

Ultrasound Fertility Preferred Model of Care

Genetic Carrier Screening

Genetic carrier screening identifies an individual or couple's chance of being a carrier of an autosomal recessive or X linked genetic condition that can affect their child/ren.

Prior to pregnancy, knowledge of their carrier status allows an individual/couple to explore their reproductive choices such as PGT or using IVF or prenatal diagnosis using CVS or amniocentesis.

Testing is performed by either a blood test or saliva swab.

Results can take up to 6 weeks.

Appointment	
Date:	.Time:

Baseline Pelvic Ultrasound

A high-quality ultrasound of the pelvis performed by a skilled sonographer is a vital part of fertility assessment.

The scan examines the uterus and endometrial cavity in both 2D and 3D. The structure and mobility of the ovaries are carefully assessed, which includes counting the developing eggs (antral follicles). The remainder of the pelvis is also examined.

The most accurate information is gained by transvaginal imaging, which is performed in a sensitive manner with your consent. The images are interpreted by our highly specialized doctors and a report produced.

This is best done between day 2 - 12 of your cycle.

Appointment
Date: Time:

Anti-Mullerian Hormone (AMH)

Test to Measure Ovarian Reserve

Ovarian reserve is the term used to describe the number of good quality eggs left within a woman's ovaries. As a woman runs out of eggs, the number of small antral follicles decline and as a result the serum Anti-Mullerian Hormone (AMH) falls.

Women with diminished ovarian reserve have reduced fertility and increased risk of miscarriage. It is important to identify these women as early as possible in order to assist with decisions on whether or not to access fertility treatment. AMH levels fluctuate very little during the menstrual cycle and therefore the test can be taken at any time.

The AMH test can be taken at the same time as a pelvic ultrasound or alternatively as a test on its own.

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HyCoSy and Sonohysterogram

Another crucial part of the fertility assessment is to determine if the endometrial cavity has a normal structure and if the Fallopian tubes are not blocked.

This is achieved by an outpatient procedure using ultrasound guidance and no anaesthetic is required. A simple antiinflammatory medication is recommended.

A fine catheter is inserted through the cervix into the endometrial cavity. A simple saline solution expands the uterine cavity to examine its shape, lining and contour (the sonohysterogram test). Aerated saline can then be passed along the Fallopian tubes to assess patency.

This is done between day 6-13 of your cycle.

A Lipiodol Flush can be performed at the end of your procedure. Lipiodol contains poppy seed oil which may improve your chances of implantation.

Appointment
Date: Time:



Detailed Endometriosis Scan

If endometriosis is suspected or proven, your doctor may recommend a detailed endometriosis scan.

This examination can be done as part of your pelvic ultrasound.

The examination seeks to identify patches of endometriosis that can infiltrate deeply into pelvic organs including the ovaries, bowel and bladder.

This information is important in formulating your fertility management plan and can assist in guiding your doctor's approach should surgical intervention be considered necessary.

The preference is to do this in the first half of your cycle.

Appointment	
Date:	Time:

Enquiries call 08 8333 8144

Note: This is our preferred model of care and some steps are variable or optional.

At Repromed, we are experts in the ultrasound field, with all Sonographers highly trained in obstetrics and gynaecological diagnostic imaging while delivering patient centred care. We are proudly South Australia's premier provider of specialist diagnostic women's fertility ultrasound.

Patient Centred

At Repromed, we understand that patients seek both compassionate care and clear communication regarding their scans, tests, and results. Our genetic counsellors, together with our sonographers, provide for these needs in a thoughtful and sensitive manner.

Expert Care

Our team is led by Dr Jane Woolcock, who is an Obstetrician and Gynaecologist with a subspecialist qualification in women's ultrasound (COGU).

Dr Woolcock is an Ultrasonologist at the Women's and Children's Hospital in Adelaide and is an endometriosis surgeon at both Calvary North Adelaide Hospital and Burnside War Memorial Hospitals. She is a senior lecturer at the University of Adelaide and is the Chairman of the Australian Association of Obstetric and Gynaecological Ultrasound.

Leading the Way

The team at Repromed Ultrasound have specialised expertise in diagnosing and identifying the underlying causes of infertility and subfertility. With a deep understanding of reproductive health, they employ advanced ultrasound technology and diagnostic techniques to provide comprehensive evaluations, helping to uncover the root factors affecting fertility.



08 8333 8144 ultrasound.enquiries@repromed.com.au repromed.com.au

Adelaide 180 Fullarton Road Dulwich SA 5065

T: 08 8333 8111 F: 08 8333 8188

Mawson Lakes 8b Light Common Mawson Lakes SA 5095

T: 08 8333 8111 F: 08 8333 8188

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- Morphett Vale
- Mount Barker
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