

Your first fertility appointment

A preparation guide and visit workbook

Start with what matters to you

For your first fertility visit or a fresh start with a new clinic. Use pages 1-2 before the appointment, page 3 in the room, and page 4 before you leave. You do not need to complete every space.

Hola. Bring the questions you have, even the ones that feel small. You can ask your team to slow down, explain a word, or write down the next step.

If you only have ten minutes

- ☐ Write your three most important questions below.
- ☐ Gather prior test reports and a current list of medicines, vitamins, herbs and allergies. Photos of labels can help.
- ☐ Confirm arrival time, location, referral or insurance requirements, and any preparation the clinic actually requests.

The main thing I want help understanding

My three questions for today

Appointment date and time

Clinician and clinic

Support person or note-taker, if wanted

Interpreter or access needs

A line you can use: "I am taking in a lot. Can we pause and write the next step down?"

Your first fertility appointment

Your one-page care snapshot

Write only what you want to share with your care team. "I do not know" is a useful answer. If a question does not apply to your path to parenthood, skip it.

Age, if you want to note it

What brings me in now

Relevant history, diagnoses, procedures or prior fertility care

Cycle pattern or changes, if relevant

Pregnancy history, if relevant

Medicines, supplements and herbs with amounts; allergies or reactions

Prior testing: date, lab or clinic, and where reports can be found

My goals, preferences and boundaries

Practical limits: time, work, travel, budget, support or caregiving

Bring or request

- ☐ Prior records and imaging reports, not just a remembered number
- ☐ Insurance card, referral and a benefits contact if applicable
- ☐ Clinic-specific instructions for any test or sample planned that day

Privacy note: this workbook may contain health information. Keep it somewhere private; use the clinic's secure route if you choose to share it.

Your first fertility appointment

Understand the purpose of a test

Your evaluation should fit your history and goals. Not everyone needs the same tests. Ask: "What will this answer, what can it not tell us, and how would it change our next step?" [1,2]

Ovarian reserve

AMH is a blood marker; AFC is an ultrasound count of small visible follicles. These can help estimate response to stimulation. They do not count every remaining egg, measure egg quality, or predict pregnancy on their own. FSH and estradiol may add context; timing and interpretation belong to your clinic. [2]

Ovulation, uterus and fallopian tubes

Your cycle history may help your clinician assess ovulation. Depending on your situation, blood tests or imaging may be useful. An ultrasound looks at pelvic structures. Tests such as HSG or sonohysterography answer different questions about the uterus or tubes. Ask about preparation, discomfort, risks and alternatives. [1]

Semen testing, when relevant

A semen analysis describes features such as sperm number and movement. Results vary and are interpreted with the full history; a single cutoff is not a verdict. Ask the lab for its exact collection, abstinence and transport instructions. [1]

Keep the explanation with the result

Test and planned date

Preparation confirmed with

What this test can tell us and its limits

How the result could change the plan; when and how I will hear back

This guide intentionally leaves out "ideal" lab ranges. Units, methods, age, history and the treatment question all matter.

Your first fertility appointment

Leave with a plan you can repeat

Choose the questions that matter today

- ☐ What do we know, what is still uncertain, and which step would you take next?
- ☐ What are my options, including waiting or getting another opinion? What are the benefits, burdens and risks in my situation?
- ☐ If you recommend IVF, PGT-A or another add-on, what benefit is expected for me, what are its limits, and what does it cost? [3]
- ☐ What is included in the written estimate? Which medicines, anesthesia, lab services, storage or repeat visits are separate?
- ☐ What needs insurance approval, and who will confirm it before I incur costs?
- ☐ How do I contact the team during the day and after hours?

The next step in my own words

Who will arrange it

By what date

When and how results will arrive

If I have not heard, I will contact

Instructions I need in writing; anything still unclear

Clinic number or portal

After-hours number

Read-back: "To make sure I understood, my next step is ____, by _____. Is that right?"

Your first fertility appointment

Keep only the notes you need

Questions I want to return to

What I want my support person to know

Words for protecting your privacy

"I have medical appointments coming up. I will share what I am ready to share."

"Thanks for checking in. I would rather talk about something else today."

You do not owe anyone test results or a timeline.

Sources and scope

Education and organization for a US audience. This workbook does not diagnose infertility, interpret a result or recommend a treatment. It has not been approved by a clinician. The source-backed test summaries are intentionally brief; your care team provides individual advice.

[1] ASRM • Fertility evaluation of infertile women (2021)

[2] ASRM • Testing and interpreting measures of ovarian reserve (2020)

[3] ASRM • Use of preimplantation genetic testing for aneuploidy (2024)

Sources checked October 1, 2026. Numbers [1-3] refer to the sources in the order above.

Worksheets and suggested questions are editorial tools from WithViv.