

Support for the waiting days

A flexible companion from treatment to test day

Let your clinic set the timeline

For the days after insemination or embryo transfer, or another wait your clinic has defined. Use this companion for practical support. The wait is not always exactly two weeks.

Hola. You can feel hopeful, tired, distracted or none of those things. These pages are optional. You do not have to feel calm or positive to deserve care.

Write down the medical plan first

Clinic test date and time

Test type and location

How and when results will arrive

Who to contact if they do not

Daytime clinic contact

After-hours contact

My clinic's written medicine and activity instructions

Use the clinic's testing date. Early home tests can be misleading, and medicines containing hCG can affect results. Symptoms cannot reliably tell you the outcome. Keep following prescribed medicines and contact the clinic before changing them because of symptoms or a home result. [1,2]

One useful choice today

What would make today a little easier, and who can help?

Rest for comfort if you need it. Bed rest is not recommended to improve embryo-transfer outcomes. Ask your team what movement is appropriate for your treatment and recovery. [3]

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A small check-in, whenever it helps

Repeat this page as needed. Skip tracking if it makes the wait feel harder. These prompts are for coping, not symptom interpretation or predicting pregnancy.

Today's date

One word for how today feels

What I need today: company, quiet, distraction, food, practical help or something else

One manageable thing I can choose

One question to save for my care team

Try one option or none

- Look around and name three things you can see. Notice their color or shape.
- Feel the chair or floor supporting you. You can keep your eyes open.
- If breathing exercises feel comfortable, let your breathing stay easy and unforced for a few breaths. No breath holds or required counts. Stop if you feel dizzy or more distressed.
- Choose a familiar activity that is allowed by your clinic: music, a short call, a puzzle or a show.

These practices are for comfort and coping. They are not proven to improve implantation or pregnancy rates. You do not have to turn relaxation into another task. [4]

My phone or searching boundary, if I want one

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Make a plan for result day

Results may be positive, negative or not yet clear. You can plan for support without deciding how you are supposed to feel.

Where I want to receive the result

Person I want with me or available

One practical comfort or task someone else can handle

Who may hear the result and what I want kept private

Ask the clinic before ending the call

- ☐ What does this result mean, and is another test or scan needed?
- ☐ Which medicines do I continue, change or stop, and exactly when?
- ☐ What symptoms need an urgent call, and who answers after hours?
- ☐ When is the next appointment or conversation?

Instructions and next contact, in the clinic's words

A message you can adapt

"I am waiting for results. Please let me bring it up when I am ready. A meal, a ride or a normal conversation would help."

For a support person: ask what kind of help is welcome. Follow their lead on advice, updates and sharing the news.

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Know where to get more support

Medical symptoms belong with your care team

After stimulation, contact your clinic urgently for worsening abdominal swelling or pain, repeated vomiting, trouble keeping fluids down, or much less urine. For severe trouble breathing, chest pain, fainting, uncontrolled bleeding, or sudden severe abdominal pain, call 911 or seek emergency care now. Do not wait for a portal reply. [5,7]

Emotional support is part of care

If worry, sadness or the wait is making everyday life hard, ask your clinic for a licensed mental health professional or fertility-focused counselor. In the US, call or text 988 for immediate emotional crisis support. Call 911 for immediate danger. [4,6]

My support contacts and the kind of help I can ask for

Sources and scope

Education and optional reflection, not therapy, medical advice or a pregnancy prediction. This companion has not been approved by a clinician.

[1] FDA • Pregnancy home-use tests

[2] DailyMed • Ovidrel prescribing information

[3] ASRM • Performing the embryo transfer (2017)

[4] ReproductiveFacts • Stress and infertility (2023)

[5] ReproductiveFacts • Ovarian hyperstimulation syndrome

[6] 988 Lifeline • Get help

[7] MedlinePlus • When to use the emergency room

Sources checked October 1, 2026. [1-7] follow the order above. The flexible prompts are WithViv editorial tools.