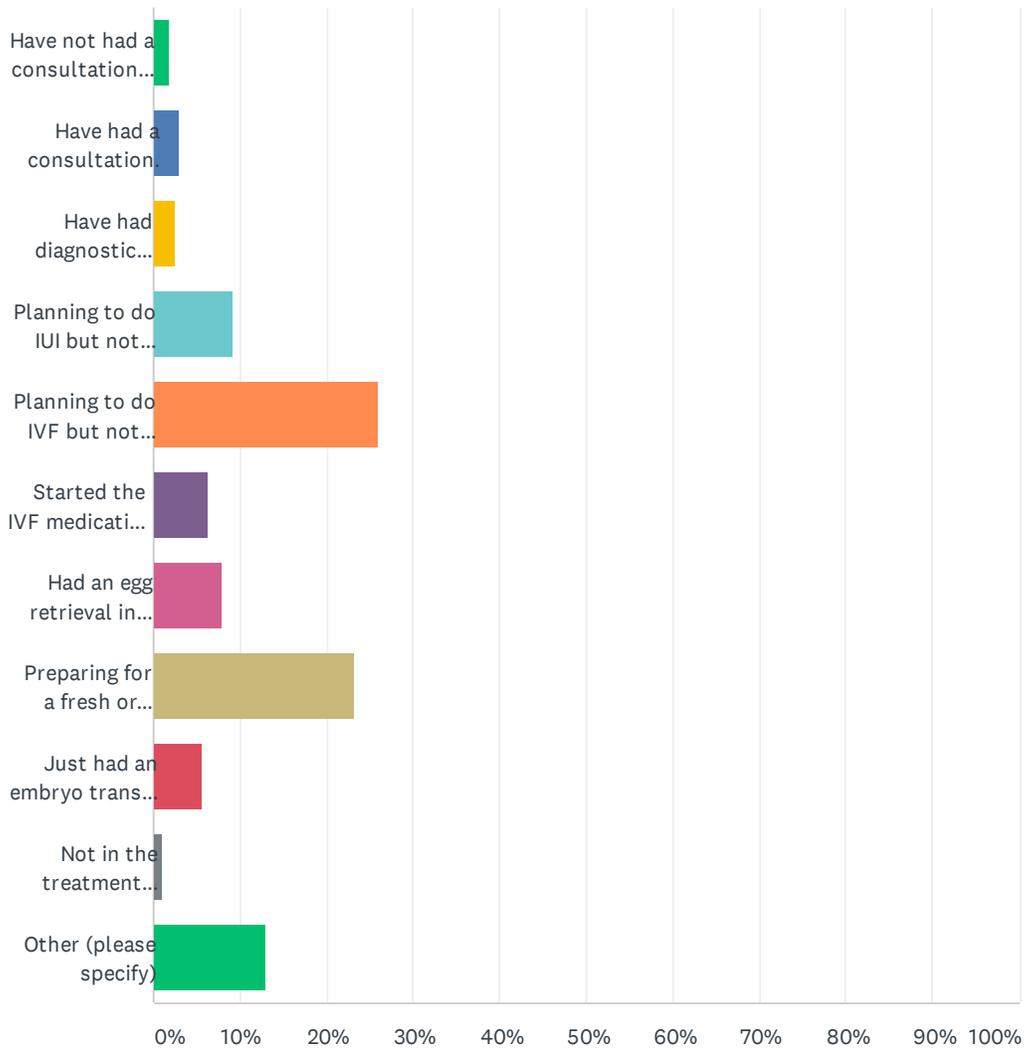


Q1 As of mid-March 2020, where were you in your medical fertility treatment process:

Answered: 576 Skipped: 0

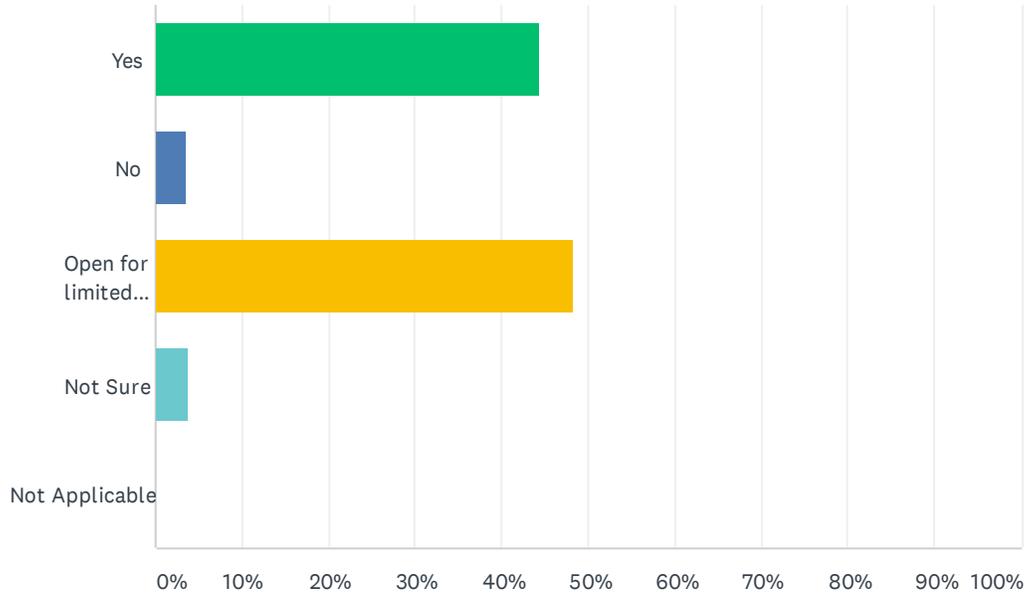


RESOLVE COVID-19 Patient Survey, Fielded April 2020

ANSWER CHOICES	RESPONSES	
Have not had a consultation but was ready to have one.	1.91%	11
Have had a consultation.	2.95%	17
Have had diagnostic tests.	2.60%	15
Planning to do IUI but not started.	9.20%	53
Planning to do IVF but not started.	26.04%	150
Started the IVF medication process.	6.25%	36
Had an egg retrieval in the past 30 days.	7.99%	46
Preparing for a fresh or frozen embryo transfer in the next 30 days.	23.26%	134
Just had an embryo transfer in the past 30 days.	5.73%	33
Not in the treatment process as of March 2020.	1.04%	6
Other (please specify)	13.02%	75
TOTAL		576

Q2 Is your clinic closed?

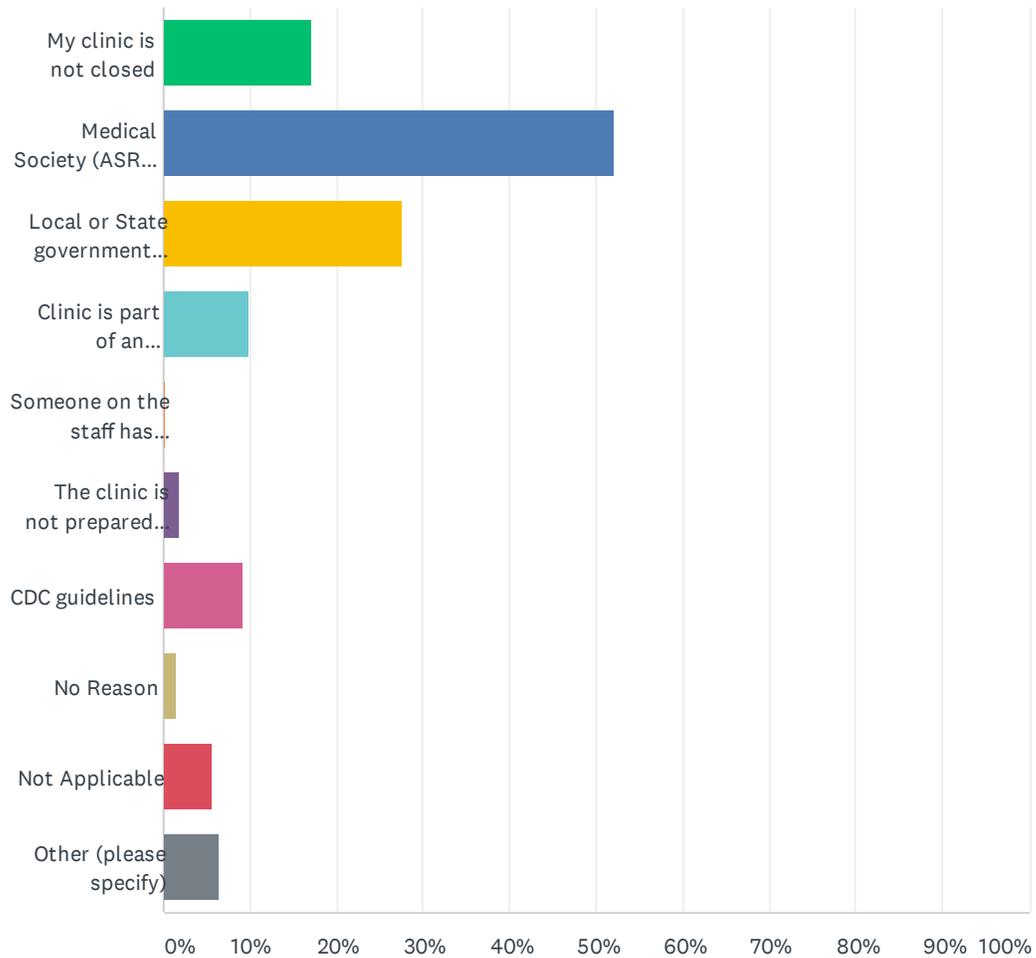
Answered: 576 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	44.27%	255
No	3.65%	21
Open for limited procedures	48.26%	278
Not Sure	3.82%	22
Not Applicable	0.00%	0
TOTAL		576

Q3 If your clinic is closed right now what have you been told is the main reason (choose one) for the closure?

Answered: 576 Skipped: 0

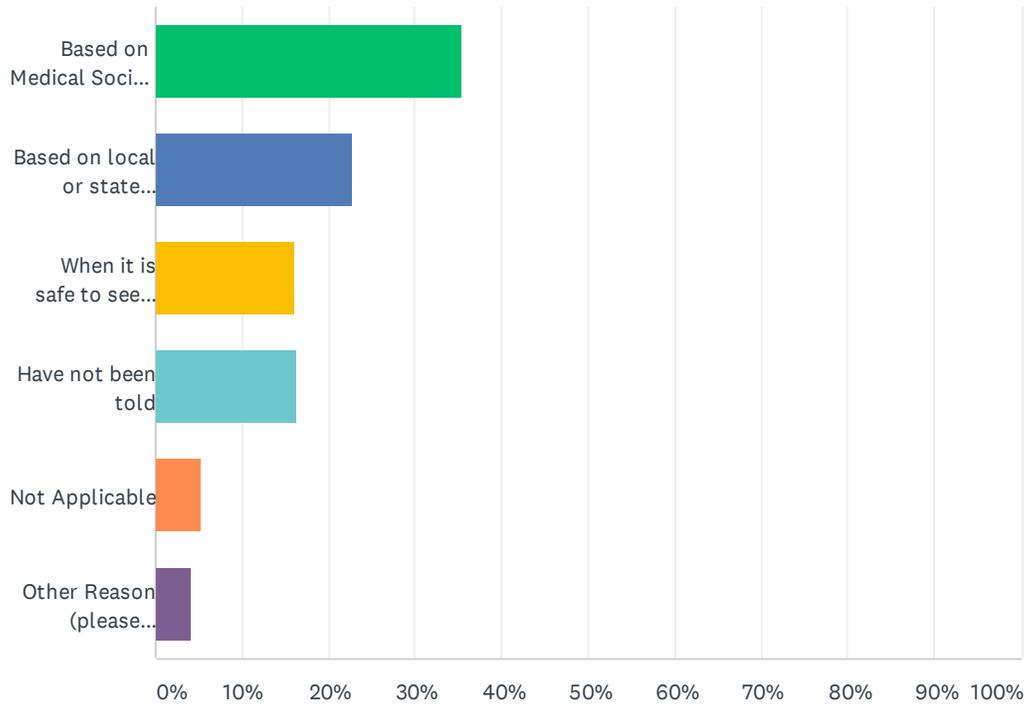


RESOLVE COVID-19 Patient Survey, Fielded April 2020

ANSWER CHOICES	RESPONSES	
My clinic is not closed	17.19%	99
Medical Society (ASRM and SART) Recommendations	52.08%	300
Local or State government regulations closing medical offices	27.60%	159
Clinic is part of an academic/hospital system and hospital administration closed the clinic	9.90%	57
Someone on the staff has COVID-19	0.17%	1
The clinic is not prepared to see patients safely	1.91%	11
CDC guidelines	9.20%	53
No Reason	1.39%	8
Not Applicable	5.56%	32
Other (please specify)	6.42%	37
Total Respondents: 576		

Q4 What has your clinic told you regarding when your clinic will re-open?

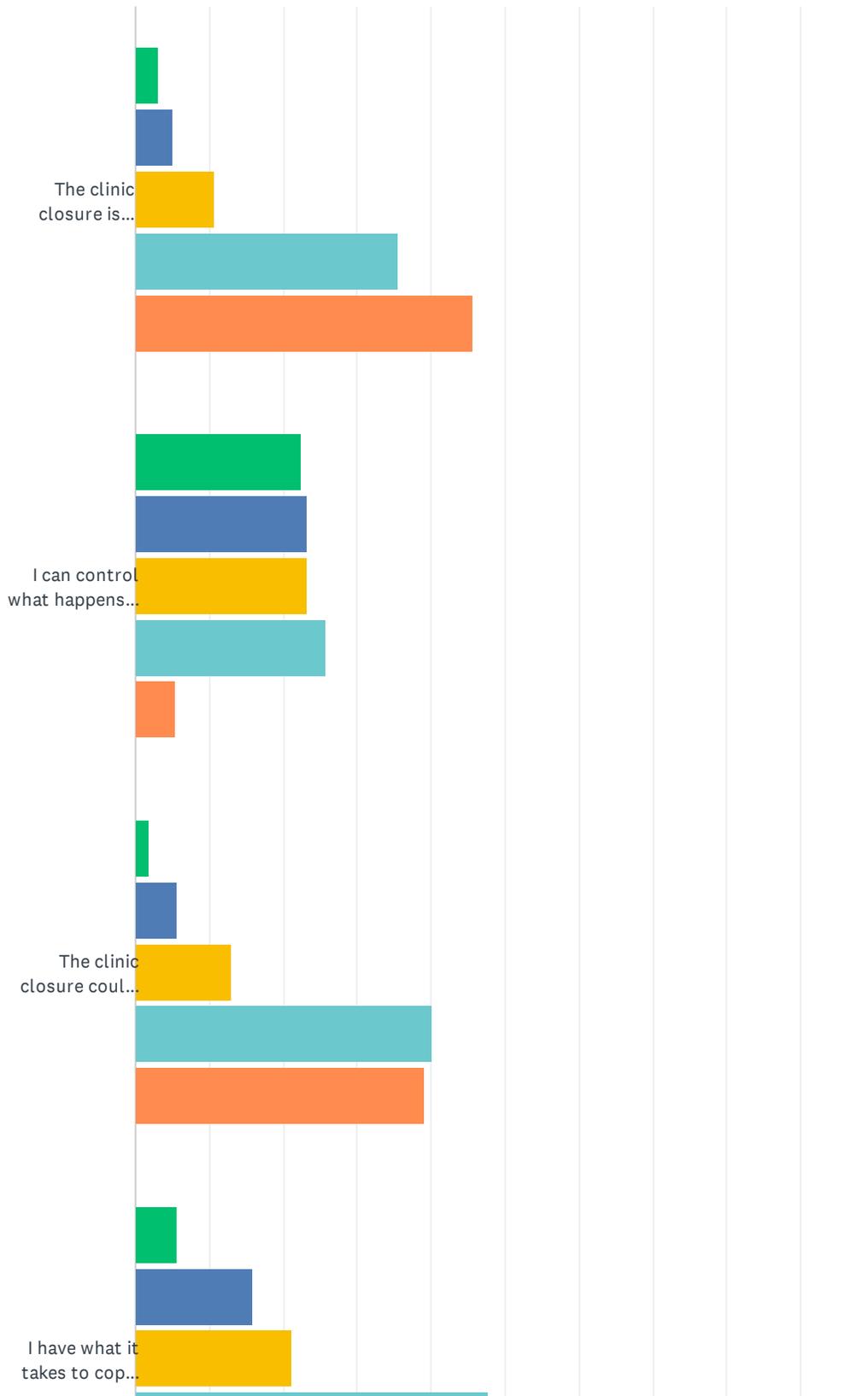
Answered: 576 Skipped: 0



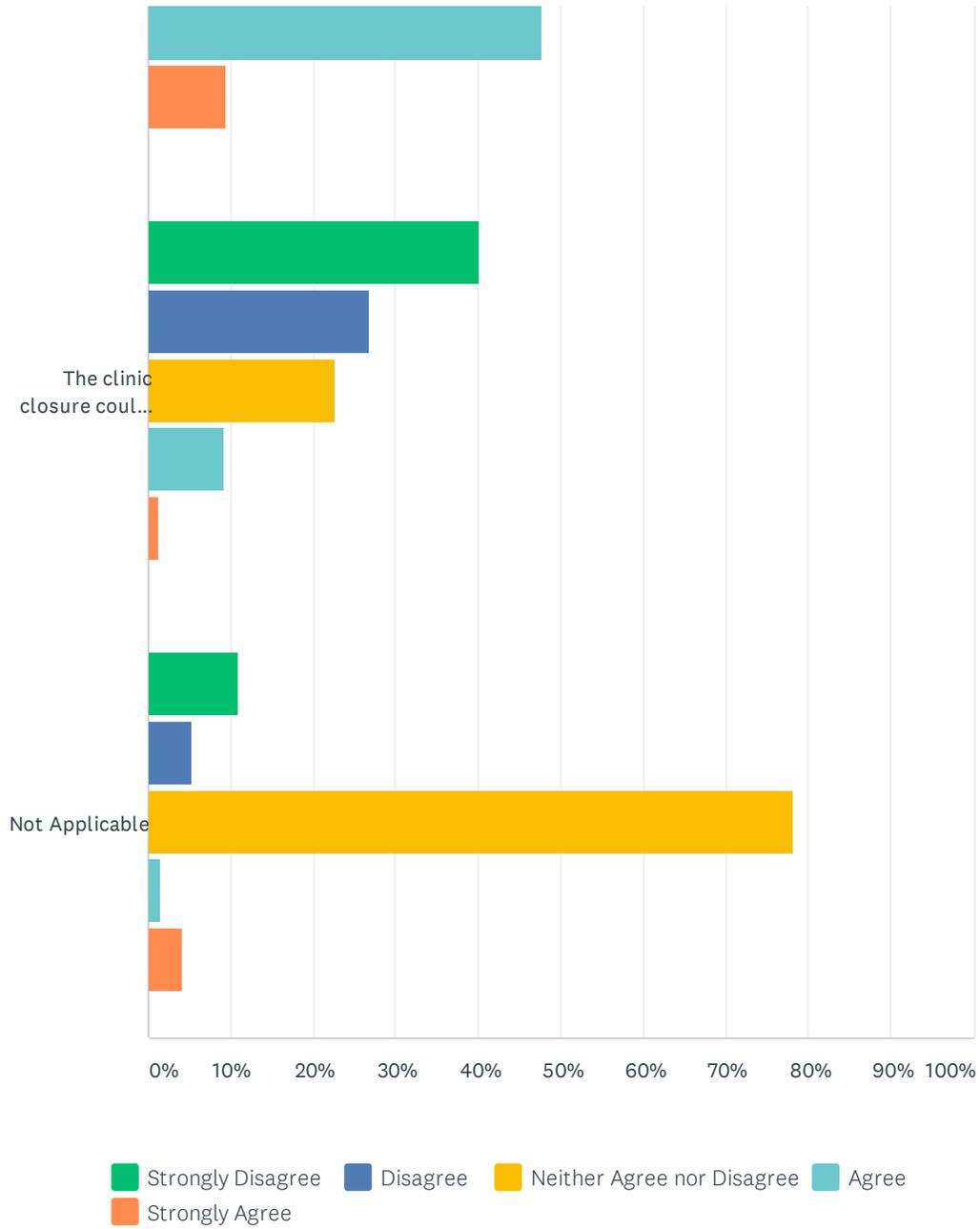
ANSWER CHOICES	RESPONSES	
Based on Medical Society (ASRM and SART) Recommendations	35.42%	204
Based on local or state regulations changing	22.74%	131
When it is safe to see patients	16.15%	93
Have not been told	16.32%	94
Not Applicable	5.21%	30
Other Reason (please specify)	4.17%	24
TOTAL		576

Q5 How do you view your fertility clinic closure? Pick the option that best describes you.

Answered: 576 Skipped: 0



RESOLVE COVID-19 Patient Survey, Fielded April 2020

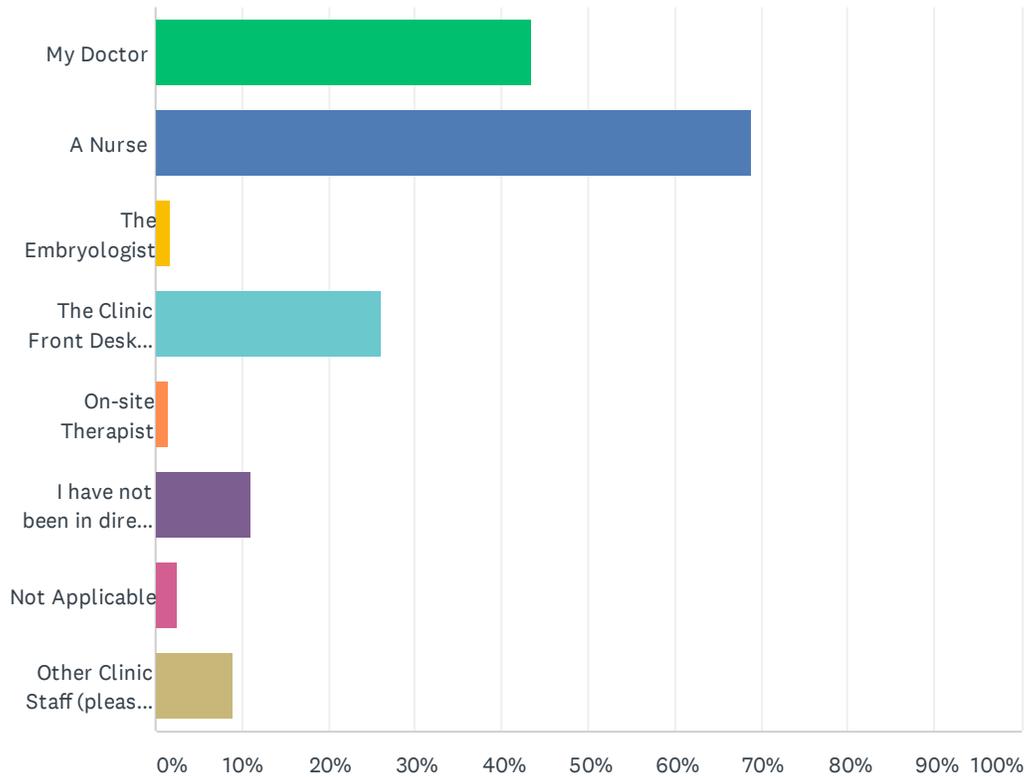


RESOLVE COVID-19 Patient Survey, Fielded April 2020

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
The clinic closure is stressful to me.	3.05% 17	5.02% 28	10.57% 59	35.66% 199	45.70% 255	558	4.16
I can control what happens to me during the clinic closure.	22.36% 125	23.26% 130	23.26% 130	25.76% 144	5.37% 30	559	2.69
The clinic closure could have a negative impact on me.	1.97% 11	5.72% 32	13.06% 73	40.07% 224	39.18% 219	559	4.09
I have what it takes to cope with the clinic closure.	5.73% 32	15.95% 89	21.15% 118	47.67% 266	9.50% 53	558	3.39
The clinic closure could have a positive impact on me.	40.14% 224	26.88% 150	22.58% 126	9.14% 51	1.25% 7	558	2.04
Not Applicable	10.85% 23	5.19% 11	78.30% 166	1.42% 3	4.25% 9	212	2.83

Q6 Who have you been in direct contact with at your clinic about your care during this time of the clinic closure? (Check all that apply). Direct contact means a phone call, personal email, or videoconference call:

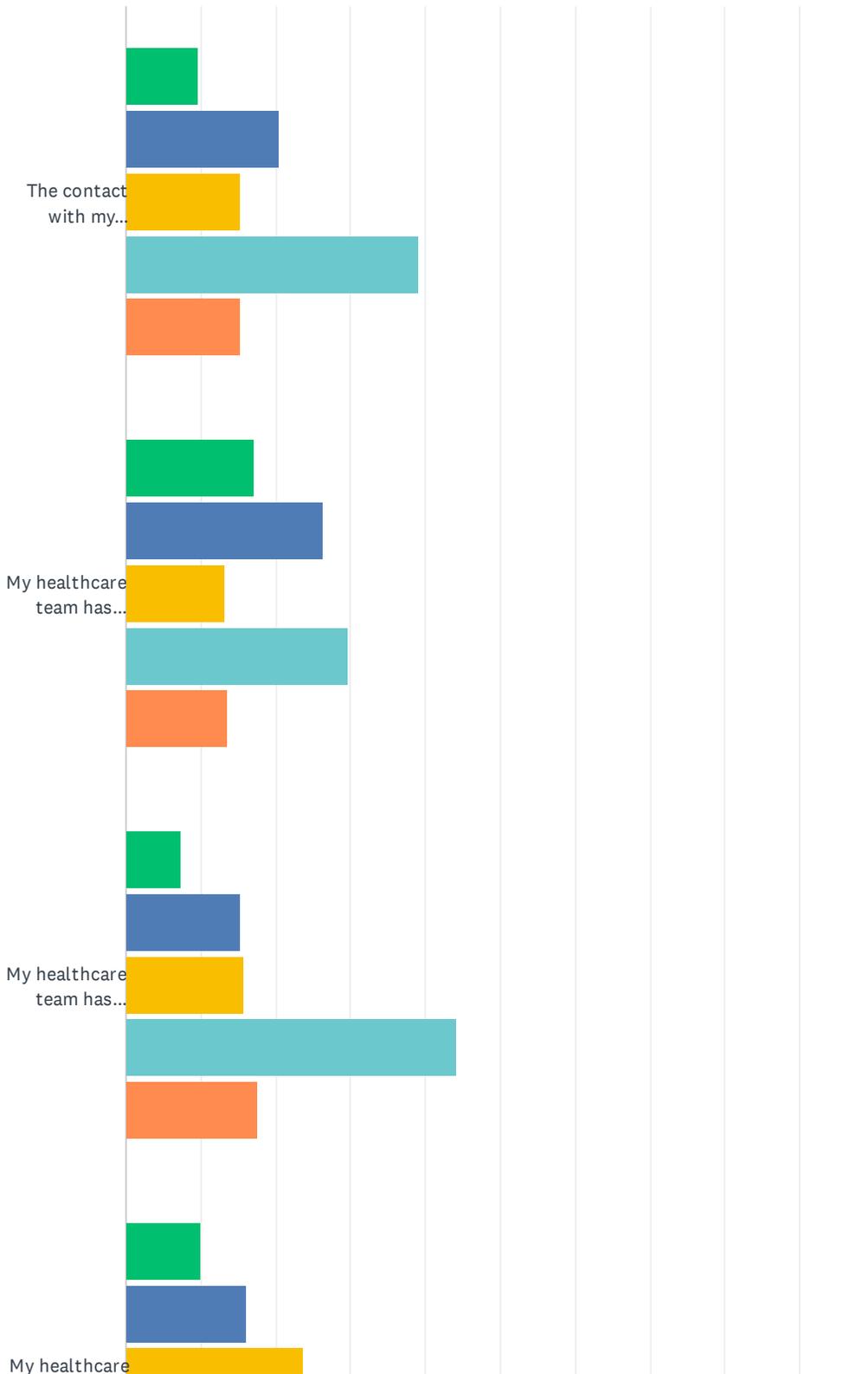
Answered: 576 Skipped: 0



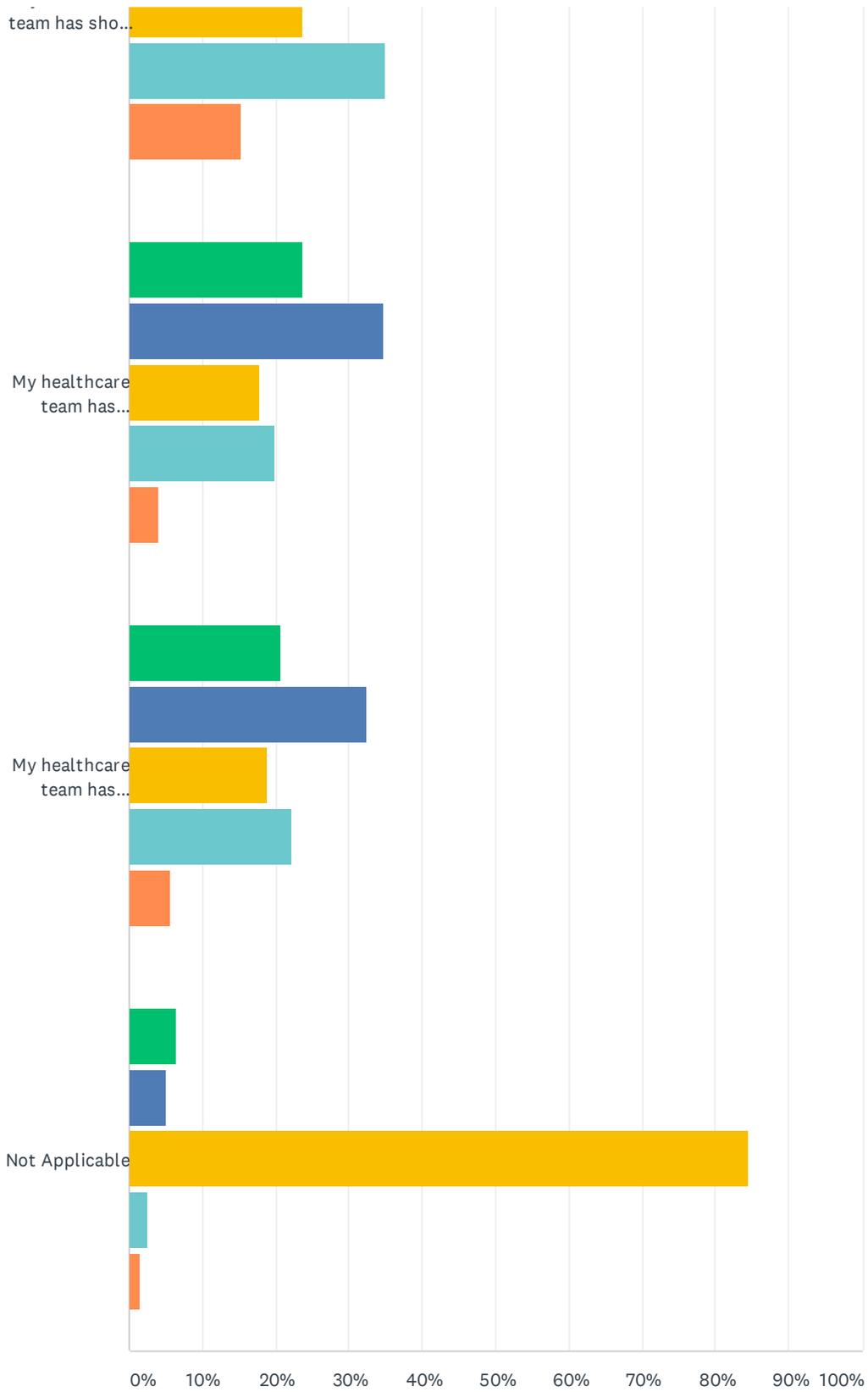
ANSWER CHOICES	RESPONSES	
My Doctor	43.58%	251
A Nurse	68.92%	397
The Embryologist	1.74%	10
The Clinic Front Desk staff	26.22%	151
On-site Therapist	1.56%	9
I have not been in direct contact with anyone at my clinic.	11.11%	64
Not Applicable	2.60%	15
Other Clinic Staff (please specify)	9.03%	52
Total Respondents: 576		

Q7 Thinking about the communication with your clinic team including nurses, doctors, embryologists and on-site therapists, how would describe these communications:

Answered: 576 Skipped: 0



RESOLVE COVID-19 Patient Survey, Fielded April 2020



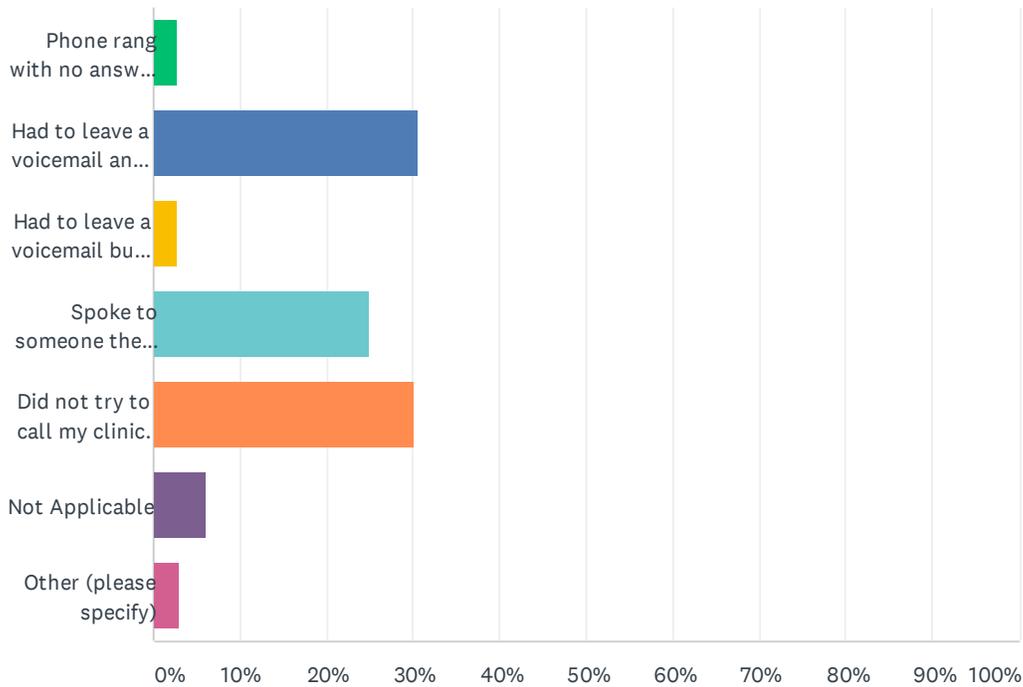
■ Strongly Disagree
 ■ Disagree
 ■ Neither Agree nor Disagree
 ■ Agree
 ■ Strongly Agree

RESOLVE COVID-19 Patient Survey, Fielded April 2020

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
The contact with my healthcare team has met my needs.	9.70% 55	20.46% 116	15.34% 87	39.15% 222	15.34% 87	567	3.30
My healthcare team has provided individual outreach.	17.14% 97	26.33% 149	13.25% 75	29.68% 168	13.60% 77	566	2.96
My healthcare team has offered me options to connect with them.	7.22% 41	15.32% 87	15.67% 89	44.19% 251	17.61% 100	568	3.50
My healthcare team has shown, through outreach and responses, that they care about my well-being during this time.	10.05% 57	16.05% 91	23.63% 134	34.92% 198	15.34% 87	567	3.29
My healthcare team has provided me with mental health resources.	23.59% 134	34.68% 197	17.78% 101	19.89% 113	4.05% 23	568	2.46
My healthcare team has provided me with ways I can stay healthy during this time.	20.67% 117	32.51% 184	18.90% 107	22.26% 126	5.65% 32	566	2.60
Not Applicable	6.50% 13	5.00% 10	84.50% 169	2.50% 5	1.50% 3	200	2.88

Q8 If you have tried to call your clinic, were you able to get through when you called?

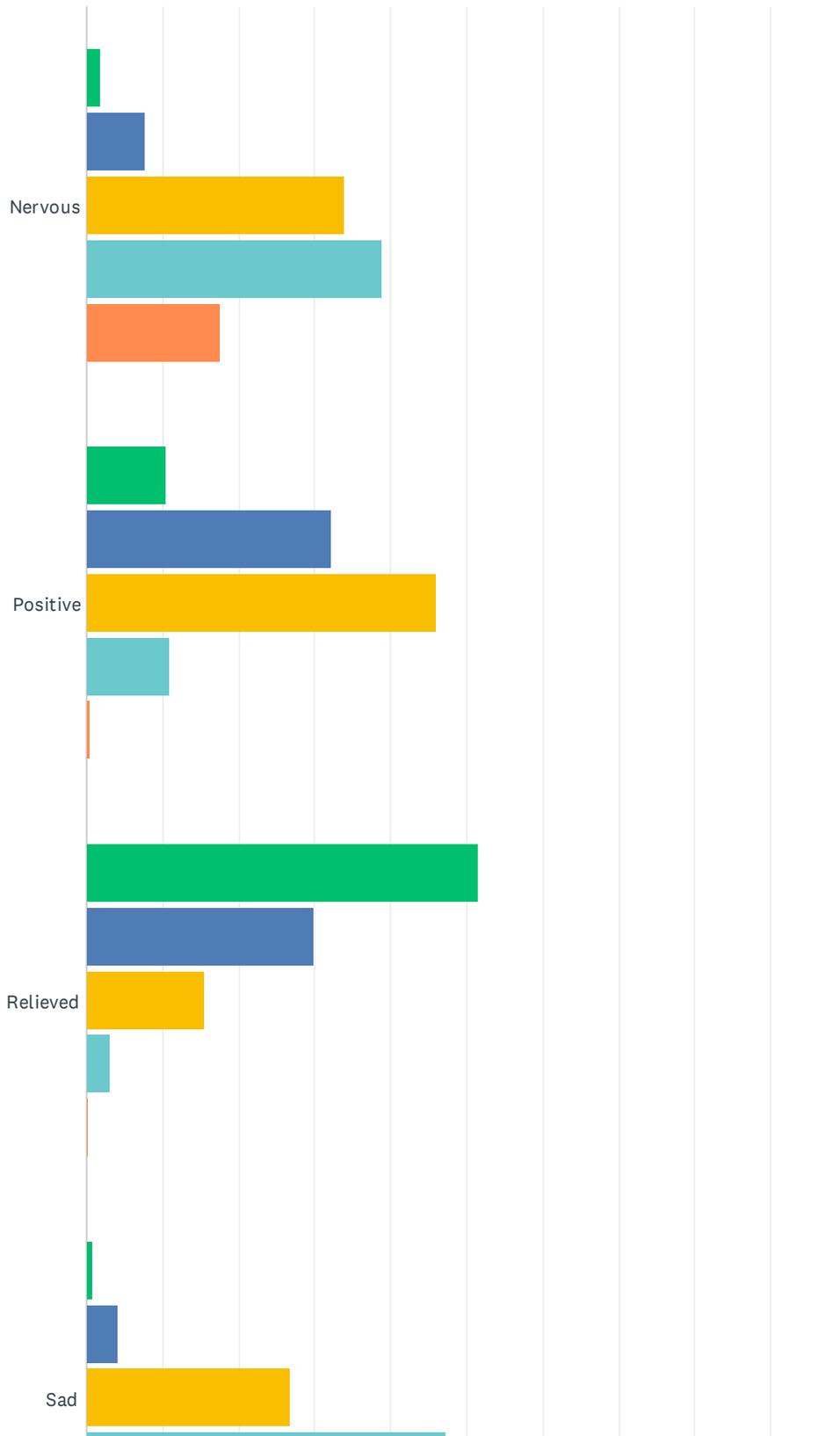
Answered: 576 Skipped: 0

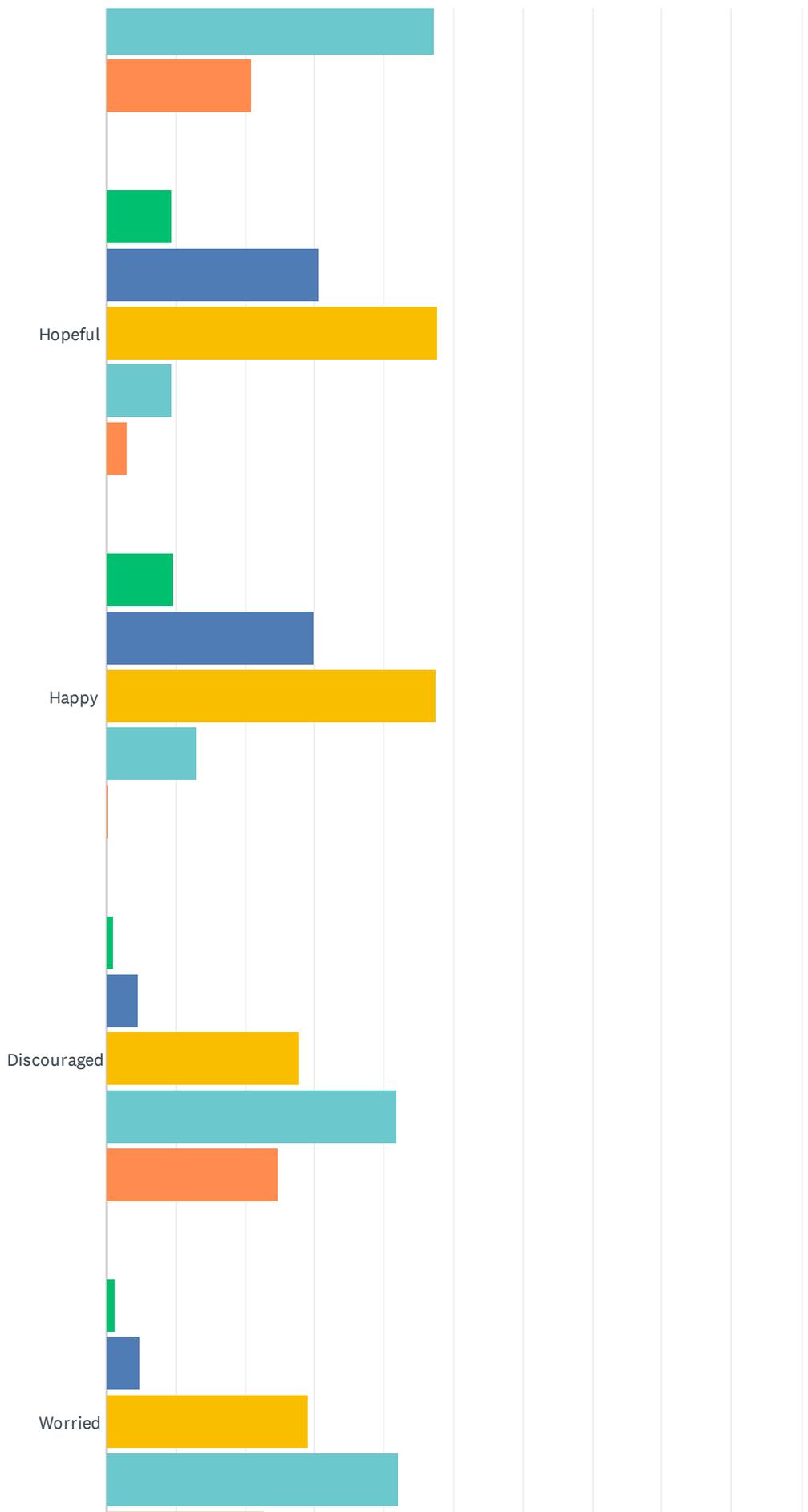


ANSWER CHOICES	RESPONSES	
Phone rang with no answer and no voicemail.	2.78%	16
Had to leave a voicemail and received a call back.	30.56%	176
Had to leave a voicemail but did NOT receive a call back.	2.78%	16
Spoke to someone the first time I called	24.83%	143
Did not try to call my clinic.	30.03%	173
Not Applicable	6.08%	35
Other (please specify)	2.95%	17
TOTAL		576

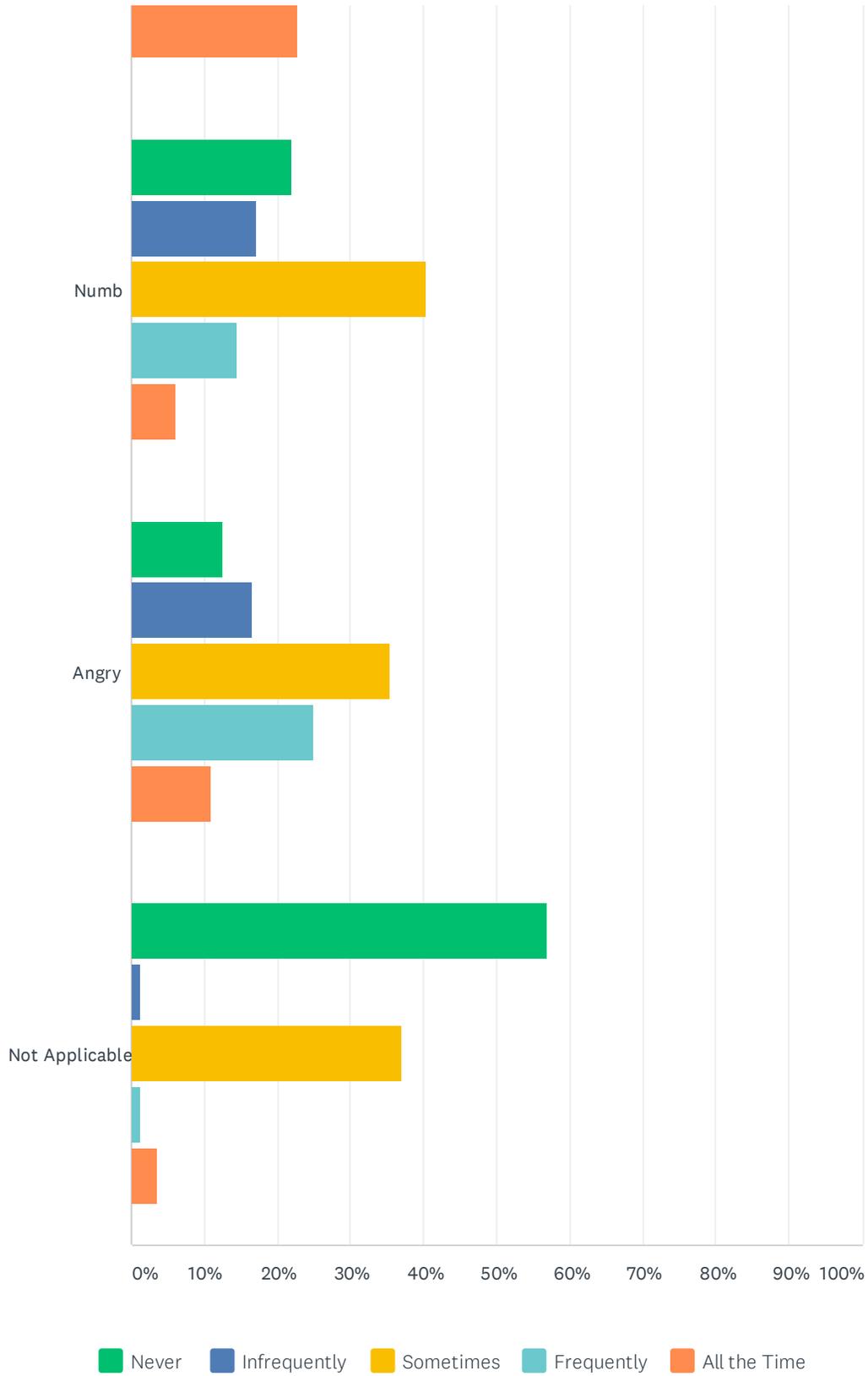
Q9 How much are you experiencing the feelings below during this clinic closure time:

Answered: 576 Skipped: 0





RESOLVE COVID-19 Patient Survey, Fielded April 2020

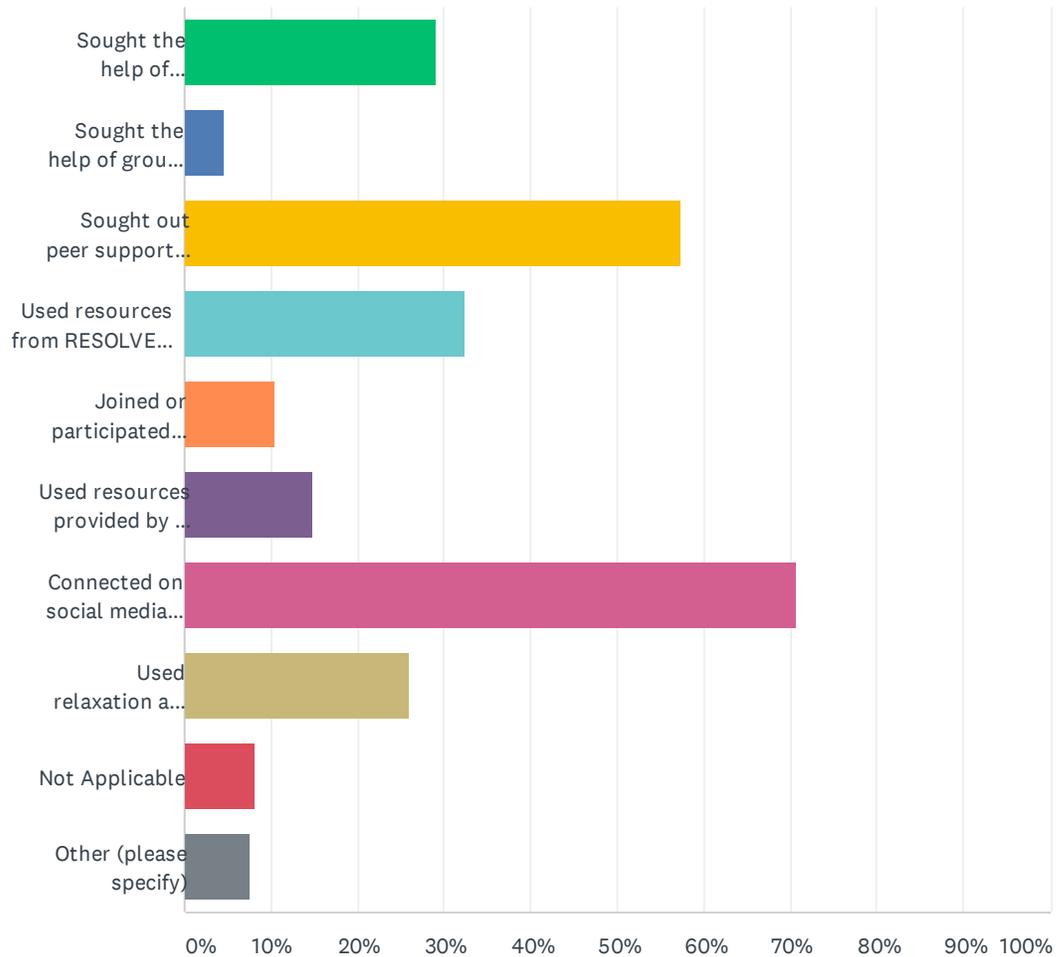


RESOLVE COVID-19 Patient Survey, Fielded April 2020

	NEVER	INFREQUENTLY	SOMETIMES	FREQUENTLY	ALL THE TIME	TOTAL	WEIGHTED AVERAGE
Nervous	1.93% 11	7.72% 44	33.86% 193	38.95% 222	17.54% 100	570	3.62
Positive	10.54% 60	32.16% 183	46.05% 262	10.90% 62	0.35% 2	569	2.58
Relieved	51.40% 293	29.82% 170	15.44% 88	3.16% 18	0.18% 1	570	1.71
Sad	0.88% 5	4.21% 24	26.84% 153	47.19% 269	20.88% 119	570	3.83
Hopeful	9.46% 54	30.47% 174	47.64% 272	9.46% 54	2.98% 17	571	2.66
Happy	9.52% 54	29.98% 170	47.44% 269	12.87% 73	0.18% 1	567	2.64
Discouraged	1.05% 6	4.55% 26	27.85% 159	41.86% 239	24.69% 141	571	3.85
Worried	1.23% 7	4.90% 28	29.07% 166	42.03% 240	22.77% 130	571	3.80
Numb	21.89% 125	17.16% 98	40.28% 230	14.54% 83	6.13% 35	571	2.66
Angry	12.46% 71	16.49% 94	35.26% 201	24.91% 142	10.88% 62	570	3.05
Not Applicable	56.97% 94	1.21% 2	36.97% 61	1.21% 2	3.64% 6	165	1.93

Q10 Check all the resources below that you have accessed during this time that your clinic is closed or reduced its services. (Check all that apply.)

Answered: 576 Skipped: 0

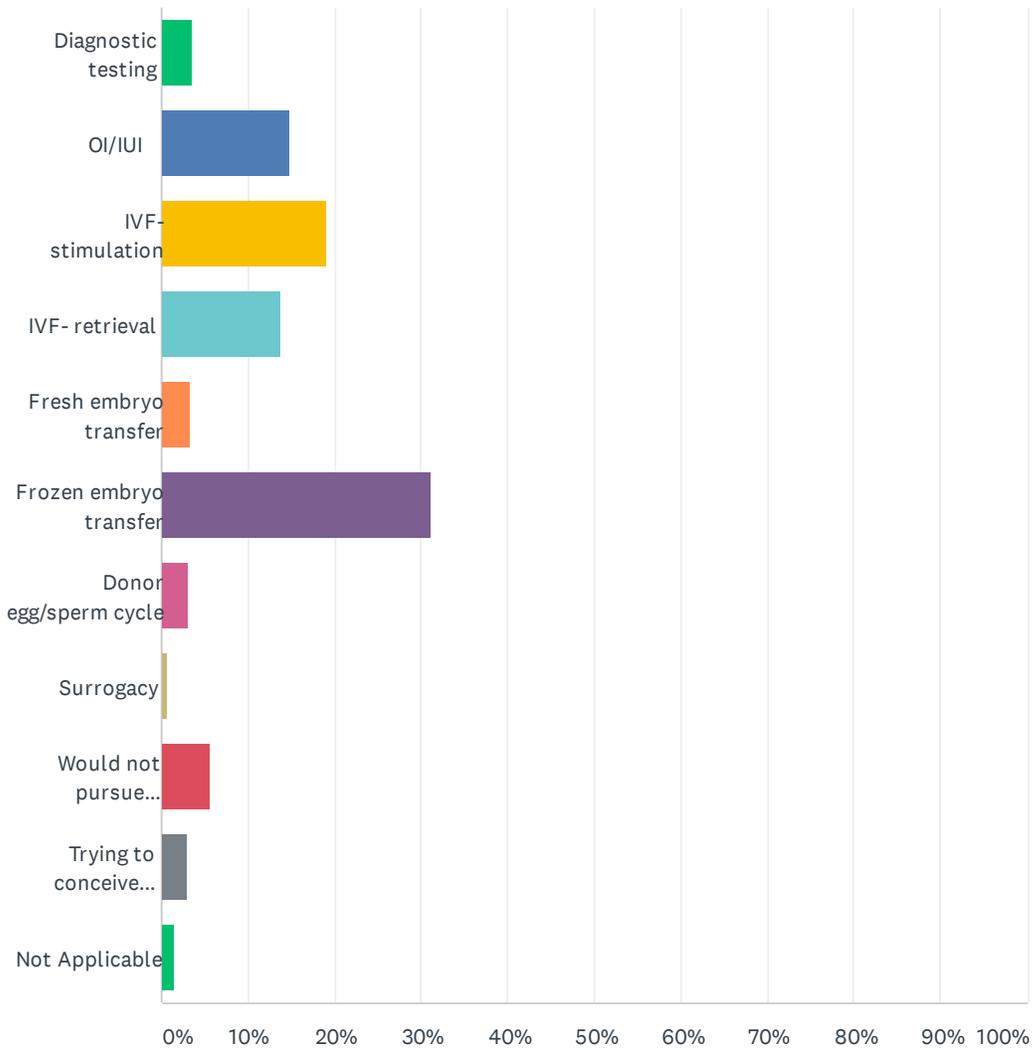


RESOLVE COVID-19 Patient Survey, Fielded April 2020

ANSWER CHOICES	RESPONSES	
Sought the help of individual counselling from a licensed mental health professional.	28.99%	167
Sought the help of group counselling led by a licensed mental health professional.	4.69%	27
Sought out peer support from others going through this.	57.29%	330
Used resources from RESOLVE (website, webinars, articles, etc.)	32.47%	187
Joined or participated in a RESOLVE peer led support group.	10.42%	60
Used resources provided by my clinic (website, webinars, blogs, articles, etc.)	14.76%	85
Connected on social media sites	70.66%	407
Used relaxation apps such as FertilCalm, Headspace, etc.	26.04%	150
Not Applicable	8.16%	47
Other (please specify)	7.47%	43
Total Respondents: 576		

Q11 If you could, which fertility treatments would you pursue right now during the COVID-19 pandemic?

Answered: 576 Skipped: 0

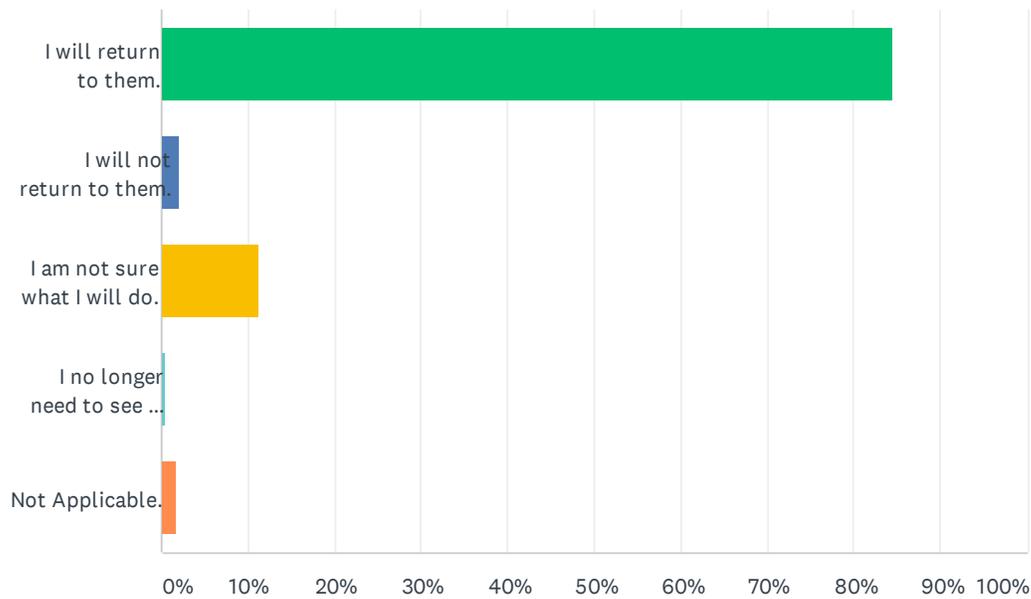


RESOLVE COVID-19 Patient Survey, Fielded April 2020

ANSWER CHOICES	RESPONSES	
Diagnostic testing	3.65%	21
OI/IUI	14.93%	86
IVF- stimulation	19.10%	110
IVF- retrieval	13.89%	80
Fresh embryo transfer	3.30%	19
Frozen embryo transfer	31.25%	180
Donor egg/sperm cycle	3.13%	18
Surrogacy	0.69%	4
Would not pursue fertility treatment during the COVID-19 pandemic.	5.73%	33
Trying to conceive without medical assistance.	2.95%	17
Not Applicable	1.39%	8
TOTAL		576

Q12 Thinking about the care you received from your clinic during its closure, how likely are you to return to them when they reopen?

Answered: 576 Skipped: 0



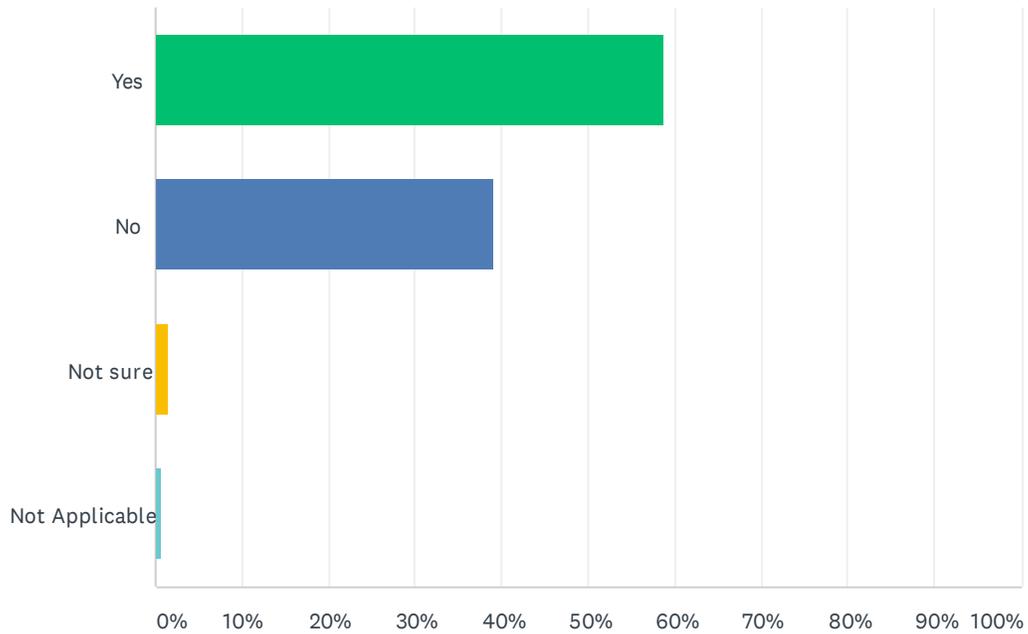
ANSWER CHOICES	RESPONSES	
I will return to them.	84.55%	487
I will not return to them.	2.08%	12
I am not sure what I will do.	11.28%	65
I no longer need to see a fertility specialist.	0.35%	2
Not Applicable.	1.74%	10
TOTAL		576

Q13 If you have experienced any fears or concerns during this time that your clinic has been closed, how have you tried to overcome them?

Answered: 576 Skipped: 0

Q14 Do you have health insurance coverage for all or part of the infertility testing and/or treatment?

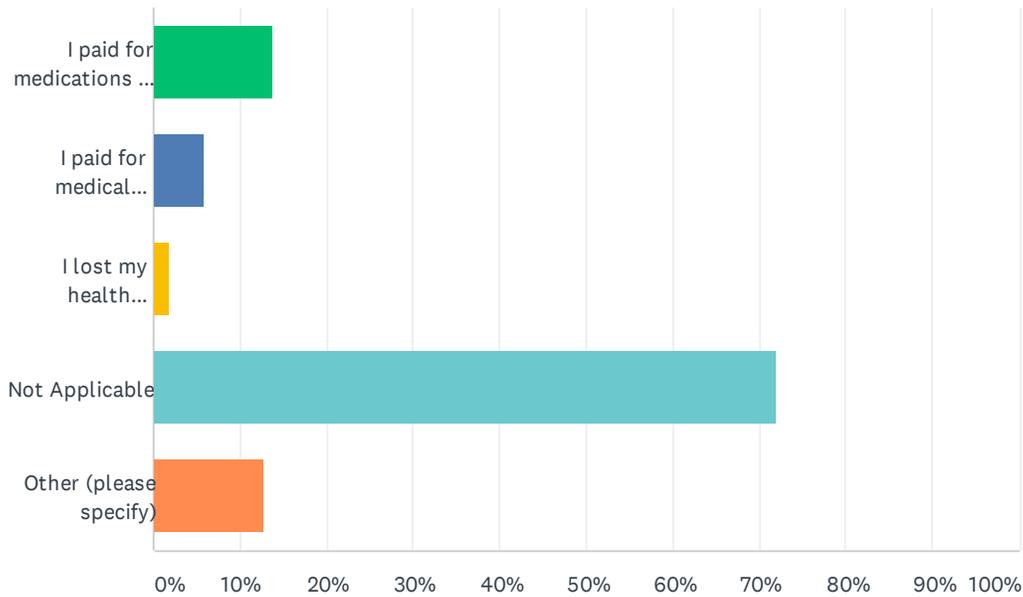
Answered: 576 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	58.85%	339
No	39.06%	225
Not sure	1.39%	8
Not Applicable	0.69%	4
TOTAL		576

Q15 If the clinic closure has impacted you financially, what impact has it had? (Check all that apply.)

Answered: 576 Skipped: 0



ANSWER CHOICES	RESPONSES	
I paid for medications I can no longer use.	13.89%	80
I paid for medical treatments and will lose that money.	5.90%	34
I lost my health insurance and won't be able to continue with treatment.	1.91%	11
Not Applicable	71.88%	414
Other (please specify)	12.67%	73
Total Respondents: 576		

Q16 What benefit(s) do you see happening as a result of your clinic closure?

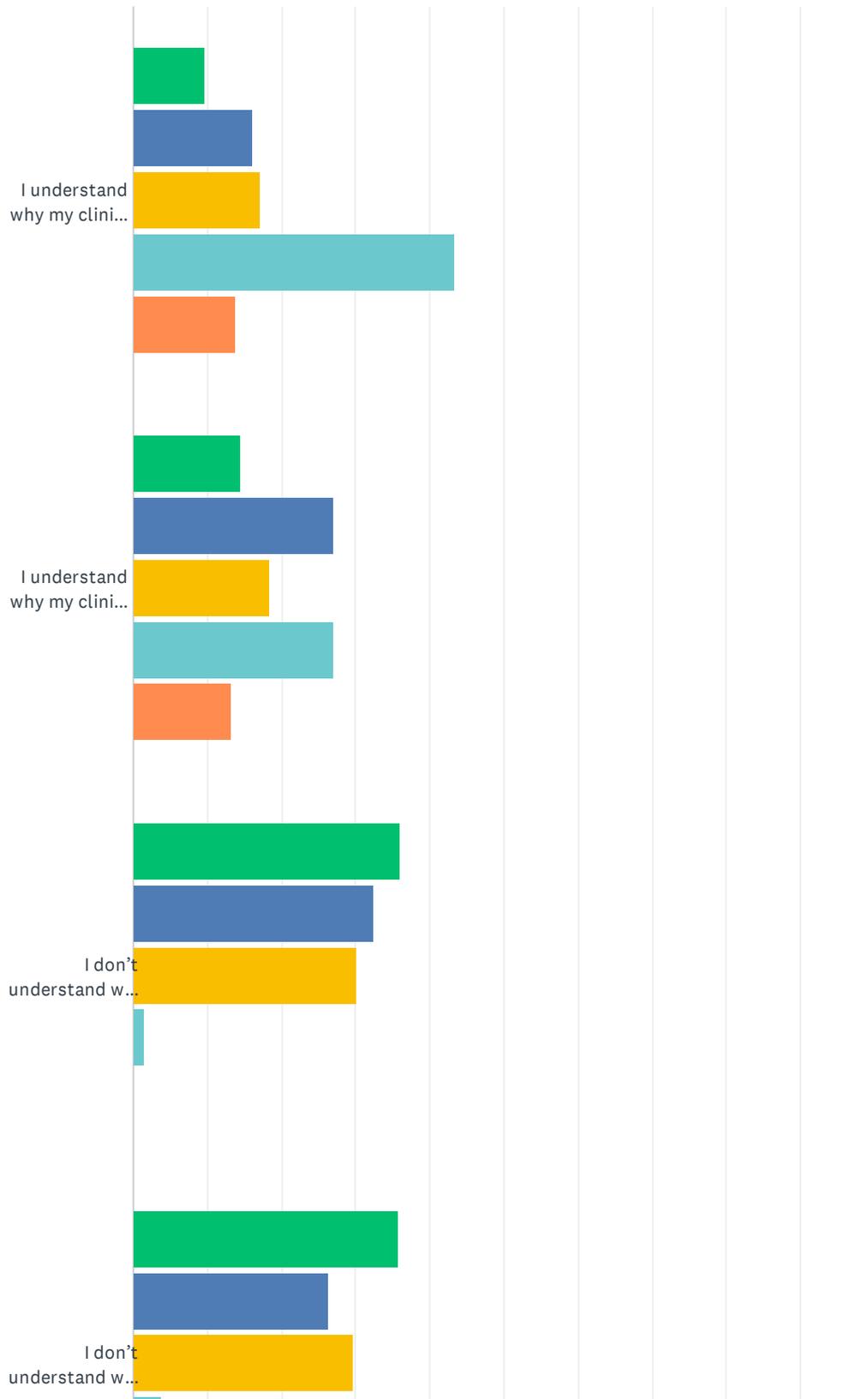
Answered: 576 Skipped: 0

Q17 Describe in your own words how COVID-19 has affected your family building plans?

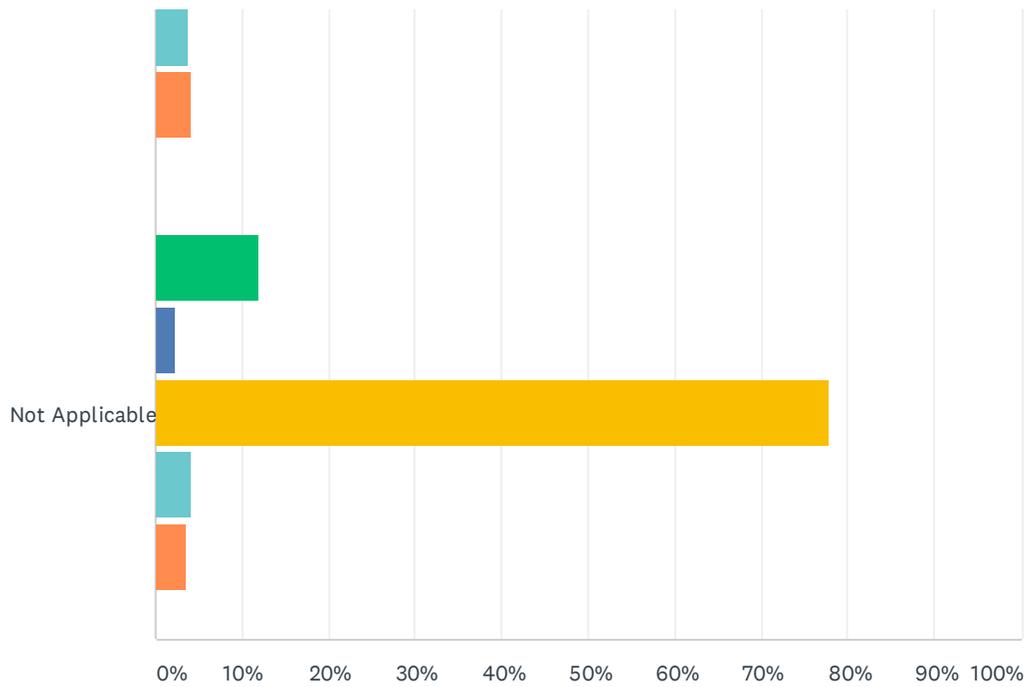
Answered: 576 Skipped: 0

Q18 What is your understanding of your fertility clinic closure? Pick the option that best describes you.

Answered: 576 Skipped: 0



RESOLVE COVID-19 Patient Survey, Fielded April 2020

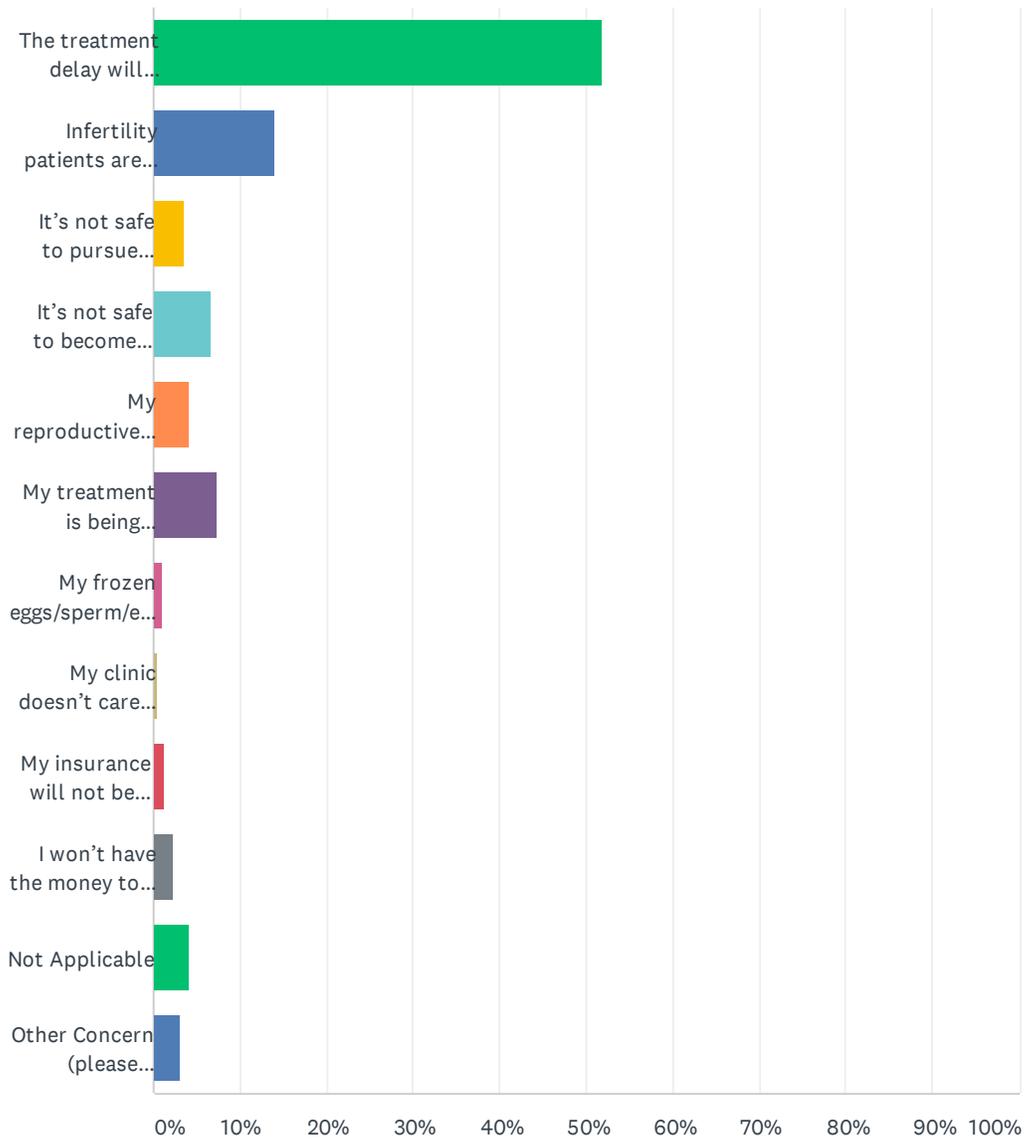


■ Strongly Disagree
 ■ Disagree
 ■ Neither Agree nor Disagree
 ■ Agree
■ Strongly Agree

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
I understand why my clinic closed and agree with the decision.	9.71% 53	16.12% 88	17.22% 94	43.22% 236	13.74% 75	546	3.35
I understand why my clinic closed but don't agree with the decision.	14.45% 75	26.97% 140	18.50% 96	26.97% 140	13.10% 68	519	2.97
I don't understand why my clinic closed but agree with the decision.	35.98% 177	32.52% 160	30.08% 148	1.42% 7	0.00% 0	492	1.97
I don't understand why my clinic closed and don't agree with the decision.	35.77% 176	26.42% 130	29.67% 146	3.86% 19	4.27% 21	492	2.14
Not Applicable	11.98% 20	2.40% 4	77.84% 130	4.19% 7	3.59% 6	167	2.85

Q19 What is your biggest concern resulting from the closure of your clinic?

Answered: 576 Skipped: 0

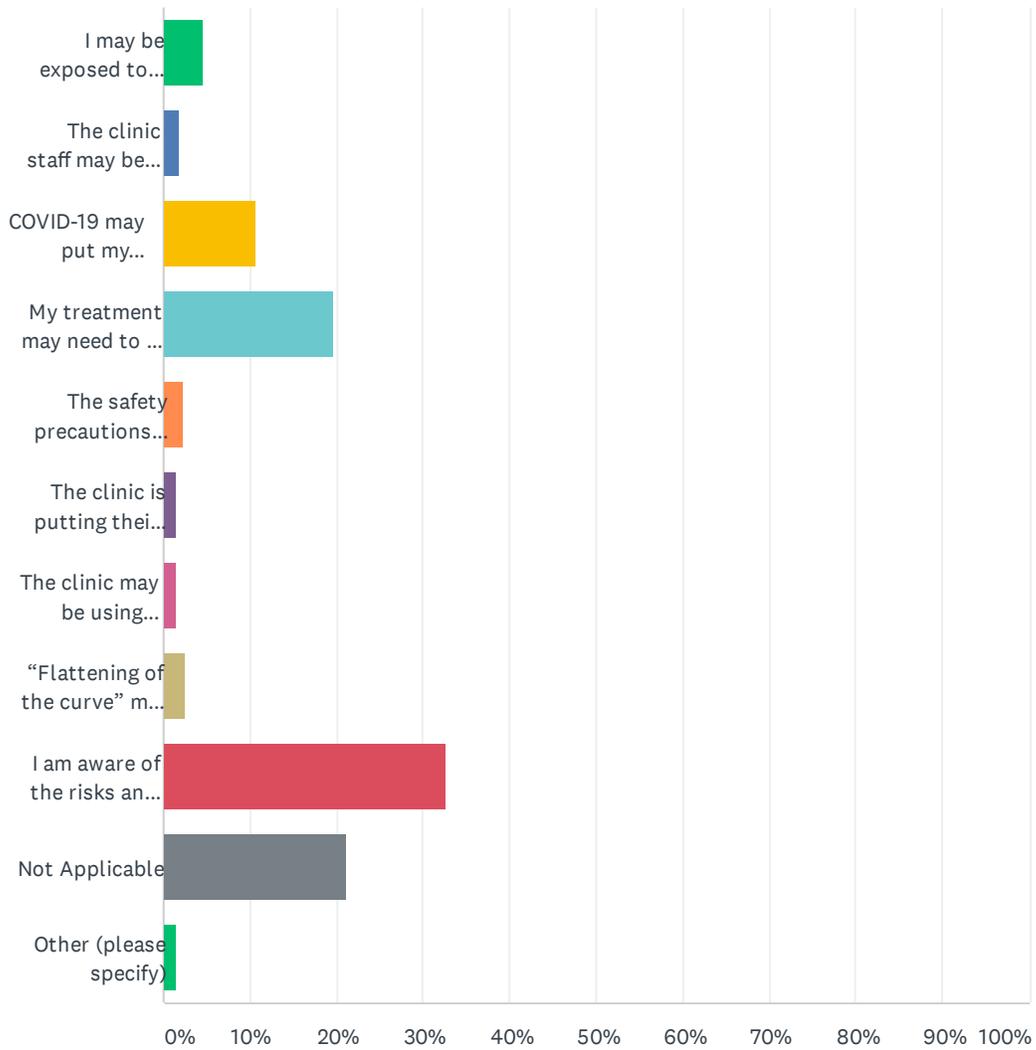


RESOLVE COVID-19 Patient Survey, Fielded April 2020

ANSWER CHOICES	RESPONSES	
The treatment delay will diminish my chance of having a baby.	51.91%	299
Infertility patients are being treated differently than other patients.	14.06%	81
It's not safe to pursue infertility treatments.	3.65%	21
It's not safe to become pregnant now	6.60%	38
My reproductive rights are being attacked.	4.17%	24
My treatment is being decided outside the doctor-patient relationship.	7.29%	42
My frozen eggs/sperm/embryos are at risk.	1.04%	6
My clinic doesn't care about me.	0.52%	3
My insurance will not be available when the clinic re-opens.	1.22%	7
I won't have the money to pay for treatment when the clinic re-opens.	2.26%	13
Not Applicable	4.17%	24
Other Concern (please specify)	3.13%	18
TOTAL		576

Q20 What is your biggest concern if your clinic is still open or in the process of re-opening?

Answered: 576 Skipped: 0

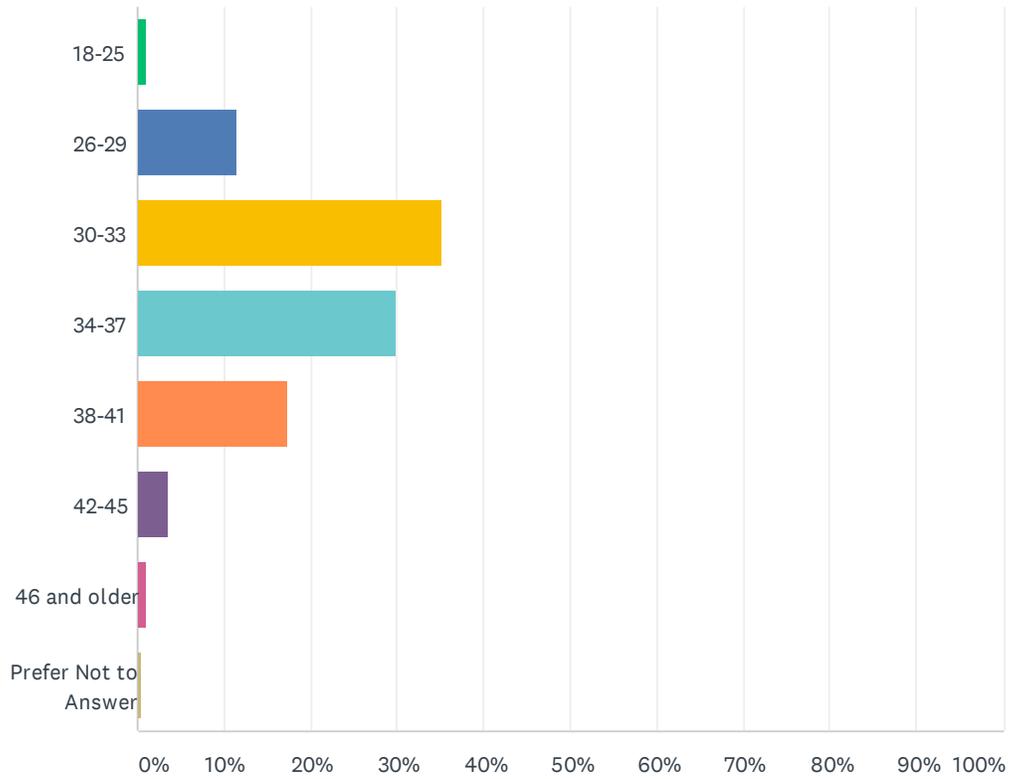


RESOLVE COVID-19 Patient Survey, Fielded April 2020

ANSWER CHOICES	RESPONSES	
I may be exposed to COVID-19.	4.69%	27
The clinic staff may be exposed to COVID-19.	1.91%	11
COVID-19 may put my pregnancy/baby at risk.	10.76%	62
My treatment may need to be suspended after it starts.	19.62%	113
The safety precautions taken may not guarantee my safety.	2.26%	13
The clinic is putting their business concerns ahead of patient safety.	1.39%	8
The clinic may be using personal protective equipment that is needed elsewhere.	1.56%	9
"Flattening of the curve" may be delayed.	2.60%	15
I am aware of the risks and willing to decide with my doctor how to proceed.	32.64%	188
Not Applicable	21.18%	122
Other (please specify)	1.39%	8
TOTAL		576

Q21 What is your age?

Answered: 576 Skipped: 0



ANSWER CHOICES	RESPONSES
18-25	1.04% 6
26-29	11.46% 66
30-33	35.24% 203
34-37	29.86% 172
38-41	17.36% 100
42-45	3.65% 21
46 and older	1.04% 6
Prefer Not to Answer	0.35% 2
TOTAL	576

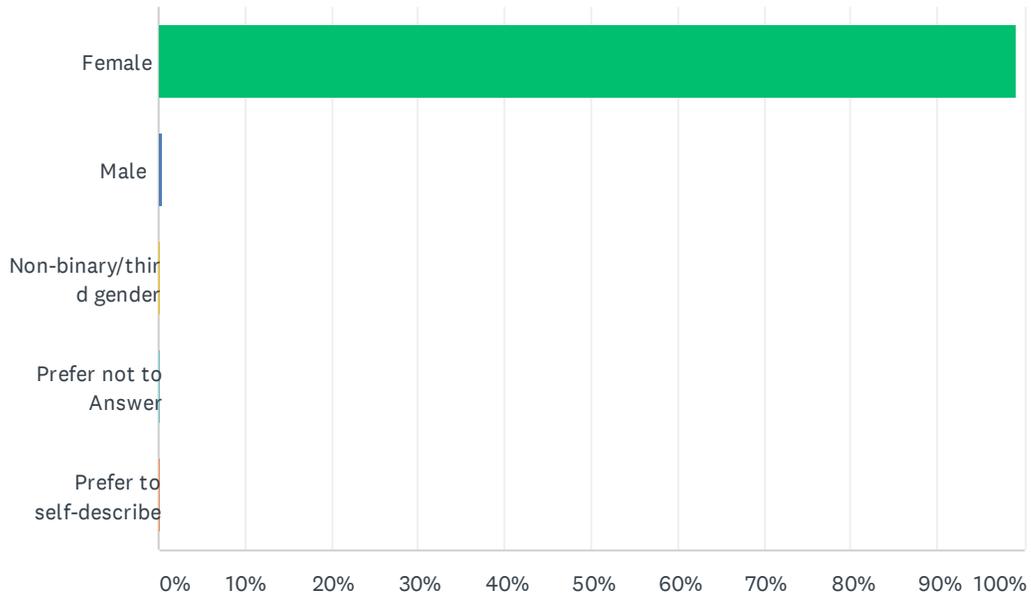
Q22 What state do you live in?

Answered: 576 Skipped: 0

ANSWER CHOICES	RESPONSES	
Name	0.00%	0
Company	0.00%	0
Address	0.00%	0
Address 2	0.00%	0
City/Town	0.00%	0
State/Province	100.00%	576
ZIP/Postal Code	0.00%	0
Country	0.00%	0
Email Address	0.00%	0
Phone Number	0.00%	0

Q23 Do you identify as:

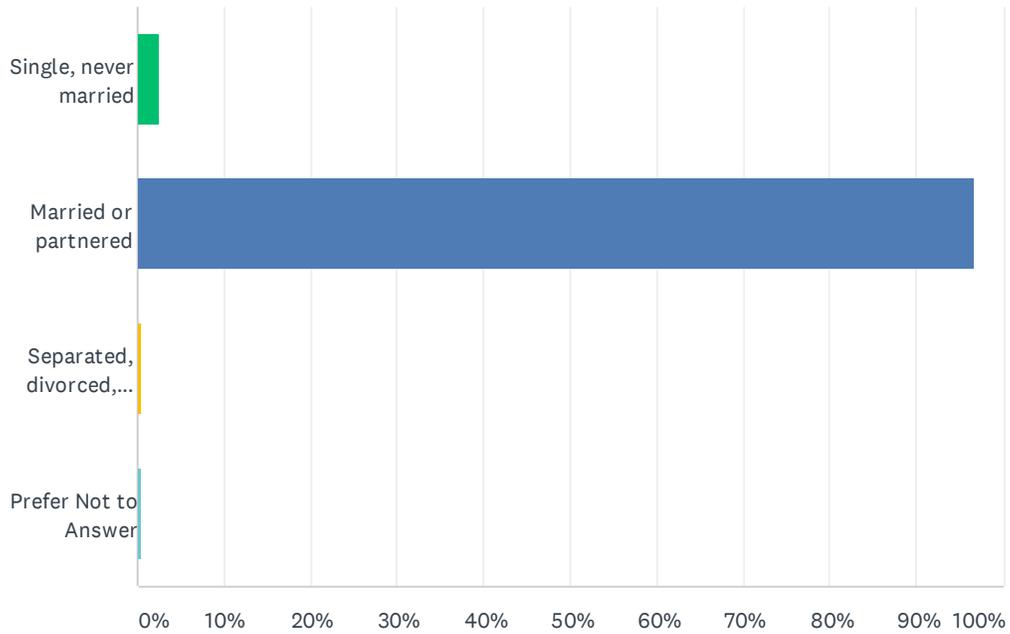
Answered: 576 Skipped: 0



ANSWER CHOICES	RESPONSES	
Female	99.13%	571
Male	0.52%	3
Non-binary/third gender	0.17%	1
Prefer not to Answer	0.17%	1
Prefer to self-describe	0.17%	1
Total Respondents: 576		

Q24 What is your current marital status?

Answered: 576 Skipped: 0



ANSWER CHOICES	RESPONSES	
Single, never married	2.60%	15
Married or partnered	96.70%	557
Separated, divorced, widowed, or no longer living with partner	0.35%	2
Prefer Not to Answer	0.35%	2
TOTAL		576