

Letrozole Instructions:

1. If you need to have your period started, you will be given a prescription for progesterone to take each evening for 10 days or until your period starts, stop the medication once you start your period. *The first day of your period is the first day of your cycle.*
2. Take medication on day 3-7 of your cycle.
3. Use an ovulation predictor kit (or monitor), I suggest “Clearplan Easy”, to detect the LH surge, remember to discard the first void of the day and use the second void. Once the color indicator changes, have intercourse that day and the next 3 days, OR have intercourse every other day from day 10-16 (if it is a 28 day cycle). It is better to use the ovulation predictor kit to focus timing of intercourse than every other day from day 10-16.
4. A progesterone level needs to be drawn between day 21-24, call the office to schedule this.
5. Make an appointment around day 28 of your cycle. At that visit, we will review your cycle, timing of LH surge, and frequency of intercourse. If you are not pregnant, we prescribe another cycle of clomid/letrozole. If your period starts before the scheduled appointment, please call.
6. If you don't have a period at timing of expected period, you are pregnant or you didn't ovulate that cycle and may require a higher dose of clomid or letrozole.
7. Once you ovulate on a particular dose of medication, we will continue the same dose; your greatest chance of getting pregnant is within the first 4-6 ovulatory cycles.
8. Additional tests: I may recommend midcycle ultrasounds to evaluate follicles.
9. Don't forget to document: period, dates medication are taken, LH surge, and timing of intercourse.