



Introduction

Infertility is recognized as major life stressors that can affect self-esteem and relationship with spouse, family, friends, and career. Infertility defined as the inability to become pregnant after one year of unprotected intercourse. (*Pillittri, 2007*).

According to **American Society for reproductive Medicine, (2006)**, infertility is a problem for 10 % to 15% of reproductive age couple. While in Egypt, infertility in both men and women can occur for many reasons, and affects between 15-49 percent of couples. (*Daily News Egypt, 2007*)

Nelson and Marshall, (2004). Indicate that infertility can be affected by some risk factors such as the woman's age, abnormal menstrual periods, history of pelvic inflammatory disease, previous abdominal or pelvic surgery, history of undescended test.

Assisted reproductive technology (ART) includes all fertility treatments in which both sperm and eggs are manipulated, such as in-vitro fertilization (IVF), gamete intrafallopian transfer (GIFT), zygote intrafallopian transfer (ZIFT), tubal embryo transfer (TET), intracytoplasmic sperm injection (ICSI) and laser hatching. These sperm and laser micromanipulation techniques are designed to enhance the effectiveness of IVF and other treatments to address a variety of infertility problems. (*Richlin, Ashanti & Murphy, 2003*).



In vitro fertilization (IVF) is the most sophisticated form of infertility treatment. It has been used for over 25 years and in this period of time it has evolved to a relatively simple and very successful treatment option. (*Van Voorhis, 2006*).

Infertility may one of the most difficult crises facing the couples in their lives. Dealing with patient's disappointment, frustration, some times anger, emotional suffering, and even present grief is a daily challenge for nurses who work in fertility clinic. Nurses are frequently the key individuals who provide the help that enable infertile couples to meet the crises of infertility and even be strengthened by the experiences (*Newton, 2006*).

The nursing role in infertility has expanded rapidly into areas of primary care responsibility, such as coordination of donor insemination programs or IVF programs. Much of the responsibility for education, care, reviewing the informed consent document. Careful documentation, development of nursing protocol and careful exploration of the legal status in these areas are essential (*Garner, 2000*).

The nurse have an important role in the preparation of couple for IVF, which has the potential to be an emotionally, physically and financially exhausting experience due to the high stakes end of the line nature of this treatment. Thus, couple needs to consider thoughtful preparation before beginning the process. So the nurse has a major role in this process (*Tan, 2002*).

**Significance of the problem:**

Infertility is one of the most stressful conditions for anyone to deal with in his/ her life. Infertility is recognized as major life stressors that can affect self- esteem, relation with spouse, family, friends, and career; it is also one of the threatening factors that affect the stability of marital status. Treatment of infertility is widely used now in university hospital as well as private center. However, its successful rate still very low, so the study could contributes to the success of IVF and decreasing its failure rate. Through proper preparation of the infertile couple by the nurse. So the currant study aims at providing a protocol of care for management of women undergoing IVF and assesses its effect on the continuation and success of patient undergoing IVF.