

OVARIAN RESERVE *101*

CLARITY + CONFIDENCE FOR YOUR JOURNEY



A GUIDE FROM
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YOUR POCKET FERTILITY NURSE

Why Ovarian Reserve Matters

Understanding your ovarian reserve is one of the first steps in fertility testing, prior to doing any treatment. But the way it's explained in appointments can feel rushed or overly medical. Numbers, acronyms, and ranges get tossed around, and you're left wondering: ***What does this actually mean for me?***

This guide is here to change that. I'll break it down in plain language and give you advocacy tools so you can walk out of your appointment feeling clear and confident, not overwhelmed.



“Clarity is the first step toward confidence.”



The Must-Knows About Ovarian Reserve

What it is:

Ovarian reserve is a measure of the quantity of eggs remaining in your ovaries.

What it is not:

It does not tell us about egg quality. Age is the single most important factor in quality.

How can someone determine what their ovarian reserve is?

Ovarian reserve is tested using a combination of lab work and ultrasound. The four main tests used are Antral Follicle Count (AFC), Anti-mullerian Hormone (AMH), day 3 Follicle Stimulating Hormone (FSH), and day 3 Estradiol (E2). Ovarian reserve testing is used to assess how a woman may or may not respond to ovarian stimulation with medications. These results are often one of the very first conversations in fertility care, which means the clarity you gain here can set the tone for your whole journey.

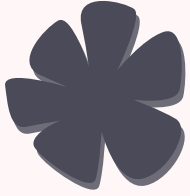
How does age impact ovarian reserve?

An individual is born with all of the eggs they will ever have. As a woman ages, the number of eggs she has remaining will decline. In the majority of cases, this decline begins to occur more rapidly starting at age 35. Certain medical conditions and lifestyle factors (i.e., smoking) may cause this decline to occur earlier on. Genetic predispositions (i.e., Turner Syndrome) may also contribute to early decline.



Key Tests & Terms

These are the most common labs and terms you'll hear when discussing ovarian reserve. Here's what they mean in plain language.



Anti-Müllerian Hormone (AMH)

A hormone released by the eggs that remain in your ovaries. In general, the higher your AMH level, the larger your egg supply. While numbers can vary slightly depending on the lab that runs the test, there isn't a way to increase your AMH level. It's important to remember that AMH doesn't tell us the exact number of eggs you have left, it simply provides an estimate of your ovarian reserve. AMH levels gradually decline with age and typically become undetectable once menopause is reached.



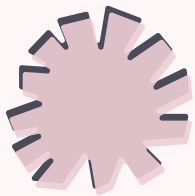
Follicle Stimulating Hormone (FSH)

A hormone released by the brain that signals your ovaries to mature an egg. It's usually measured on day 2 or 3 of your cycle. If FSH is higher than expected, it can be a sign that your ovaries need to "work harder" to mature eggs. Interpreting FSH always needs context, since other hormones, like estradiol, can influence the number.



Estradiol (E2)

Estradiol is a form of estrogen produced by the follicles in your ovaries. At the beginning of a cycle, baseline estradiol levels help your doctor understand how "quiet" or "active" your ovaries are. If estradiol is elevated early on, it can make FSH look artificially lower, so these two results are often reviewed together. Later in treatment, rising estradiol levels reflect follicle growth.



Follicles vs. Eggs

Follicles are small fluid-filled sacs within the ovaries that contain immature eggs. With each new menstrual cycle, a woman's ovaries will recruit a small group of follicles from her remaining pool of eggs. Over the course of a woman's monthly menstrual cycle, 1-2 of these follicles will grow and mature to the point of ovulation. With the onset of a period, the remaining follicles are lost (through a process called atresia) and a new group of follicles is seen.



Antral Follicle Count

Antral follicle count is measured by transvaginal ultrasound at the very beginning of your cycle. It represents the small "resting" follicles in your ovaries that could grow into mature eggs during that cycle. In general, a higher AFC suggests a larger available egg supply. It's a helpful snapshot, but it does not guarantee how many eggs will actually develop or be retrieved in treatment.





What These Numbers Can and Cannot Tell You

- ✓ They **can** give your care team a sense of how many eggs might respond to stimulation with medications.
- ✓ They **can** help guide which protocol or medications are best for you.
- ✗ They **cannot** predict whether you'll get pregnant.
- ✗ They **cannot** measure the quality of your eggs.

*Low numbers don't mean no chance —
they simply help your team personalize your plan.*



Turning Clarity Into Advocacy

Your ovarian reserve results are only helpful if you understand them. Here are a few questions and scripts you can bring to your clinic:

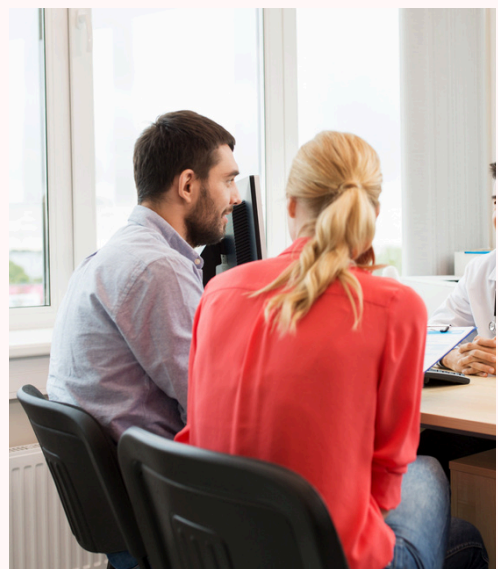
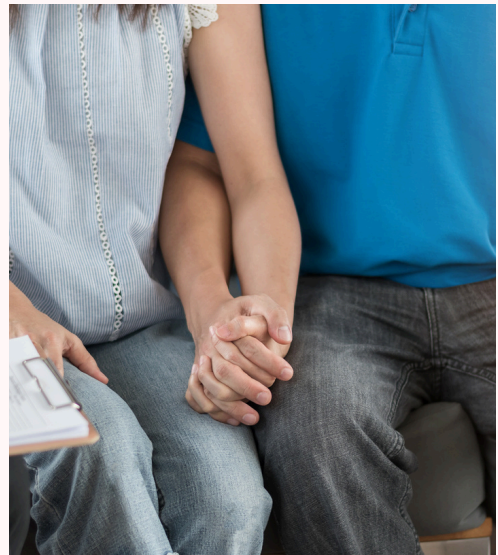
- “Can you explain my results in plain language?”
- “How does my ovarian reserve affect the plan we’re creating?”
- “Are there other factors we should consider beyond these numbers?”
- “What are the next steps if these results aren’t where we hoped?”
- “Can I have a copy of my labs for my records?”

✦ **Pro Tip:** Repeat instructions back in your own words. For example:

“So just to confirm, my AMH suggests I may have fewer eggs to work with, but this doesn’t tell us about their quality — is that right?”

This not only checks your understanding, it gives your care team a chance to clarify if anything was missed.

“You deserve to understand your results — keep asking questions until things feel clear.”



A Final Reminder

Your ovarian reserve is one piece of your fertility story. It's useful, but it's not the whole picture. And it certainly doesn't define your worth or your chances. My hope is that this guide gives you both clarity and confidence to advocate for yourself at your next appointment.




If you'd like personalized support to make sense of your results and plan your next steps, I'd love to connect. Email me at laura@yourpocketfertilitynurse.com OR use the QR code below to schedule your FREE Support Strategy Call. Sometimes talking through your results with someone who understands both the clinical side and the emotional side makes all the difference.



Questions To Ask At My Next Appointment...

Use this space to write down results, questions, or thoughts after your appointment.



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