

May 2026

IVF (Standard package will include):

- Initial consultation, follow up consultation, and counselling sessions.
- Tests for hepatitis and HIV - HFEA requirement
- All ultrasound scans and hormone assessments during the treatment cycle
- Oocyte stimulation
- Oocyte recovery - by vaginal ultrasound guided aspiration under sedation or local anaesthesia; laparoscopy as appropriate under general anaesthesia
- IVF or ICSI to produce embryos and blastocyst culture as appropriate.
- **One** embryo or blastocyst transfer into uterine cavity*
- Pregnancy test and a maximum of two scans to establish pregnancy viability.
- Drug costs and sperm preparation
- Embryo storage for 3 years – after which time cryopreservation fees become the responsibility of the couple

**Please see ICB policy, section 7.2, for more information on cancelled cycles and associated funding*

IVF with ICSI (package as above)

- For patients with male factor infertility

Cryopreservation

Cryopreservation of gametes will be available to patients in the following circumstances:

- The patient is undergoing or about to undergo NHS funded treatment, which is likely to render the patient permanently infertile e.g. cytotoxic therapy or gender reassignment
- The patient is at immediate risk of testicular failure
- The patient has a diagnosed chromosomal abnormality which is likely to render the patient permanently infertile e.g. Klinefelter syndrome, which carries a high risk of testicular failure
- The patient's ovaries/testes are going to be removed as part of NHS funded treatment e.g. to prevent the spread of disease.

In the above circumstances, gamete freezing and storage for 5 years will be NHS funded.

Specialised surgical sperm recovery (TESA/PESA) with IVF / ICSI

Surgical sperm recovery is the specialist commissioning responsibility of NHS England. Patients must be referred to an NHS trust that is commissioned to do these procedures. SSOT ICB will fund the subsequent IVF / ICSI cycle

Donor oocyte cycle

- Premature ovarian failure
- Gonadal dysgenesis including Turner Syndrome
- Bilateral oophorectomy
- Ovarian failure following chemotherapy or radiotherapy

Donor Sperm with IVF

Donor sperm (from HFEA approved unit) will be funded in the following clinical circumstances: For the management of male infertility associated with the following conditions:

- Obstructive azoospermia
- Non-obstructive azoospermia
- Severe deficits in semen quality in couples who do not wish to undergo ICSI (where there is a higher risk of failure)
- Where there is a high risk of transmitting a genetic disorder to the offspring
- Where there is a high risk of transmission of infectious disease (e.g. hepatitis, HIV)
- Severe Rhesus iso-immunisation

***Chronic Viral Infections**

Patients with chronic viral infections who are eligible for IVF treatment should be referred to one of the commissioned providers who have the appropriate processing facilities to meet the needs of these patients.

SSOT ICB commission a number of specialist fertility treatment providers and secondary care consultants must provide couples with appropriate information / list of clinics so they can make an informed choice regarding where they would like to receive treatment