CABELL HUNTINGTON HOSPITAL CENTER FOR ADVANCED REPRODUCTIVE MEDICINE HUNTINGTON, WEST VIRGINIA

Comparison of success rates across clinics may not be meaningful. Patient medical characteristics and treatment approaches vary (see pages 11-20).

2013 ART CYCLE PROFILE Data					a verified by William N. Burns, MD					
	Type of ART and	lural Facto	rs ^a	Patient Diagnosis b						
	IVF Unstimulated Used gestational carrier		With ICSI Used PGD	67% 0%	Tubal factor Ovulatory dysfunction Diminished ovarian reserve Endometriosis	24% 4%	Uterine factor Male factor Other factor Unknown factor	16%	Multiple Factors: Female factors only Female & male factors	12% 4%

CURRENT SERVICES & PROFILE

Current Name: Cabell Huntington Hospital,

Center for Advanced Reproductive Medicine

Donor eggs?	Vas	Gestational carriers?	No	Single women?	Vac	Verified lab accreditation?	Yes
Donor eggs:	103	acstational carriers:	140	Olligic Worlich:	103	vernica iab accicattation:	103
Donor embryos?	No	Embryo cryopreservation?	Yes	SART member?	No	(See Appendix C for details.)	

a Reflects features of fresh nondonor cycles. If IVF is <100%, the remaining cycles are GIFT, ZIFT, or a combination of these procedures with IVF.

b Total patient diagnosis percentages may be greater than 100% because more than one diagnosis can be reported for each ART cycle.

[°] Fractions are used for rates with denominators less than 20. Multiple-infant births (e.g., twins) with at least one live infant are counted as one live birth.

d Total cycle number includes those using frozen eggs. It excludes 0 cycle(s) evaluating new procedures. Both cycle types are excluded from ART success rates.

e In this report, births are defined as term if at least 37 full weeks gestation and normal birth weight if at least 2,500 grams (approximately 5 pounds, 8 ounces).

f All ages are reported together because previous data show that patient age does not materially affect success with donor eggs.