

ABSTRACT SUBMISSION ACKNOWLEDGEMENT

Thank you for submitting your abstract for the Fertility Conference 2023

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Membership

Please state which fertility society/societies you are a member of:

ARCS x

Prizes

The presenting author must fit the criteria for the selected prize. Please see criteria and prize information here.

Please confirm which prize you would like your abstract to be considered for

ARCS Post-Registration

Ethics

Has ethics committee approval been sought, or animal legislation if required?

Not applicable

Elsewhere

Will your presentation be given elsewhere prior to this conference? If so, please state below Submitted abstracts can be presented elsewhere but must be unpublished.

No	x
Authors	
Please confirm all authors have approved this abstract and the abstract is your responsibility	Yes
Publish	
I give permission for my abstract to be published on the Fertility website, in Human Fertility and in the conference abstract book	Yes
Abstract Title:	
Lean management in the IVF clinic: usin patients	g technology to eliminate wasted time in IVF lab processes whilst maximising value to
Abstract text:	
USA) were interviewed to quantify the saked to estimate the time required if the electronic witnessing, electronic medicathe savings extrapolated to estimate the required per cycle before CHLOE-EQ waper cycle (p<0.001). Before CHLOE EQ, to f 31.5 hours per cycle. On average, cycle+-5 hours, p<0.001). After CHLOE-EQ, average of 13.1 hours per cycle. CHLOE-CHLOE-EQ implementation (p<0.001). Cin risk, increase in capacity of cycles per	dards of care. Methods 6 lab directors from 6 clinics from three countries (2 UK, 1 Spain, 3 steps in a typical IVF cycle by following their current procedures. The lab directors were then hey were to implement the following technologies fully integrated with CHLOE-EQ: time-lapse, all record. The total amount of time before and after CHLOE-EQ integration was compared, and heir value in hourly, cycle capacity and monetary terms. Results Overall, the average time is 15.9 hours and after CHLOE EQ was 9.4 hours, an average 41% reduction in time required the fastest clinic needs an average of 7.7hours per cycle, whilst the slowest needed an average eles in the USA were more time consuming than those in Europe (mean+-st dev: 20+-10 vs.), the fastest clinic needed an average of 6.2hours per cycle, whilst the slowest needed an EQ integrations reduced the variation in time per cycle between clinics compared to before the HLOE-EQ implementation had a direct association with reduction in cost per cycle, reduction rembryologist. The amount saved was associated with the size of the clinic and the average oducing fully integrated digitised technologies into clinical practice can increase efficiencies, and and a care.
References	
Category	
Fertilisation and embryo	
Presentation Format:	
Either oral or poster	
Rapid poster presentations	

If your presentation is selected for poster presentation you will have the opportunity to discuss your work through several rapid

area. Eight posters will be presented in each session with a maximum of 3 minutes to present your poster. This is the only opportunity to have live face to face interaction with delegates about your poster. You will also have the opportunity to answer

delegate questions via the online platform throughout the conference.

These will be scheduled during the breaks throughout the event. There will be a dedicated poster presentation area in the exhibition

poster sessions.

Please confirm your participation below.

I wish to take part in the rapid poster presentations

Yes

Authors of the Abstract

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