



## Oocyte Warming and Embryology Record

Please complete the oocyte warming and embryology record upon warming oocytes from Cryos. Any additional comments should be added below the table. Please return the form to Cryos following the pregnancy test.

Clinic: \_\_\_\_\_ IP Name: \_\_\_\_\_

Date: \_\_\_\_\_ Order Number: \_\_\_\_\_

Donor No. & Details e.g. (1) ANNA-1	
Recipient's age	
Etiology of infertility	
Sperm type (fresh / frozen partner or donor)	
Sperm parameters (concentration, motility, morphology, other info)	
Warming kit/lot number	
# oocytes expected	
# oocytes recovered	
# oocytes survived	
# oocytes survived ICSI	
# 2PN's	
# 3PN's/ abnormal fert	
# day3 embryos (6-8 cells) if applicable	
# day 5 blastocysts	
# of embryo(s) transferred and grade	
# of embryo(s) vitrified and grade	
Clinical pregnancy/ +hCG	

Embryologist Initials: \_\_\_\_\_

Comments: