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Sonja B. Kristiansen, MD

*Board Certified  
Reproductive Endocrinologist*

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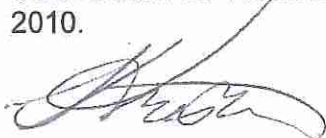
November 5, 2014

To Whom It May Concern,

Amanda Wilson was referred to me with primary infertility by Dr. Deanna McDonald. She presented in September, 2008 for a fertility evaluation after attempting conception for six months. A fertility workup was ordered. Mrs. Wilson's hormone panels were within normal limits. Her hysterosalpingogram indicated a normal uterine cavity and patent fallopian tubes. Further evaluations, including a complete semen analysis were declined by the patient.

Based upon the tests that were done, I prescribed ovulation induction with insemination in March, 2009. Mrs. Wilson began Follistim 150iu daily, self-administered subcutaneously on March 23, 2009. An intrauterine insemination was performed on April 1, 2009. Based upon the semen analysis at the time of the semen wash, it was determined that the total motile count was within normal limits but showed a low motility of 41.9%. Mrs. Wilson experienced mild ovarian hyperstimulation syndrome post insemination which only required monitoring and did not require any further intervention. The treatment cycle did not result in a pregnancy.

Mrs. Wilson began another injection with insemination cycle on August 17, 2009. She again used Follistim 150iu subcutaneously daily. It was suggested, based upon her previous cycle and current ovarian stimulation, that Mrs. Wilson convert the treatment to InVitro Fertilization for optimal chances of success. The Wilsons decided to proceed with IVF. An egg retrieval was performed on August 28, 2009. Twenty four eggs were retrieved, thirteen of which were suitable for insemination of which ten of the thirteen fertilized. As of the transfer date, four of the embryos were progressing in culture. On August 31, 2009 three of the four embryos were transferred to Mrs. Wilson. The fourth embryo was discarded per the patient's request. On September 14, 2009 Mrs. Wilson's blood pregnancy test came back positive. On September 29, 2009 an ultrasound was performed indicating a viable twin intrauterine pregnancy. An additional ultrasound was performed on October 8, 2009 indicating that the pregnancy was progressing and anticipated. She was released to her Obstetrician for continuing care. It was reported that she delivered twins early on April 1, 2010.



Sonja Kristiansen, M.D.