



## Complete Summary

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### GUIDELINE TITLE

Round spermatid nucleus injection (ROSNI).

### BIBLIOGRAPHIC SOURCE(S)

Round spermatid nucleus injection (ROSNI). Fertil Steril 2003 Sep;80(3):687-9.  
[29 references] [PubMed](#)

### GUIDELINE STATUS

This is the current release of the guideline.

## COMPLETE SUMMARY CONTENT

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## SCOPE

### DISEASE/CONDITION(S)

Male infertility

### GUIDELINE CATEGORY

Treatment

### CLINICAL SPECIALTY

Family Practice  
Internal Medicine  
Medical Genetics  
Obstetrics and Gynecology  
Urology

## **INTENDED USERS**

Physicians

## **GUIDELINE OBJECTIVE(S)**

To present recommendations for the treatment of male infertility using round spermatid nucleus injection (ROSNI)

## **TARGET POPULATION**

Men who are infertile

## **INTERVENTIONS AND PRACTICES CONSIDERED**

Round spermatid nucleus injection (ROSNI)

## **MAJOR OUTCOMES CONSIDERED**

- Fertilization rates
- Adverse effects of procedure

## **METHODOLOGY**

### **METHODS USED TO COLLECT/SELECT EVIDENCE**

Searches of Electronic Databases

### **DESCRIPTION OF METHODS USED TO COLLECT/SELECT THE EVIDENCE**

Not stated

### **NUMBER OF SOURCE DOCUMENTS**

Not stated

### **METHODS USED TO ASSESS THE QUALITY AND STRENGTH OF THE EVIDENCE**

Not stated

### **RATING SCHEME FOR THE STRENGTH OF THE EVIDENCE**

Not applicable

### **METHODS USED TO ANALYZE THE EVIDENCE**

Review

## **DESCRIPTION OF THE METHODS USED TO ANALYZE THE EVIDENCE**

Not stated

## **METHODS USED TO FORMULATE THE RECOMMENDATIONS**

Not stated

## **RATING SCHEME FOR THE STRENGTH OF THE RECOMMENDATIONS**

Not applicable

## **COST ANALYSIS**

A formal cost analysis was not performed and published cost analyses were not reviewed.

## **METHOD OF GUIDELINE VALIDATION**

Internal Peer Review

## **DESCRIPTION OF METHOD OF GUIDELINE VALIDATION**

This bulletin was approved by the Practice Committee of the American Society for Reproductive Medicine and the Board of Directors of the American Society of Reproductive Medicine.

# **RECOMMENDATIONS**

## **MAJOR RECOMMENDATIONS**

- Round spermatid nucleus injection (ROSNI) is a method of assisted fertilization in which precursors of mature spermatozoa are injected into oocytes.
- ROSNI should not be performed when more mature sperm forms (elongating spermatids or spermatozoa) can be identified and used for intracytoplasmic sperm injection (ICSI).
- Patients who may be candidates for ROSNI should receive careful and thorough pretreatment counseling to ensure they are clearly informed of the limitations and potential risks of the procedure.
- Application of ROSNI in clinical human in vitro fertilization (IVF) should be considered experimental and therefore requires approval and oversight by an appropriately constituted Institutional Review Board.

## **CLINICAL ALGORITHM(S)**

None provided

## EVIDENCE SUPPORTING THE RECOMMENDATIONS

### TYPE OF EVIDENCE SUPPORTING THE RECOMMENDATIONS

The type of supporting evidence is not specifically stated for each recommendation.

## BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS

### POTENTIAL BENEFITS

Effective treatment of male infertility using round spermatid nucleus injection (ROSNI)

### POTENTIAL HARMS

Offspring conceived via in vitro fertilization (IVF) with round spermatid nucleus injection (ROSNI) may be at risk for infertility or even more severe genetic defects.

## QUALIFYING STATEMENTS

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- While this document reflects appropriate management of a problem encountered in the practice of reproductive medicine, it is not intended to be the only approved standard of practice or to dictate an exclusive course of treatment. Other plans of management may be appropriate, taking into account the needs of the individual patient, available resources and institutional or clinical practice limitations.
- The Practice Committee recommends that round spermatid nucleus injection (RSNI) be considered an experimental procedure that should be applied only in the setting of a clinical trial approved and overseen by a properly constituted Institutional Review Board.

## IMPLEMENTATION OF THE GUIDELINE

### DESCRIPTION OF IMPLEMENTATION STRATEGY

An implementation strategy was not provided.

## INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT CATEGORIES

### IOM CARE NEED

Getting Better

## **IOM DOMAIN**

Effectiveness  
Patient-centeredness

## **IDENTIFYING INFORMATION AND AVAILABILITY**

### **BIBLIOGRAPHIC SOURCE(S)**

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[29 references] [PubMed](#)

### **ADAPTATION**

Not applicable: The guideline was not adapted from another source.

### **DATE RELEASED**

2003 Sep

### **GUIDELINE DEVELOPER(S)**

American Society for Reproductive Medicine - Private Nonprofit Organization

### **SOURCE(S) OF FUNDING**

American Society for Reproductive Medicine

### **GUIDELINE COMMITTEE**

Practice Committee of the American Society for Reproductive Medicine

Practice Committee of the Society for Assisted Reproductive Technology

### **COMPOSITION OF GROUP THAT AUTHORED THE GUIDELINE**

Not stated

### **FINANCIAL DISCLOSURES/CONFLICTS OF INTEREST**

Not stated

### **GUIDELINE STATUS**

This is the current release of the guideline.

### **GUIDELINE AVAILABILITY**

Electronic copies: Available from the [American Society for Reproductive Medicine Web site](#).

Print copies: Available from American Society for Reproductive Medicine, 1209 Montgomery Highway, Birmingham, Alabama 35216-2809; Phone: (205) 978-5000; Fax: (205) 978-5005; E-mail: [asrm@asrm.org](mailto:asrm@asrm.org); Web site: [www.asrm.org](http://www.asrm.org).

#### **AVAILABILITY OF COMPANION DOCUMENTS**

None available

#### **PATIENT RESOURCES**

None available

#### **NGC STATUS**

This NGC summary was completed by ECRI on August 23, 2004.

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