My partner and I are just beginning our fertility journey. How do we create the best care plan for us?

Dr. Tom Hannam

A Care Plan is probably the most important thing you can have in your fertility journey.

Of course, we all hope that we won’t have a “journey”. We hope that we’ll achieve pregnancy quickly, on our own, like so many friends and neighbours and co-workers seem to do.

When it isn’t easy – when you find yourself on websites, or at your doctor’s office or a fertility clinic-then you are on a journey.

Many patients arrive at a clinic hoping for a very, very short journey. Others are willing to let things take a little longer if it means fewer tests or medications. Sometimes finances must be carefully considered. A Care Plan will help you and your clinical team resolve these sometimes conflicting goals.

A Care Plan often consists of four parts: Assessment, Planning, Implementation, and Evaluation. This may be a process that you clearly lay out with your doctor, or it can be something you refer to on your own, to keep yourself on track.

**What's involved in an assessment?**

From first contact, the clinical team will assess your situation through medical history, do physical examinations and investigations. It can get quite involved.

How far do you want your assessment to go?

Some patients want just the minimum. I had a patient who planned to carry the embryos for her best friend. I can tell you, there are a lot of tests that I can order to “ensure” that she will be safe to become pregnant. From ECHO cardiograms to 3D sonohysterograms, we can do it all. She wanted almost none of it. I insisted on a few things – infectious disease testing and legal counseling – but this patient had identified that she was going to minimize intervention. There are risks that something can go wrong, but she felt it was easier and gentler to do few tests.

Other patients want to rule out everything. For them, the stress of a procedure or investigation is easily balanced by their need for an answer – a need to know that they have explored the outer limits of what science can tell us.

Many patients are less certain of what’s right for them as they begin their journey. This is when it is most important to communicate well your doctor. Making sure that we, your care team, and you, the patient have the same expectations and definition of what is “right” for you can be a challenge sometimes.

When my patients are looking for guidance, I start with the easy tests. Of course, it’s easy for me to say “easy tests” and not everyone will agree with how I might define them. The ideal pace of change is different for every patient. Though if weeks or months are passing, I will suggest more tests and more aggressive therapies.

Once you have identified the tests or treatments that you want to do, you are ready for the plan to get you there.

**How do we make a plan?**

Planning how to organize your treatments and testing is often done in collaboration with your nurse.

Some patients hope to get their investigations over with and treatments started as fast as possible.

But in practice, as-fast-as-possible can be totally consuming, and perhaps incompatible with other life goals (like keeping your job and your mental health).

A good plan will set expectations that can work for everyone.

**Is implementing the hard part?**

Implementation, at its best, can be a relatively low-stress experience: you are simply doing what you had set out to do.

Your body may not co-operate with your plans, of course, which is what leads us to the final step…

**When do we need to re-evaluate?**

At the end of every cycle, you should review your situation. Are you happy with the level of investigations? Of treatments? With the pace and intensity of your care? Is your plan clear? Are treatments being implemented appropriately?

A Care Plan will help ensure that you receive medical care that fits.

I hope this approach helps you. I have found it a useful framework in my own practice to guide us at every step.