



**RESOLVE**  
National Office

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***QUESTIONS TO ASK***  
**When Assessing A Physician's Qualifications**  
**Including Guidelines for Changing to an Infertility Specialist (#3)**

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If your doctor is not on the current RESOLVE Physician Referral List, you can use the following questions to find out the doctor's qualifications, experience and expertise in treating infertility problems. You can ask the secretary or office manager these questions or you can ask the doctor directly when you go for your first appointment. RESOLVE's fact sheet "What Is An Infertility Specialist," can help you interpret the responses to these questions.

**For OB/GYN:**

- ! What percentage of the practice is involved in infertility diagnosis and treatment?
- ! Did he/she complete a 2 year fellowship in reproductive endocrinology which is a sub-specialty of OB/GYN dealing with infertility? If so, where and when?
- ! Has he/she taken part 1 or part 2 of the board exam to be certified in reproductive endocrinology? In order to be a board certified reproductive endocrinologist, the doctor has to complete the fellowship and pass both the oral and written exams. It usually takes 3-5 years to take and pass both exams after completing a fellowship.
- ! Is the doctor a member of the American Society for Reproductive Medicine? Does the doctor work with other infertility specialists?
- ! Does the doctor refer to specialists? If so, who does he/she refer to and what criteria does the doctor use for referral?
- ! Does the doctor refer to a particular clinic or doctor to evaluate the male partner? If so, who?
- ! Does the doctor do micro-surgery, operative laparoscopy, operative hysteroscopy or laser surgery? If so, is the doctor a member of the American Society for Reproductive Medicine's Society for Reproductive Surgeons?
- ! Does the doctor refer to a particular clinic for assisted reproductive technologies such as IVF or GIFT? If so, is the clinic a member of the American Society for Reproductive Medicine's Society for Assisted Reproductive Technologies and does the clinic report success rates to the CDC?
- ! Does the doctor prescribe gonadotropin drugs via injection?
- ! Does the doctor do IUI (intra uterine insemination)?
- ! What are weekend and holiday office hours if you need an insemination or ultrasound or a medication injection?
- ! If he/she does not provide this service on weekends, who do they refer to?
- ! Does the doctor provide obstetrical care?

## **For urologists:**

- ! What percentage of his/her practice is involved with male factor infertility, diagnosis and treatment?
- ! What sperm function tests does the doctor use to evaluate the male factor? (For example, sperm penetration assay, strict morphology test.)
- ! Does he/she do sperm washing and inseminations? If not, to whom does he/she refer to for these services?
- ! Does the doctor do rectal ultrasound, vasography and testicular biopsies?
- ! Does the doctor do microsurgery and/or sperm extraction in appropriate cases?
- ! Is the doctor a member of the American Society for Reproductive Medicine and/or the Andrology Society of America.

## **! General Considerations**

- ! Which hospitals does the doctor have admitting privileges to?
- ! Has the doctor been disciplined by a professional organization or a hospital? (Contact the state's licensing board.)
- ! Check the doctors credentials by looking at the American Medical Directory or the Directory of Medical Specialists at your local library.

## **Guidelines For Making the Change To An Infertility Specialist**

Following are some guidelines that can be used to determine if you should consider making the transition from a gynecologist to a infertility specialist (reproductive endocrinologist).

- ! You are 35 years of age or older.
- ! You have been attempting pregnancy for more than 3 years.
- ! You have been undergoing medical treatment for one year and have not conceived.
- ! You have a history of irregular cycles, pelvic infections, known hormonal problems, endometriosis, fibroids, DES exposure, excessive facial or body hair or a male factor that has been identified.
- ! You are considering having a laparoscopy and/or are about to start gonadotropin hormone injections.
- ! The practice does not offer holiday or weekend coverage for ultrasounds and blood levels.
- ! The practice is using abdominal ultrasound and not vaginal ultrasound.
- ! You do not get ovarian checks while on clomiphene to monitor the size of your ovaries in response to the drug.
- ! You have been on clomiphene for over 6 months with no success and there is no proposed change for your treatment in the months to come.
- ! You have a poor post-coital test but nothing is done to treat it or by-pass it, such as intrauterine insemination.
- ! You report pelvic pain, heavy periods and/or bowel or bladder symptoms around the time of menstruation and the doctor does not suggest having a hysterosalpingogram or laparoscopy to determine the cause of the symptoms.
- ! A fibroid or tubal damage has been noted on a hysterosalpingogram.
- ! If you have had 3 or more miscarriages.

**Additional resources are:**

RESOLVE's fact sheets: "Selecting an Infertility Physician," and "The Basic Infertility Evaluation"

American Society for Reproductive Medicine, 1209 Montgomery Highway, Birmingham, AL 35216, 205/978-5000, [www.asrm.org](http://www.asrm.org).

Directory of Medical Specialists. Published by Who's Who, available at most public libraries reference department.

American Board of Medical Specialties (847-491-9091), [www.ama-assn.org](http://www.ama-assn.org).

Andrology Society of America, 309 W. Clark St., Champaign, IL 81820 (to receive membership directory).

State Licensing Board to check for any disciplinary action brought against a physician.

*Further information on this topic is available through RESOLVE fact sheets. For a publications order form, please contact the local chapter or National RESOLVE Office at 1310 Broadway, Somerville, MA 02144-1731 or 617/623-0744.*

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