

## Coronavirus Disease (COVID-19)

We appreciate that this is a time of uncertainty and heightened anxiety for everyone. Rest assured that San Diego Fertility Center is taking all the appropriate precautions by following CDC and WHO guidelines to protect the health of our patients and prospective patients. We are also following the American Society of Reproductive Medicine (ASRM) directed recommendations for infertility treatment-related complications. See the ASRM information [here](#). We also are following the social distancing restrictions of California in order to keep our patients and employees safe.

### Common Questions:

- Should I postpone my current cycle?  
Currently, we recommend postponing cycles until the stay at home restriction in California is lifted.
- What happens if I start a cycle and I am required to cancel due to COVID-19?  
Although we hope that this doesn't occur, this is a risk in the current climate. We are closely monitoring CDC and ASRM guidelines for the safety of attempting pregnancy. There may be a circumstance that you have taken medications and incurred those associated costs. Unfortunately, cancelled cycles will require more medications to be purchased to restart a cycle.
- What are the symptoms of COVID-19 exposure?  
COVID-19 is a respiratory illness that can be spread from person to person. Symptoms include fever, chills, cough and shortness of breath. This is an ever-evolving situation that is being actively monitored by health agencies around the world.
- Can COVID-19 affect my sperm, eggs, or embryos?  
There is no scientific evidence of transmission of this virus (this is the case with many viral infections) to embryos. There is no evidence of transmission to gametes (sperm, eggs) given the standard gamete collection and preparation procedures, including the standard wash procedures. San Diego Fertility Center is not recommending postponing cycles for patients showing no signs of exposure or who are at increased risk of exposure.
- Can COVID-19 be transmitted to the fetus in pregnancy?  
As this as an evolving area of medicine, we have limited data. However, available data does not suggest intrauterine infection. In Feb 2020, Lancet published a paper from Wuhan university, detailing the outcomes of 9 pregnant women who had COVID-19 pneumonia, which is considered the most severe manifestation of the viral infection. They collected amniotic fluid, cord blood, neonatal throat swab and breast milk samples. Based on the results of this study, they concluded there is no evidence to suggest intrauterine infection also known as "vertical transmission". Two of the neonates did develop COVID-19 but thought to be due to exposures from contact after delivery (17 days and 3 days after birth). For more information, you can read [here](#).
- Should I travel internationally?  
It is recommended that international patients follow the travel restrictions of their countries.

Because of how air circulates and is filtered on airplanes, most viruses and other germs do not spread easily on airplanes. Although the risk of infection on an airplane is low, travelers should try to avoid contact with

sick passengers and wash their hands often with soap and water for at least 20 seconds or use hand sanitizer that contain a minimum of 60% alcohol.

Cleaning your immediate environment in the plane with a wipe prior to using items such as the tray or remote is recommended. The way this virus, much like many viruses, is spread is via respiratory droplets from someone who is coughing and other close contacts. Governments around the world are not allowing passengers with fevers or other respiratory conditions to travel on a plane so this is also reassuring.