



Assoc Prof Lionel Reyftmann

MD, FRANZCOG, DESC of Reprod. Medicine (French CREI equiv.)

Specialties:

General or unexplained infertility, second opinions, PGD/PGS to PGT-A and PGT-M (genetics), Miscarriage Management, Recurrent IVF failure, Endoscopic fertility surgeries, Tubal surgery, Fertility Preservation, Oncofertility, Reproductive Endocrinology, Endometriosis including advanced laparoscopic surgery, Tubal Ligation Reversal Microsurgery, Ovulation disorders/PCOS, egg freezing, egg and/or sperm donation, surrogacy, general gynaecology, periconceptional medicine, premature ovarian failure, hysteroscopic surgery including the management of the asherman syndrome, fertiloscopy surgery to explore infertility and treat polycystic ovarian syndrome through the vagina without any abdominal incision.

Languages spoken:

Native French speaker, fluent English and almost fluent in Spanish.

Illawarra Reproductive Medicine and Laparoscopy

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Dr Vanessa Tatham

BMed (Hon), MBBS, FRANZCOG

Specialties:

General or unexplained infertility, second opinions, fertility preservation, egg freezing, PGD/PGS (genetics), miscarriage management, recurrent IVF failure, ovulation disorders/PCOS, premature ovarian failure, endoscopic fertility surgeries, endometriosis including advanced laparoscopic surgery to level 3 endoscopic, oncofertility, egg and/or sperm donation, preconception medicine, general gynaecology, menopause management.

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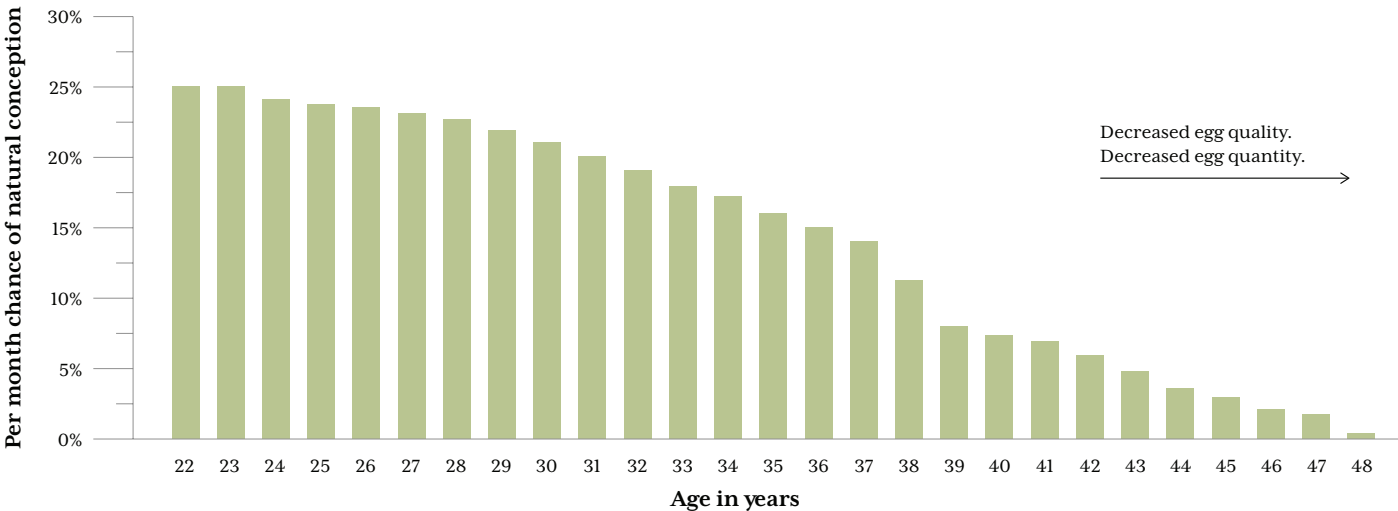
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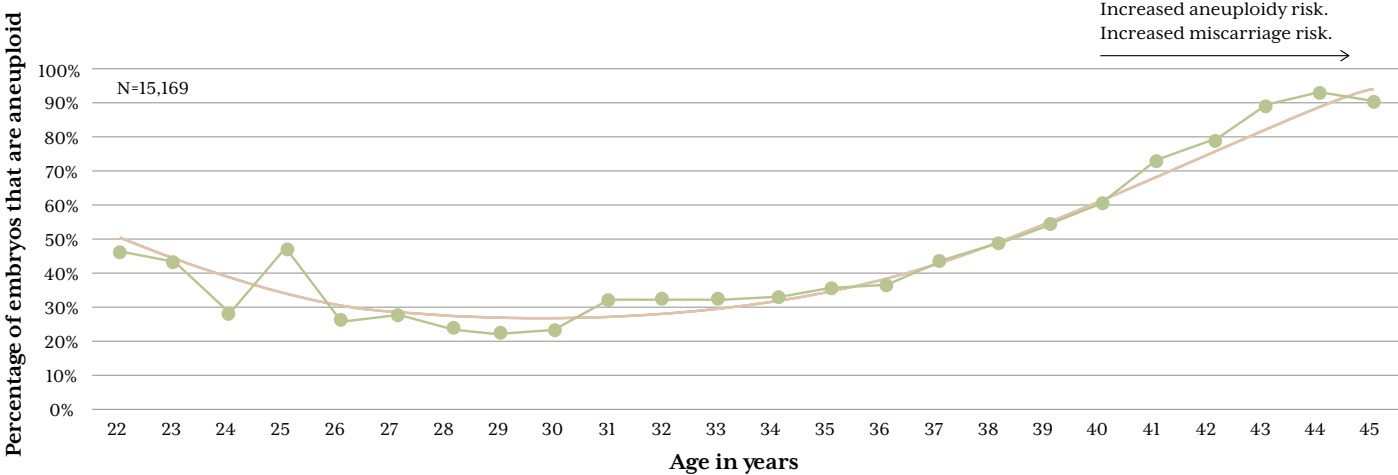
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When assessing patients for fertility investigation or egg freezing, it is important to take into consideration the female's age, as this impacts the chance of natural conception and impacts the risk of aneuploidy and miscarriage. The graphs below provide a reference for this information.

Monthly chance of natural conception



Maternal age and prevalence of aneuploidy



Guidelines for initial infertility investigations

Initial infertility investigations should start if the female patient is under 35 and has tried to conceive for 12 months OR is over 35 and has tried to conceive for six months. To expedite the referral process, we request that these investigations are initiated prior to referral to one of our Fertility Specialists.

Female investigations

Preconception screen:

- BMI (incl. height + weight)
- Blood group and antibodies
- FBC + iron studies (and thalassaemia screen as indicated)
- Rubella, varicella, syphilis, hepatitis B/C and HIV serology
- TSH (aim for < 2.5)
- Vitamin D, prolactin, free androgen index (FAI)
- Karyotype

Fertility hormones:

- FSH, LH, oestradiol (on days 2 and 6), AMH
- Luteal progesterone

Ultrasound:

- Pelvic ultrasound and request antral follicle count

Male investigations

Preconception screen:

- Hepatitis B/C and HIV serology
- Syphilis

Fertility hormones:

- LH, FSH, Testosterone, SHBG

Karyotype

Semen analysis:

Element	Reference
Volume	≥ 1.5mL
Concentration	≥ 15 million/mL
Progressive mobility	≥ 32%
Normal morphology	≥ 4%
Antisperm antibodies	> 50%