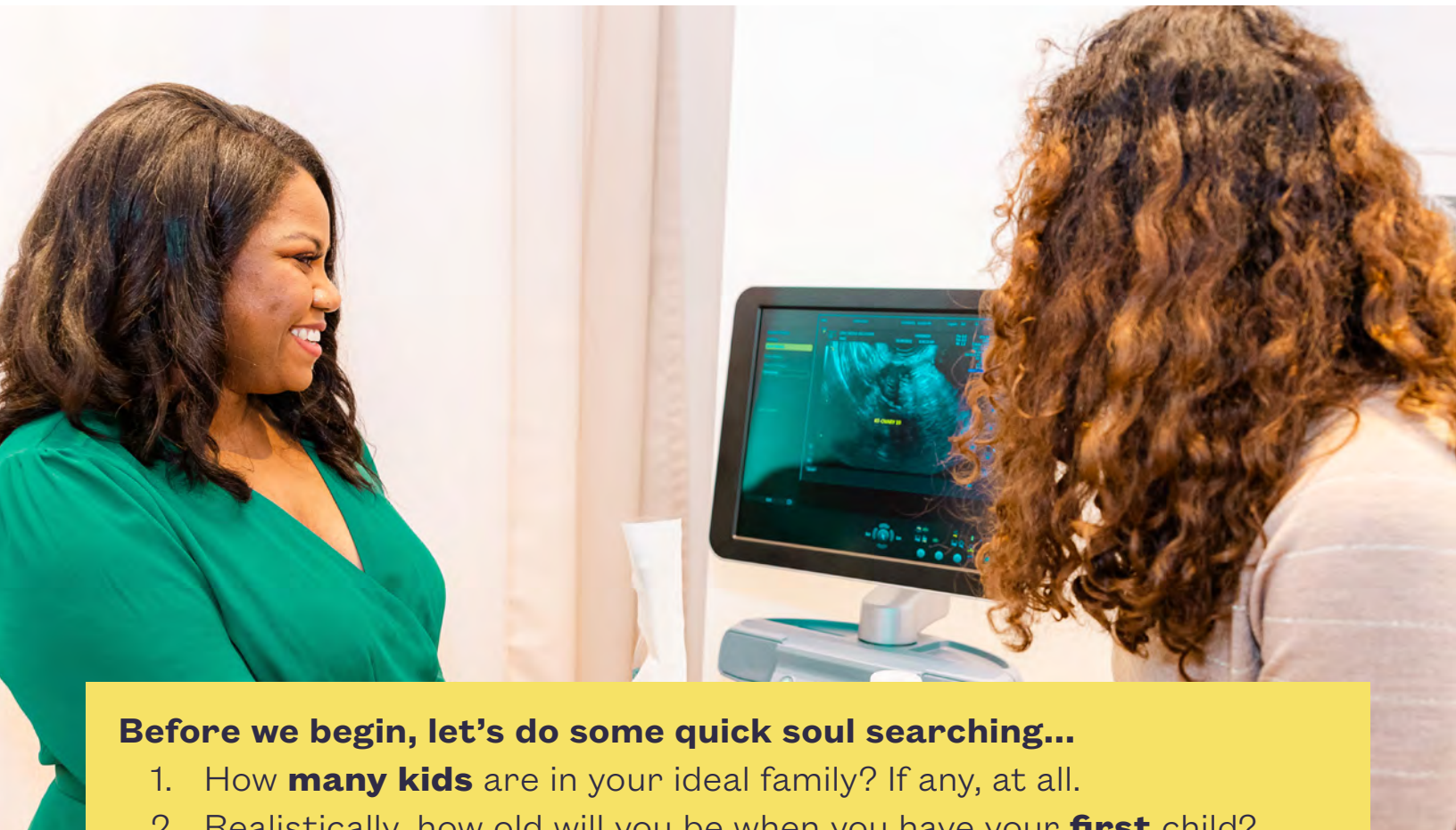
own your (future)

Your Fertility Preservation Guide

Plan for the future, today.

We offer comprehensive services in warm and welcoming clinics, including fertility assessments, preservation and treatment, as well as gynecology & wellness support throughout your journey.

Egg freezing is the process of extracting eggs from your ovaries and freezing them for later use. Fertility preservation provides a unique option to prolong your fertility and enhance your family building options. We always begin with an open and honest conversation about your fertility and we are dedicated to be your partner as you explore your options and help you make the decisions that are right for you and your future.



Before we begin, let's do some quick soul searching...

1. How **many kids** are in your ideal family? If any, at all.
2. Realistically, how old will you be when you have your **first** child?
3. Realistically, how old will you be when you have your **last** child?

Have a discussion with people who matter in your life - your partner, family, friends - about these choices & plans.

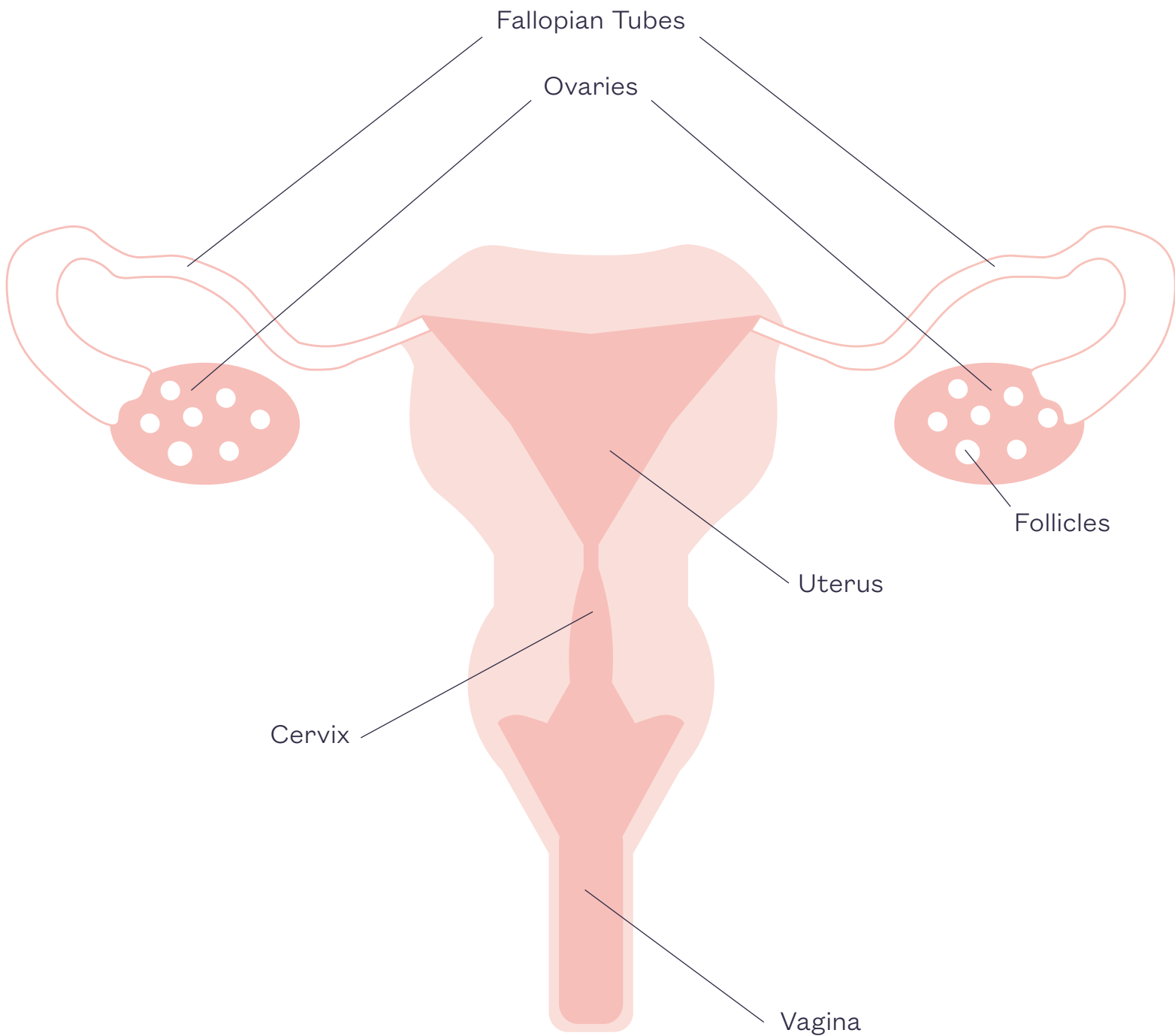
Your Journey

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**You deserve
the facts.**

Your Anatomy



The Lingo

Our goal is to provide you with information. Use this information to empower yourself with the facts about your body and take control of the future of your fertility.



Antral Follicle Count

A transvaginal ultrasound is performed to determine the number of follicles or premature eggs your body has recruited for a given month. Follicle count can be determined at any time during your cycle and even while you are on birth control. Follicle count less than 10 indicates a low egg count. Ideal follicle counts will vary depending on your age.



Anti-Mullerian Hormone (AMH)

AMH provides an estimation of your ovarian reserve. It can be tested at any time during your cycle and while on birth control. AMH levels (and hence fertility) decline with age. AMH is reported as a blood level:

- < 1 indicates a **low** egg count
- 1-6 indicates a **normal** egg count



Egg Quality

You cannot test the quality of eggs. We know that egg quality, which is the 23 chromosomes that make up the DNA of an egg, declines with age. Once an egg is fertilized with sperm and an embryo is created, the embryo can be biopsied to check the genetics/quality of the embryo.



Mature Egg

Only a mature egg can be fertilized by sperm to create an embryo. Naturally your body only matures one egg (ovulation) per month. During egg/embryo freezing, hormone injections are used to mature the group of follicles your body has recruited. During a stimulation cycle, typically 60-80% of eggs will become fully mature.

Egg Freezing



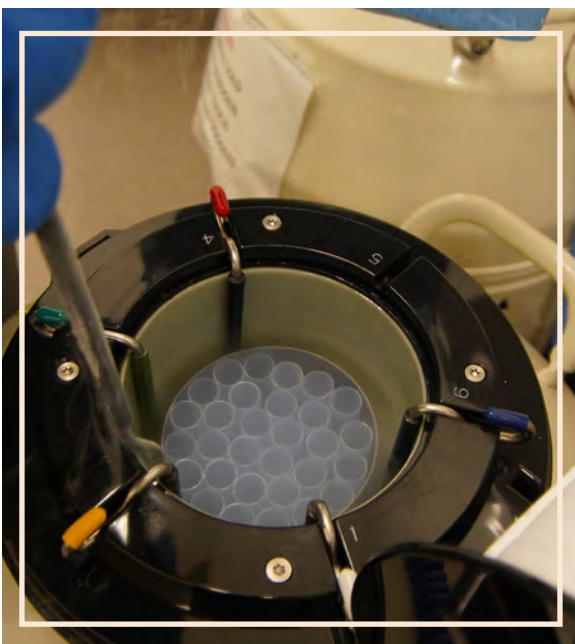
The only thing we can scientifically determine about an egg is its maturity. Only a mature egg can be fertilized to create an embryo.

You cannot assess the quality of an egg. Once an egg is frozen, it will maintain the same quality as the day it was frozen. Eggs can be frozen forever; there is no expiration date.

Typically women less than 35 years old need 10 eggs for the improved chance of 1 baby.

Once you are ready to conceive:

- Egg freezing is a 10-14 day process
- Your frozen eggs will be thawed
- Fertilized with sperm to create an embryo
- If needed, the embryo can be biopsied for genetic testing, and a genetically normal embryo is then implanted in your uterus



If you do not use your frozen eggs:

You can choose to discard them or donate them for scientific research. If you wish to have the option to donate your eggs to another person in the future, you will need to do some additional FDA blood work and screening before you freeze your eggs.

What happens during a fertility cycle?

During a fertility cycle, we give you the same hormones that are released by your brain to help you fully mature a whole batch of eggs, not just one. Only mature eggs have the potential of becoming a baby.

Embryo Freezing

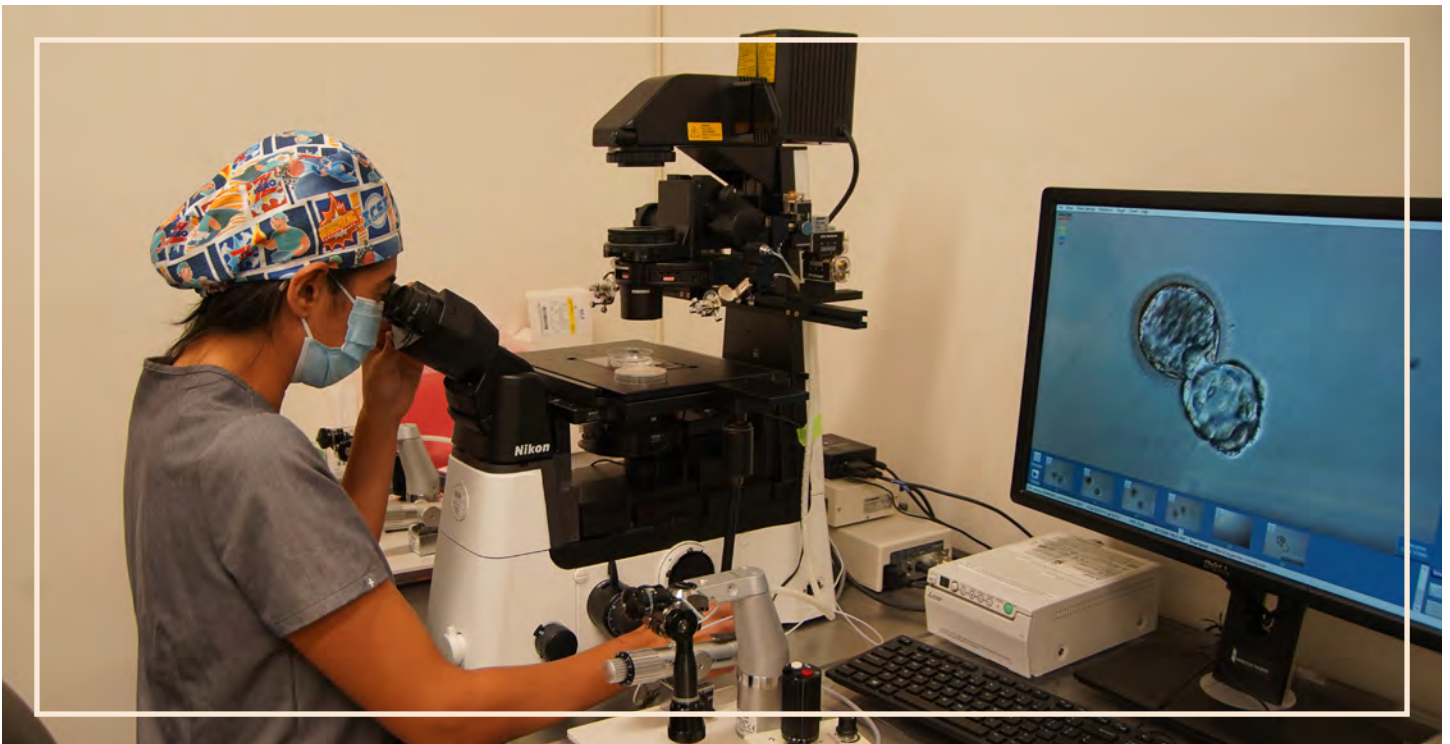


An embryo is an egg that is fertilized with sperm. Once an embryo is created, the DNA of the egg and the sperm cannot be separated (you cannot “un-fertilize” an embryo).

Once an embryo is created we can do genetic testing to assess the genetics/quality of the embryo. Genetic testing checks all 46 chromosomes, including the gender.

You typically need 1-2 genetically normal embryos for a high chance of 1 baby.

In special cases, an embryo can be tested for a specific disease or condition that a person or couple are carriers for. For example, the embryo can be tested for the BRCA mutation which is linked to breast & ovarian cancer at an additional cost.



Getting A Fertility Assessment

What To Expect:



Consultation

We'll discuss your medical, surgical, and family history. We'll review any medications and/or contraception you're using, and your menstrual cycle. Then, we'll chat through your fertility plans and options.



Physical Exam & Diagnostics

You will have a physical exam and blood work. Your doctor will discuss with you what testing will be done based on your plan.



A Vaginal Ultrasound

A vaginal ultrasound is required to fully assess your pelvic anatomy and accurately see your ovaries in order to count the follicles within each ovary. Follicles can be counted during any time of your cycle — this means you can still come in for an assessment during your period!



Your Results:



Receiving Your Results

You can expect to receive your results 5-7 days after your visit. Our clinical team will contact you directly. You'll also be able to access your results and send messages directly to your provider by logging into your patient portal 24/7.



Discussion

During this call we will bring together information gathered during your consultation including your medical history, results of your ultrasound, and blood results to give you a complete assessment of your fertility potential as it relates to your egg count and family planning goals.



Next Steps

You will have an opportunity to discuss a personalized plan to help you meet your goals. If you're ready for egg freezing the next steps are getting you a medication quote, determining a month that works for you to complete your cycle, and most importantly making sure you have all your questions answered.



Your Cycle Timeline

Pre-Cycle Kickoff



- Complete all testing
 - Benefits review
 - Insurance check
- Medications quote
 - Nursing visit

While You Wait To Start Your Cycle



- You may be started on birth control pills
 - Watch Injection Tutorial videos
 - Get medications from pharmacy
 - Ask questions
- Your Kindbody care team is available 24/7

Cycle Start (4 Protocols)



- **Day 1 of Period** → Injections start on day 2-4 of your period
or
- **Positive Ovulation Predictor Kit** → Start injections 2-5 days after positive test
or
- **No menses or IUD** → Ultrasounds & blood tests to determine when to start your injections
or
- **Birth Control Pills** → Start injections 4 days after the last pill

Start Your Injections (Day 1)



- **Morning:** Bloodwork & ultrasound in clinic (before starting injections)
- **Evening:** Check your patient portal daily for instructions

During Your Cycle (2 Weeks)



- Every 2-3 days, bloodwork & ultrasound in the morning
- Following these visits, you will get updated instructions after 4pm in your easy to follow patient portal

Trigger Shot



- Final injection 35 hours prior to your egg retrieval

Egg Retrieval



- 10-15 minute procedure under anesthesia with IV sedation performed vaginally with a small ultrasound guided needle
- Someone will need to take you home

Post-Op



- Scheduled follow up phone call 1-2 weeks after the retrieval with the physician or nurse



Can Do

- Light exercise: yoga, pilates, walking, stair climbing — listen to your body, if it feels uncomfortable, stop
- Go to work — you can work as you normally would
- Normal daily activities
- 1 cup of caffeinated beverage per day



Can't Do

- High-impact exercise: running, jumping, hiit training, contact sports, spinning
- Alcohol/smoking
- Sex (no penetration). You'll be more fertile & your ovaries are enlarged so may twist
- Any Aspirin or Ibuprofen products (Advil, Motrin, Aleve)
- Traveling for more than 1-2 nights




Side Effects

- Bloating — can last up to 2 weeks after your retrieval
- Cramping — mostly on the day of your retrieval
- Headache
- Fatigue

Our team is always available to discuss any symptoms you are feeling, don't hesitate to ask.

Sample Fertility Calendar

Month _____

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					Injection Day 1  Morning Office Visit <hr/>  Evening Injections	 Evening Injections
 Evening Injections	 Morning Office Visit <hr/>  Evening Injections	 Evening Injections	 Morning Office Visit <hr/>  Evening Injections	 Evening Injections	 Morning Office Visit <hr/>  Evening Injections	 Evening Injections 
 Evening Injections	  Tentative Egg Retrieval	 Tentative Egg Retrieval	  Tentative Egg Retrieval	 Tentative Egg Retrieval	 Tentative Egg Retrieval	

Key


Bloodwork & Ultrasound


Stimulation Injections


Tentative Trigger Shot


Egg Retrieval

Notes

Your Cycle Checklist

Egg Freezing Bloodwork

Within 6 Months

- CBC (check for anemia)
- AMH

Within 12 Months

- Blood Type
- STD Screening (*HIV, Hepatitis B, Hepatitis C, Gonorrhea, Chlamydia, Syphilis*)

Embryo Freezing Bloodwork

- Genetic Carrier Screening
 - Screens for 283 diseases to see if you are a genetic carrier
 - We recommend the company SEMA4
 - Results take 3 weeks
 - If your partner/donor is also a carrier for the exact same disease, you have a 25% chance of having an affected child
- Blood Type

Within 6 Months

- CBC (check for anemia)
- AMH

Within 12 Months

- STD Screening (*HIV, Hepatitis B, Hepatitis C, Gonorrhea, Chlamydia, Syphilis*)

Male Testing

- Semen Analysis
- SEMA4 Genetic Carrier Screening
- Blood Type
- STD Screening (*HIV, Hepatitis B, Hepatitis C, Gonorrhea, Chlamydia, Syphilis, HTLV [CA only]*)

The following applies for **both Egg Freezing or Embryo Freezing patients:**

Imaging

Ultrasounds

Complete vaginal ultrasound for an antral follicle count within 6 months

Mammogram

If you are > age of 40, you will need a mammogram within the last 12 months

To Do's

Benefit Check

Medication quote - your care team will send you a detailed medication quote and recommend which pharmacy you should use

Watch instruction videos through your portal

Sign consent form through your portal

Egg Freezing

Embryo Freezing

Nursing visit (virtual or in-person)

Medical clearance for stimulation and anesthesia if needed (see page 20 for special considerations)

Apply for discount programs for medications

Discount programs for the medications are based on income and are worth trying

Visit the websites below and apply:

ReuniteRx

<https://www.reuniterx.com/>

Compassionate Care

<https://www.fertilitysavings.com/>

Note: Discount programs can only be used by patients whose medications are not covered by your insurance

Tips During Your Cycle

Cycle visits are typically every 2-3 days & must be before 10 am.

Nutrition & Supplements



- Eat before your visits
- Drink lots of water & electrolyte rich beverages - we have sugar free, non GMO packets in our lobby that you can mix in water
- Take CoQ10 daily (antioxidant)
- Eat salty foods & lots of protein

Injections



- Have all your medications at home before day 1 of your dose
- Individualized instructions are available in your portal after 4pm on cycle visit days
- Keep close track of your medication supply & share this information with your nurse
- If your dose for any of the medications is increased during the cycle you will need to call the pharmacy to obtain refills

Care Navigation



- Ask Questions
- Your team of nurses & physicians are available
- Non-urgent issues: send secure message through the portal
(You will receive a response within 48 hours)

Urgent Issues



- Utilize the emergency line that is provided by your nurse
- Ask questions! We have heard it all and are here for you
- Your fertility specialists are always available if you need them - please let your nurse know

Medication Tips

Videos are available in your portal 24/7 for refresher.

In-person medication teaching visits are available with a nurse if needed.

1

You can administer injections at least an inch away from the belly button. We encourage you to choose a new site on your stomach each night.

2

If you took birth control to prepare for your cycle, you'll probably get your period within a week of taking your last pill. Some people don't get a period and that's okay too!

3

After every visit (not every day) you'll receive an email letting you know that you have new instructions for the following three days. These instructions are usually updated after 4pm.

4

Check your portal daily for your instructions. Check it everyday as your medication instructions can be different from day to day. If your dose increases you will very likely need to order more medications to get you through to the end of your cycle.

5

Click on the "got it" as soon as you see your instructions for the day so that the clinical team knows you got your instructions and are all set.



Open your box from the pharmacy right away!

Confirm the medicines that are highlighted in your **Medication Checklist & Guide** match what you received from the pharmacy.

How to Store Your Medications

Meds that need to be refrigerated:

Gonal F
Follistim
Cetrotide
Omnitrope
Ovidrel
Leuprolide Trigger Shot

Meds stored at room temperature:

Menopur
Ganirelix
Pregnyl
Novarel
Progesterone in Oil

Additional Information

Pre-Op Instructions

Please read through these prior to your retrieval day so you are fully prepared for the day of.



Buddy System

After the retrieval, you will need someone to drive you home.
You will not be allowed to leave the office alone.

For 24 hours after the procedure, you may be tired and fatigued.
We recommend not driving, as it can take up to 24 hours for the anesthesia to wear off.
You may go to work the next day.



Comfy Clothes

Come to the office in comfortable clothing.

Do not wear jewelry, make-up,
hair spray, scented lotions, perfume
or contact lenses.



Fasting

You must fast for 8 hours
prior to your retrieval.

Do not **eat** or **drink anything**
(including water and gum).



Pain Meds

Please have Tylenol (Acetaminophen) 500mg at home.

Post-Op Instructions

These instructions are intended for immediately post-retrieval and up until your post-op appointment, please read thoroughly.



Eating

You may eat & drink normally after discharge.



Exercise

You may resume moderate activity 1 week after your retrieval if you feel comfortable.

You may resume normal exercise 2 weeks after retrieval.



Normal Symptoms

Cramping like a period & light vaginal bleeding.



Monitor your urine output (you should be urinating as much as you're drinking).



Water

Drink 60-80oz of fluids that contain electrolytes (i.e. Propel, Pedialyte, Gatorade, coconut Water).

Kindbody offers electrolyte packets that are sugar free and non-gmo.



Weight

Monitor your weight (inform us if you are gaining more than 2 pounds in two days).



Pain

Tylenol 1000mg every 6 hours.
Heating pad to pelvic area.

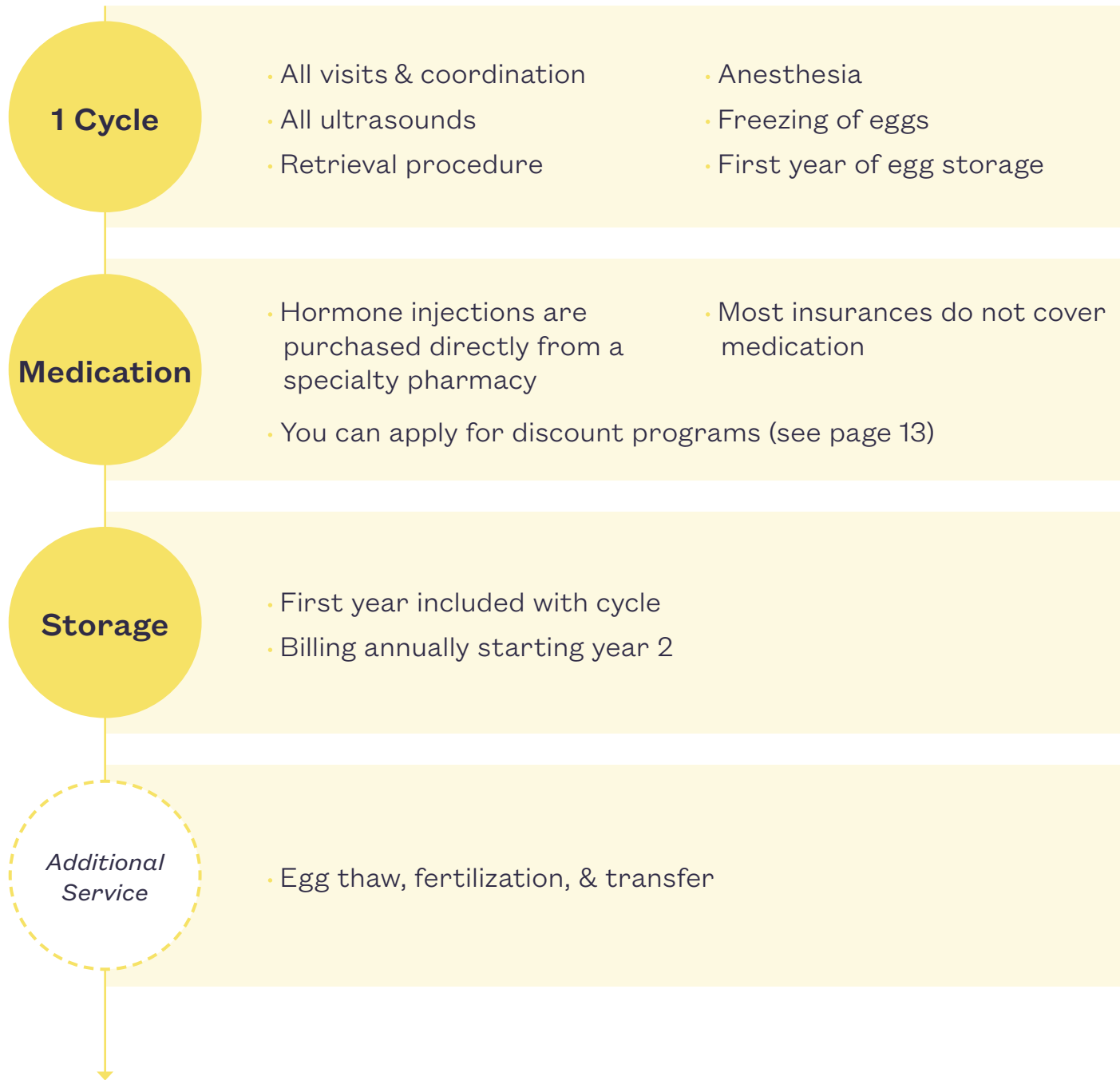


Please call us if you have any of the following:

- Heavy vaginal bleeding
- Nausea and vomiting
- Fainting, dizziness or lightheadedness, or a rapid pulse rate (>100bpm)
- High fever > 101°F
- Difficulty urinating
- Severe abdominal pain or swelling

Your Cycle Breakdown

Egg Freezing Cycle



Blood work will be collected during your cycle.

Embryo Freezing Cycle

1 Cycle

- All visits & coordination
- All ultrasounds
- Retrieval procedure
- Anesthesia
- Fertilization of egg with sperm
- Monitoring of embryo
- Freezing of embryos
- First year of embryo storage

Optional Genetic Testing

- Biopsy on all embryos to determine genetic quality prior to freezing (up to 14 embryos)

Medication

- Hormone injections are purchased directly from a specialty pharmacy
- You can apply for discount programs (see page 13)
- Most insurances do not cover medication

Storage

- First year included with cycle
- Billing annually starting year 2

Additional Service

- Embryo thaw & transfer



If you have any questions, please do not hesitate to contact us at **855-KND-BODY** or **navigator@kindbody.com**.

Special Consideration For Egg Retrieval

If you have any of the following, you will need **medical clearance** before your procedure:



Insulin dependent diabetic
Renal insufficiency



Platelet count < 100,000
Hemoglobin < 8
< 18 years of age



Cardiac disease
Pacemaker
History of stent or current stent in place
On anticoagulation (blood thinners)



Severe Asthma COPD
Moderate-severe sleep apnea
Suspected difficult airways:
(limited ROM, limited mouth opening,
previous difficult airways)
Difficult IV anticipated (skin disease,
burn victim, skeletal abnormalities)



Cancer patient
Family/personal history of
malignant hyperthermia
Other major diseases
(ex: emphysema, ischemic heart disease)



Hepatic failure or cirrhosis



Patients with the following must have their retrieval in a hospital setting
and will be referred to another center:

BMI > 40

Severe cardiac conditions

Some major uncontrolled medical diseases

Based on ASRM recommendations
Kindbody **does not** perform the following procedures:

Egg Freezing in women > 43 years of age

Embryo Freezing in women > 45 years of age

Health Insurance 101

- **Employer Benefits:** These are unique supplemental benefits for fertility preservation and/or fertility treatment that your employer may provide. Your company's benefits or HR department is best suited to provide details about fertility benefits that may exist.
- **Co-Pay:** The set dollar amount you pay at every office visit for services provided. In some cases, there can be additional out-of-pocket expenses related to the visit and determined only after claims are processed.
- **Co-Insurance:** The percentage of your medical bill you share with your insurance company after you've paid your deductible. For example, your insurance may cover 80% of allowed expenses leaving you responsible for the remaining 20%.
- **Deductible:** This is a set amount of dollars you have to pay toward your medical bills every year before your insurance company begins to pay for benefits. Deductibles reset and start over each calendar or benefit year depending on the policy's contract.
- **Out-of-Pocket Maximum:** This dollar amount is the most you'll have to pay for covered health care services in a benefit year. After meeting this dollar amount, your insurance will then pay for 100% of covered services.
- **Benefit Maximum:** The maximum amount of money that an insurance company will pay for claims within a specific time period and can also include amounts paid for towards medication.
- **Medical Necessity:** A decision made by your health plan that your treatment, test, or procedure is necessary for your health or to treat a diagnosed medical problem. Most health plans will not pay for healthcare services that they deem to be not medically necessary.
- **Prior Authorization:** Prior authorization (also known as precertification or prior approval) is a health plan's process where providers must obtain approval from a health plan before a specific service is rendered to qualify for coverage. This process can take anywhere from 15-20 business days for review and is not a guarantee of payment or coverage.
- **Explanation of Benefits (EOB):** This is a statement from a health insurance company providing details on payment (or the lack of) for medical services a patient has received. It is NOT a bill, but it does describe what services were or were not covered and what the patient is responsible for paying out of pocket.
- **Coordination of Benefits:** If you have eligible benefits under more than one health insurance plan, you will need to inform all health insurance companies which one should process claims primarily, secondary and/or tertiary.
- **Participating Provider (In-Network):** A healthcare provider who has signed a contract with the health insurance company and is therefore part of this plan's network.
- **Non-Participating Provider (Out-of-Network):** A healthcare provider who is not part of a plan's network and does not have a contract with this particular health insurance company. Costs associated with out-of-network providers may be higher or not at all covered by your plan.

We are here for you.

Let's talk.



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