

Song, Julee	DOB: 05/18/1982	PID: 381305
Auth AOL	Date: 07/25/2025	Time: 10:12 AM

Note:

Op Note: Vaginal oocyte retrieval

Informed consent obtained and consent signed.

1. Pre Op Dx: Infertility
2. Post Op Dx: same
3. Procedure: Vaginal oocyte retrieval under ultrasound guidance, endometrial biopsy
4. Surgeon: Angela Leung, MD
5. Findings: ovaries consistent with controlled ovarian hyperstimulation
6. EBL: minimal
7. Anesthesia: IV Sedation administered by attending anesthesiologist
8. Path: none
9. Drains: none
10. Complications: none

Procedure:

The patient was taken to the operating room, moved on to the operating table and then placed in the dorsal lithotomy position. General anesthesia was accomplished and the patient was prepped and draped in a sterile fashion. The ultrasound transducer with attached needle guide was introduced into the vagina and the follicles were visualized. A 17-gauge needle was introduced into the follicles under direct visualization and the follicles were aspirated. All aspiration tubes were sent immediately to the IVF laboratory for examination.

Endometrial biopsy performed for evaluation of endometrium. Risks of procedure discussed with patient, including possible hemorrhage and/or infection. Cervix prepped and pipelle catheter introduced into cervical canal. Once inside endometrial cavity, suction used to aspirate tissue in all four quadrants. Catheter removed. Patient tolerated procedure well.

At completion of the procedure a speculum was inserted into the vagina and hemostasis was assured by careful inspection. The patient tolerated the procedure well and was discharged to the care of anesthesia and the PACU team

Procedure Location: Liberty Corner Surgical Center at Basking Ridge- 140 Allen Road, Basking Ridge, NJ 07920

Signature: Angela Leung, MD

Song, Julee	SSN:	2747	Age:	43.31
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Home:	Work:	Prov:	MC	Nurse:	VZV
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Office Examination

US Prov: HRG **Exam Date:** 07/11/2025

Visit Note

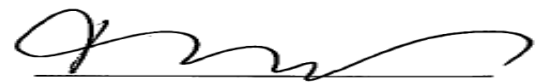
CC: Initial cycle visit for fertility treatment monitoring HPI: Patient preparing for cycle start. Discussed timing of medication start and when to expect next visit. ROS: Constitutional and GU symptoms reviewed and negative. Plan: We will evaluate BW, USS, past treatment, and current diagnosis. Will modify treatment plan this afternoon as needed and advise patient. If bloodwork and ultrasound are appropriate to start based on this patient's treatment plan, this cycle will begin. The patient was instructed to expect communication from their team today with further education and instructions

Instructions for today's medications are currently as follows:

- Dexamethasone 0.250 mg po qd
- Follistim AQ 225.000 IU sc qd
- Letrozole 5.000 mg po qd
- Menopur 75.000 IU sc qd
- Oral Estrace 0.000 mg po bid *

A focused history was obtained and a complete review of the reproductive cycle was performed with the patient. An examination of the patient was performed with specific attention to the abdomen as well as external and internal female genitalia.

A team conference was held later in the day to review the results of the morning office visit, and a nursing phone call was made to the patient to confirm the results and an understanding of instructions. Detailed plans were made to follow up.



Maria Costantini-Ferrando

Song, Julee	SSN: 2747	Age: 43.31
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Home:	Work:	Prov: MC	Nurse: VZV
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Ultrasound Examination

US Prov: MC Exam Date: 07/14/2025

Stim Ultrasound Final Report

Indication for exam: Evaluation of the complete female pelvis for fertility treatment progress.

07/14/2025 Julee Song is a 43.16 year old who was seen at Reproductive Medicine Associates this morning for a complete evaluation of the female pelvis via transvaginal ultrasound using a 7.5 MHz transvaginal probe. The examination was performed and documented in full.

The bladder was noted to be empty and devoid of masses or filling defects.

The right ovary was evaluated and measured and found to have:

4 antral follicles < 11mm,
No follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
No follicles between 18mm and 19mm,
No follicles > 19mm

The left ovary was evaluated and measured and found to have:

4 antral follicles < 11mm,
No follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
No follicles between 18mm and 19mm,
No follicles > 19mm

The uterus was then evaluated. The endometrium was noted to be 6.30 mm and was found to have a pattern Intermediate based on the Grunfeld grading system(Grunfeld L, Walker B, Bergh PA, Sandler B, Hofmann G, Navot D. High-resolution endovaginal ultrasonography of the endometrium: a noninvasive test for endometrial adequacy. Obstet Gynecol 1991;78(2):2004).

Cul-de-sac fluid was evaluated

The comments were as follows:

w/MC;
##MCDLV/##

RTO: 3 DAYS, PND BW


Maria Costantini-Ferrando

Song, Julee	SSN:	2747	Age:	43.31
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Home:	Work:	Prov:	MC	Nurse:	VZV
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Office Examination

US Prov: MC **Exam Date:** 07/14/2025

Visit Note

CC: This patient is monitoring for fertility treatment. Cycle is in progress. HPI: Discussed medication administration and side effects thus far. Patient has tolerated well and has no complaints today. ROS: Constitutional and GU symptoms reviewed. Denies adverse effects with cycle medications. Plan: Today's plan includes evaluation of bloodwork, ultrasound findings, past treatment, and current diagnosis. When the results return, we will modify treatment plan this afternoon as needed and advise patient of medication doses and timing of return visit.

Instructions for today's medications are currently as follows:

Dexamethasone 0.250 mg po qd

Follistim AQ 225.000 IU sc qd

Letrozole 5.000 mg po qd

Menopur 75.000 IU sc qd

A focused history was obtained and a complete review of the reproductive cycle was performed with the patient. An examination of the patient was performed with specific attention to the abdomen as well as external and internal female genitalia.

A team conference was held later in the day to review the results of the morning office visit, and a nursing phone call was made to the patient to confirm the results and an understanding of instructions. Detailed plans were made to follow up.



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Home:	Work:	Prov:	MC	Nurse:	VZV
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Ultrasound Examination

US Prov: MC Exam Date: 07/16/2025

Stim Ultrasound Final Report

Indication for exam: Evaluation of the complete female pelvis for fertility treatment progress.

07/16/2025 Julee Song is a 43.16 year old who was seen at Reproductive Medicine Associates this morning for a complete evaluation of the female pelvis via transvaginal ultrasound using a 7.5 MHz transvaginal probe. The examination was performed and documented in full.

The bladder was noted to be empty and devoid of masses or filling defects.

The right ovary was evaluated and measured and found to have:

4 antral follicles < 11mm,
No follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
No follicles between 18mm and 19mm,
No follicles > 19mm

The left ovary was evaluated and measured and found to have:

2 antral follicles < 11mm,
2 follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
No follicles between 18mm and 19mm,
No follicles > 19mm

The uterus was then evaluated. The endometrium was noted to be 5.40 mm and was found to have a pattern Intermediate based on the Grunfeld grading system(Grunfeld L, Walker B, Bergh PA, Sandler B, Hofmann G, Navot D. High-resolution endovaginal ultrasonography of the endometrium: a noninvasive test for endometrial adequacy. Obstet Gynecol 1991;78(2):2004).

Cul-de-sac fluid was evaluated

The comments were as follows:
start HGH today @vzv//9am with MC@vzv;
##MC/DLV##

RTO: PND BW, 2-3 DAYS


Maria Costantini-Ferrando

Home: Work: Prov: MC Nurse: VZV

Office Examination

Exam Date: 07/16/2025

Visit Note

CC: Patient returns to our office for ultrasound monitoring of fertility treatment cycle. HPI: Inquired how patient is feeling – doing well with treatment. Discussed ultrasound findings in detail and cycle progress. Answered any and all questions. ROS: Constitutional and GU symptoms reviewed and found to be negative. Noted any bloating and potential side effects from medications. Plan: Patient will have bloodwork drawn which will be reviewed this afternoon. Review of ultrasound findings, age, diagnosis, and past cycles will be incorporated in order to determine the most appropriate medication dosing and timing of return visit. We will discuss the plan with the patient in detail.

Instructions for today's medications are currently as follows:

Dexamethasone 0.250 mg po qd

Follistim AQ 225.000 IU sc qd

Ganirelix 250.000 mcg sc qd


Letrozole 0.000 mg po qd

Menopur 150.000 IU sc qd

Omnitrope 2.500 mg sc qd

A focused history was obtained and a complete review of the reproductive cycle was performed with the patient. An examination of the patient was performed with specific attention to the abdomen as well as external and internal female genitalia.

A team conference was held later in the day to review the results of the morning office visit, and a nursing phone call was made to the patient to confirm the results and an understanding of instructions. Detailed plans were made to follow up.



Maria Costantini-Ferrando

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Home:	Work:	Prov:	MC	Nurse:	VZV
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Ultrasound Examination

US Prov: HRG Exam Date: 07/18/2025

Stim Ultrasound Final Report

Indication for exam: Evaluation of the complete female pelvis for fertility treatment progress.

07/18/2025 Julee Song is a 43.17 year old who was seen at Reproductive Medicine Associates this morning for a complete evaluation of the female pelvis via transvaginal ultrasound using a 7.5 MHz transvaginal probe. The examination was performed and documented in full.

The bladder was noted to be empty and devoid of masses or filling defects.

The right ovary was evaluated and measured and found to have:

4 antral follicles < 11mm,
1 follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
No follicles between 18mm and 19mm,
No follicles > 19mm

The left ovary was evaluated and measured and found to have:

2 antral follicles < 11mm,
2 follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
No follicles between 18mm and 19mm,
No follicles > 19mm

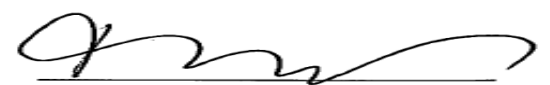
The uterus was then evaluated. The endometrium was noted to be 5.70 mm and was found to have a pattern Intermediate based on the Grunfeld grading system(Grunfeld L, Walker B, Bergh PA, Sandler B, Hofmann G, Navot D. High-resolution endovaginal ultrasonography of the endometrium: a noninvasive test for endometrial adequacy. Obstet Gynecol 1991;78(2):2004).

Cul-de-sac fluid was evaluated

The comments were as follows:

##HRG/MYC2##

RTO: 2 days ,pnd bw



Maria Costantini-Ferrando

Nurse: VZV

Song, Julee	SSN:	2747	Age:	43.31
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Home:	Work:	Prov:	MC	Nurse:	VZV
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Ultrasound Examination

US Prov: ET7 Exam Date: 07/20/2025

Stim Ultrasound Final Report

Indication for exam: Evaluation of the complete female pelvis for fertility treatment progress.

07/20/2025 Julee Song is a 43.17 year old who was seen at Reproductive Medicine Associates this morning for a complete evaluation of the female pelvis via transvaginal ultrasound using a 7.5 MHz transvaginal probe. The examination was performed and documented in full.

The bladder was noted to be empty and devoid of masses or filling defects.

The right ovary was evaluated and measured and found to have:

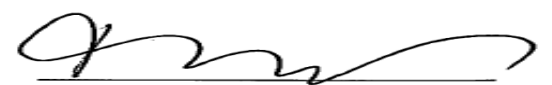
2 antral follicles < 11mm,
1 follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
No follicles between 18mm and 19mm,
No follicles > 19mm

The left ovary was evaluated and measured and found to have:

2 antral follicles < 11mm,
2 follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
1 follicles between 16mm and 17mm,
No follicles between 18mm and 19mm,
No follicles > 19mm

The uterus was then evaluated. The endometrium was noted to be 9.00 mm and was found to have a pattern Trilaminar based on the Grunfeld grading system(Grunfeld L, Walker B, Bergh PA, Sandler B, Hofmann G, Navot D. High-resolution endovaginal ultrasonography of the endometrium: a noninvasive test for endometrial adequacy. Obstet Gynecol 1991;78(2):2004).
Cul-de-sac fluid was evaluated

The comments were as follows:
pt out of omnitrope ##et7/mev2##
RTO: pnd bw



Maria Costantini-Ferrando

Home: Work: Prov: MC Nurse: VZV

Office Examination

Exam Date: 07/20/2025

CC: Morning monitoring performed today for fertility treatment cycle that is currently ongoing. HPI: Patient presents after many days of treatment for evaluation. Denies complaints. Discussed cycle progress and timing of next steps. Expected side effects from medications reviewed and patient reassured. ROS: Overall, patient is tolerating treatment thus far and has expected constitutional and GU symptoms. Plan: Labs drawn this morning will be reviewed later today. Ultrasound results will be used to formulate a plan that accounts for the patient's prior cycles, age, and diagnosis. Updated instructions for medication administration and next visit timing will be communicated to the patient.

Omnitrope 0.000 mg sc qd

A team conference was held later in the day to review the results of the morning office visit, and a nursing phone call was made to the patient to confirm the results and an understanding of instructions. Detailed plans were made to follow up.

[illegible]

Maria Costantini-Ferrando

Song, Julee	SSN:	2747	Age:	43.31
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Home:	Work:	Prov:	MC	Nurse:	VZV
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Ultrasound Examination

US Prov: ET7 Exam Date: 07/22/2025

Stim Ultrasound Final Report

Indication for exam: Evaluation of the complete female pelvis for fertility treatment progress.

07/22/2025 Julee Song is a 43.18 year old who was seen at Reproductive Medicine Associates this morning for a complete evaluation of the female pelvis via transvaginal ultrasound using a 7.5 MHz transvaginal probe. The examination was performed and documented in full.

The bladder was noted to be empty and devoid of masses or filling defects.

The right ovary was evaluated and measured and found to have:

2 antral follicles < 11mm,
No follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
1 follicles between 16mm and 17mm,
No follicles between 18mm and 19mm,
No follicles > 19mm

The left ovary was evaluated and measured and found to have:

2 antral follicles < 11mm,
1 follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
3 follicles between 16mm and 17mm,
No follicles between 18mm and 19mm,
No follicles > 19mm

The uterus was then evaluated. The endometrium was noted to be 9.60 mm and was found to have a pattern Trilaminar based on the Grunfeld grading system(Grunfeld L, Walker B, Bergh PA, Sandler B, Hofmann G, Navot D. High-resolution endovaginal ultrasonography of the endometrium: a noninvasive test for endometrial adequacy. Obstet Gynecol 1991;78(2):2004).

Cul-de-sac fluid was evaluated

The comments were as follows:

ET7. Pt may consider cx vs proceeding for VOR;

##ET7/NAJ##

RTO: discussed proceeding to VOR with this cycle, 1 day to scan w/MC @9, pnd bw



Maria Costantini-Ferrando

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Home:	Work:	Prov:	MC	Nurse:	VZV
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Office Examination

US Prov: ET7 **Exam Date:** 07/22/2025

Visit Note

CC: She is here today for bloodwork and pelvic ultrasound monitoring of her fertility cycle. HPI: I reviewed her cycle progress to date and response to medications. She has expected symptoms and side effects from treatment which were discussed during our visit. ROS: She feels fine and her constitutional and GU symptoms are consistent with fertility treatment. Plan: Today's ultrasound and bloodwork will be reviewed later today in the context of her prior cycles, diagnosis, and overall prognosis. She will receive detailed instructions later today with medication changes and the return-to-office date.

Instructions for today's medications are currently as follows:

- Dexamethasone 0.250 mg po qd
- Follistim AQ 225.000 IU sc qd
- Ganirelix 250.000 mcg sc bid *
- Menopur 150.000 IU sc qd

A focused history was obtained and a complete review of the reproductive cycle was performed with the patient. An examination of the patient was performed with specific attention to the abdomen as well as external and internal female genitalia.

A team conference was held later in the day to review the results of the morning office visit, and a nursing phone call was made to the patient to confirm the results and an understanding of instructions. Detailed plans were made to follow up.



Maria Costantini-Ferrando

Song, Julee	SSN:	2747	Age:	43.31
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Home:	Work:	Prov:	MC	Nurse:	VZV
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Ultrasound Examination

US Prov: MC Exam Date: 07/23/2025

Stim Ultrasound Final Report

Indication for exam: Evaluation of the complete female pelvis for fertility treatment progress.

07/23/2025 Julee Song is a 43.18 year old who was seen at Reproductive Medicine Associates this morning for a complete evaluation of the female pelvis via transvaginal ultrasound using a 7.5 MHz transvaginal probe. The examination was performed and documented in full.

The bladder was noted to be empty and devoid of masses or filling defects.

The right ovary was evaluated and measured and found to have:

2 antral follicles < 11mm,
1 follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
1 follicles between 18mm and 19mm,
No follicles > 19mm

The left ovary was evaluated and measured and found to have:

2 antral follicles < 11mm,
1 follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
3 follicles between 18mm and 19mm,
No follicles > 19mm

The uterus was then evaluated. The endometrium was noted to be 12.80 mm and was found to have a pattern Trilaminar based on the Grunfeld grading system(Grunfeld L, Walker B, Bergh PA, Sandler B, Hofmann G, Navot D. High-resolution endovaginal ultrasonography of the endometrium: a noninvasive test for endometrial adequacy. Obstet Gynecol 1991;78(2):2004).

Cul-de-sac fluid was evaluated

The comments were as follows:

w/MC at 9am;

##MC/NAJ##

RTO: Possible Trigger, pnd bw



Maria Costantini-Ferrando

Song, Julee	SSN:	2747	Age:	43.31
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Home:	Work:	Prov:	MC	Nurse:	VZV
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Office Examination

US Prov: MC **Exam Date:** 07/23/2025

Visit Note

CC: Patient is here today for close monitoring of her REI treatment cycle and progress to date. HPI: During this visit, an ultrasound was performed and cycle progress and response was discussed with patient. Side effects from treatment medications and their physiologic significance were reviewed. ROS: The patient has constitutional and GU symptoms that are expected at this stage of her fertility treatment. Plan: Assessment of cycle progress will be performed once bloodwork results are received. Ultrasound and hormonal levels will be interpreted in the setting of this patient's specific age, diagnosis, and prior history. We will communicate later today with a plan of action for medication dosing and her next visit to our clinic.

Instructions for today's medications are currently as follows:

Dexamethasone 0.000 mg po qd

Follistim AQ 0.000 IU sc qd

Ganirelix 0.000 mcg sc bid *

Lupron Trigger 40.000 unit sc at time specified by RN, repeat dose 12 hrs later *

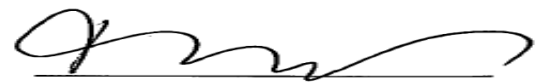
Menopur 0.000 IU sc qd

Pregnyl 3300.000 kIU sc tonight, at time specified by RN

A focused history was obtained and a complete review of the reproductive cycle was performed with the patient. An examination of the patient was performed with specific attention to the abdomen as well as external and internal female genitalia.

A team conference was held later in the day to review the results of the morning office visit, and a nursing phone call was made to the patient to confirm the results and an understanding of instructions. Detailed plans were made to follow up.

Reviewed 07/23/2025



Maria Costantini-Ferrando

Song, Julee						-2747	
DOB: 05/18/1982	Cycle #: 5	Cycle Type: IVF	Proc#: 141172		Prov: MC		Nurse: VZV

Retrieval

General Information

Retrieval Date: 07/25/2025	Embryologist: TXD	Donor ID:
Retrieval Start Time: 10:02AM	Physician: AOL	
ID Verification: <input checked="" type="checkbox"/> By: SAV1	Donor Age:	

Cumulus / Cornona Complex

Number Of Oocytes: 3	Embryologist: TXD
Incubator: 35	

Reviewed By: HYL Review 08/01/2025 02:09 PM
 Reviewer Comments:

Comments:

Insemination Notes:

Reproductive Medicine Associates of New Jersey - Basking Ridge
 140 Allen Road, Basking Ridge, NJ 07920, (908)604-7800

Phone:(908)604-7800

Fax:(973)290-8370

Song, Julee				-2747			
DOB: 05/18/1982	Cycle #: 5	Cycle Type: IVF	Proc#: 141172		Prov: MC	Nurse: VZV	

Male Analysis

Date / Time	Vial #	%Normal	Purpose	Source	Source Type	Source DOB	Source SSN
07/25/2025 09:13 AM			IVF-ICSI	Kim, Myung Han	EJACULATED	04/25/1982	

Insemination

Embryologist	DRS		Embryologist:	Hokyung Lee
Witness:	CHP1		Hyal Date:	07/25/2025
Insemination Date:	07/25/2025		Hyal Time:	12:58PM
Insemination Time:	02:40PM	# Eggs: 3	Concentration:	
Concentration:				

Sperm Post Process

Embryologist: ANG	Progress: 2.5	<input type="checkbox"/> AmorphHead	<input type="checkbox"/> Gradient
Gradients	% Viability:	<input type="checkbox"/> Tapered	<input type="checkbox"/> Mini-gradient
Volume: 0.3		<input type="checkbox"/> Neck Defect	<input type="checkbox"/> Pure Sperm
cx10/ml 13.0		<input type="checkbox"/> Vacuol. Head	<input type="checkbox"/> Swim-up
% Normal:		<input type="checkbox"/> Abnormal Tail	<input type="checkbox"/> Sediment
% Motility: 99.0		<input type="checkbox"/> PinHead	<input type="checkbox"/> Pentoxifyll
		<input type="checkbox"/> Acrosome Missing Small	<input type="checkbox"/> Cent. 1800 g.

Comments:

Zymot used per special request by MC
 SAV IDd post zymot sample

Song, Julee										-2747	
DOB: 05/18/1982		Cycle #: 5		Cycle Type: IVF					Proc#: 141172		Prov: MC Nurse: VZV

DAY 1

Embryo#	Outcome	Emb	Witness	Date	Time	Pro Nuc	Polar Body	Maturity	24hr Chk	Incubator	Comment
1	Ongoing	TZ	AXB	07/26/2025	06:43AM	2	2			35	
2	Ongoing	TZ	AXB	07/26/2025	06:43AM	2	2			35	
3	Ongoing	TZ	AXB	07/26/2025	06:43AM	2	2			35	

DAY 3

Embryo#	Outcome	Emb	Witness	Date	Time	Grade	Cell	Frag%	Frag Type	Symmetry	Bx	Bx For	Bx Emb	Bx Method	AH	AH Method	ChgOver	Incubator	Thaw Survival	Comment
1	Ongoing	VAC	RYM1	07/28/2025	09:29AM	1					<input type="checkbox"/>				<input checked="" type="checkbox"/>	Laser	VAC	72		
2	Ongoing	VAC	RYM1	07/28/2025	09:29AM	2					<input type="checkbox"/>				<input checked="" type="checkbox"/>	Laser	VAC	72		
3	Ongoing	VAC	RYM1	07/28/2025	09:29AM	3					<input type="checkbox"/>				<input checked="" type="checkbox"/>	Laser	VAC	72		

DAY 5

Embryo#	Outcome	Emb	Wit	Date	Time	Stage	Cell Type	Exp	ICM	Troph	ICM Absent	ICM Necrotic	TE Necrotic	Bx	Bx For	Bx Emb	Bx Method	AH	AH Method	Incubator	Thaw Survival	Comment	Gen Anal.	Ploidy	PGD	Appro.for ET
1	Ongoing	VAC	HHL	07/30/2025	07:16AM	Blast		1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		72						
2	Ongoing	VAC	HHL	07/30/2025	07:16AM	MOR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		72						
3	Ongoing	VAC	HHL	07/30/2025	07:16AM	6					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		72						

Song, Julee

DOB: 05/18/1982

Cycle #: 5

Cycle Type: IVF

Proc#: 141172

-2747

Prov: MC

Nurse: VZV

DAY 6

Embryo#	Outcome	Emb	Wit	Date	Time	Stage	Cell Type	Exp	ICM	Troph	ICM Absent	ICM Necrotic	TE Necrotic	Bx	Bx For	Bx Emb	Bx Method	AH	AH Method	Incubator	Thaw Survival	Comment	Gen Anal.	Ploidy	PGD	Appro.for ET
1	MFC	MZC		07/31/2025	07:25AM	Blast		4	C	C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				<input type="checkbox"/>		72			Pnd	Pnd	Pnd	Pnd
2	Ongoing	MZC		07/31/2025	07:25AM	Blast		1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		72						
3	Ongoing	MZC		07/31/2025	07:25AM	6					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		72						

DAY 7

Embryo#	Outcome	Emb	Wit	Date	Time	Stage	Cell Type	Exp	ICM	Troph	ICM Absent	ICM Necrotic	TE Necrotic	Bx	Bx For	Bx Emb	Bx Method	AH	AH Method	Incubator	Thaw Survival	Comment	Gen Anal.	Ploidy	PGD	Appro.for ET
2	Discard	HYL		08/01/2025	07:09AM	Blast	Arrest	1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		72						
3	Discard	HYL		08/01/2025	07:09AM	6	Arrest				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		72						

Song, Julee		-2747	
DOB: 05/18/1982	Cycle #: 5	Cycle Type: IVF	Proc#: 141172
		Prov: MC	Nurse: VZV

Replacement

General Information

Replace Date:	Embryologist:	Cath:
Replace Time:	Physician:	

Embryo Status and Quantities

Embryos Loaded:
Embryos Returned:
Embryos Intact:
Returned Empty Zona:
Final Embryos Repl:

Attributes

<input type="checkbox"/> Forceps	<input type="checkbox"/> Blood Outside	<input type="checkbox"/> Muc. Plug
<input type="checkbox"/> Tenac	<input type="checkbox"/> Mucus Outside	<input type="checkbox"/> Difficult
<input type="checkbox"/> O-sheath	<input type="checkbox"/> Blood Inside	<input type="checkbox"/> Anesthetic
<input type="checkbox"/> Dialated	<input type="checkbox"/> Mucus Inside	<input type="checkbox"/> Valium
<input type="checkbox"/> Pain		<input type="checkbox"/> Trial Cath
<input type="checkbox"/> Mucs. Aspir		<input type="checkbox"/> Irrigation
Depth Pen:	Attempts Pen:	

Endo / Video

Reloads:
Endo Thick:
Endo Type:
Reload Cath:
Tape ID:
Location:

Replaced Embryos

Song, Julee										-2747	
DOB: 05/18/1982		Cycle #: 5		Cycle Type: IVF				Proc#: 141172		Prov: MC	Nurse: VZV

Cryo

Embryo	Outcome	Emb	Date	Time	Technique	Recryo	Exp	ICM	Troph	Cells	Cell Stage	FDA Label	Cryo Location	Comment
1	Cryoed	BZC	07/31/2025	09:15AM	VIT		4	C	C	Blast	Day 6	NOT EVALUATED FOR INFECTIOUS SUBSTANCES - WARNING: ADVISE RECIPIENT OF COMMUNICABLE DISEASE RISKS	[BR Active Embryo Storage] BR Dewar 60 Tier A Box 20 Goblet F2 Straw 1 D6 PGT AX1#1	