



7 DAY PREGNANCY PLANNING KIT

Predicts your 2 most fertile days

Ideal for any cycle length

This pack contains:

7 Ovulation Predictor Tests and

1 In-stream Pregnancy Test

Instructions and Use

- Read all the information in this leaflet before performing the test. The directions should be followed precisely to get accurate results.
- Do not use this product after the expiry date stamped on the bottom of the carton.

- Store in a dry place below 30°C.
- Do not freeze.
- Keep out of reach of children.
- For in-vitro diagnostic use. Not for internal use.
- This test cannot be used for contraception (birth control) or gender selection.
- This test is not reusable.

- For further information or advice on using the First Response™ 7 Day Pregnancy Planning Kit, contact: Church & Dwight (Australia) Pty Ltd PO Box 6369, Frenchs Forest, NSW 2086, Australia. Email: enquiries@churchdwight.com.au Or telephone us on the FIRST RESPONSE™ ADVICE LINE (Monday to Friday 8.30am - 5.00pm AEST) Australia Free Call: 1800 222 099 New Zealand Free Call: 0800 380 218 www.churchdwight.com.au www.firstresponsepregnancy.com.au

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First Response™ Ovulation Predictor Test

How the First Response™ Ovulation Predictor Test Works

Luteinizing hormone (LH) is always present in your urine and increases just before ovulation. This increase or 'surge' in LH triggers ovulation, which is the release of an egg from your ovary. This is also the most fertile time of your cycle.

The First Response™ Ovulation Predictor Test detects the LH surge which precedes ovulation by 24-36 hours. Your two most fertile days begin with the LH surge. If you have intercourse within the next 24-36 hours, you will maximize your chances of becoming pregnant.

When to begin testing

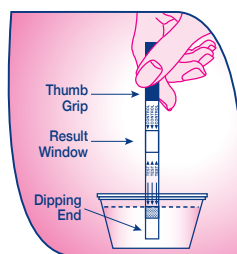
You may test at any time of day, but you should test approximately the same time each day. Reduce your liquid intake for 2 hours before testing. To find out when to begin testing, determine the length of your normal cycle. The length of your cycle is from the beginning of one period to the beginning of the next. Count the first day of bleeding or spotting as day 1. If your cycle length is irregular, that is, if it varies by more than a few days each month, take the average number of days for the last 3 months. Use the chart below to figure out the day you should begin testing. The day you begin testing is listed opposite the number of days in your cycle.

Length of Normal Cycle (Days)	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40
Start testing this many days after your last period began	5	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23

If 7 days of testing does not detect your hormone surge, you may continue testing with a second First Response™ 7 Day Pregnancy Planning Kit.

How to perform the test

1. Urinate in enclosed cup.
2. Remove the test strip from the packet and perform the test immediately.
3. With the arrows pointing towards the urine, dip the test strip into the urine sample for 10 seconds. The surface of the sample must be within the green area on the strip. See illustration. Note: hold the strip as straight as possible.
4. Remove the test strip from the urine sample. Place it on a non-absorbent flat surface and begin timing. Do not move the test strip while results are developing.
5. Read results after 5 minutes. Use the examples in the 'How to read the test results' section to help you interpret your result. Do not interpret results after 8 minutes.
6. Discard the test strip after you have read your result. Discard the urine sample and rinse the cup with water only – DO NOT use any soap or detergents. Dry the cup with a paper towel.
7. Continue testing around the same time each day until you detect your LH surge. Once you detect your surge, you should have intercourse within 24-36 hours to maximise your chances of becoming pregnant.



How to read the test results

Here are examples of results you can expect to see:

LH SURGE: two lines are visible and the colour intensity of the Test Line (T) is similar to or darker than the Control Line (C). There is no reason to keep testing.



NO LH SURGE: two lines are visible but the Test Line (T) is lighter than the Control Line (C) and NO visible Test Line (T).



Once you know you are about to ovulate, you are at the start of the most fertile time of your monthly cycle. If you have intercourse within 24-36 hours, after you detect your LH surge, you will maximize your chances of becoming pregnant. There is no need to wait until you ovulate before having intercourse.

Limitations of the test

Some prescription drugs, such as menotropins for injection (e.g., Pergonal¹) may affect the result you see with the First Response™ Ovulation Predictor Test. If you are undergoing therapy with Clomiphene citrate (e.g. Clomid² and Serophene³), please consult your physician about how this may affect your test result. Medications containing hCG or LH may affect the test and should not be taken while using this test. In addition, the results of the test may not be valid if you are taking oral contraceptives. Some women do not ovulate every cycle and they will not see any increase in the level of LH during these non-ovulating cycles. Certain medical conditions may adversely affect the reliability of this test for predicting ovulation. These include pregnancy, postpartum, post-abortion, polycystic ovary syndrome (PCOS), ovarian cysts, the onset of menopause, and untreated hypothyroidism. Women with medically diagnosed fertility problems should consult their physicians before using this product.

1. Pergonal is a registered trademark used by Ares Trading SA.
2. Clomid is a registered trademark of Merrell Pharmaceutical.
3. Serophene is a registered trademark of Ares Trading SA.

Questions & Answers

Ovulation Predictor Test

Q: When can I do the test?

A: After you determine the best day to start testing based on your monthly cycle, you can do the First Response™ Ovulation Predictor Test any time that day. You do not have to use your first morning urine. However, you should do the test about the same time each day. Reduce your liquid for 2 hours before testing, since drinking excessive amounts of liquid can dilute the LH in your urine.

Q: How accurate is the First Response™ Ovulation Predictor Test?

A: The First Response™ Ovulation Predictor Test is 98% accurate in detecting the LH surge in laboratory studies.

Q: I have used all 7 tests and I do not see a surge. What do I do?

A: Since not every woman ovulates mid-cycle, you may not detect the LH surge in the first 7 days of testing. This could mean you have not ovulated yet and you should continue testing with additional First Response™ Ovulation Predictor Tests or start testing a few days earlier next month.

Q: I have used the First Response™ Ovulation Predictor Test for three months, and have not become pregnant yet. What is wrong?

A: First, it is important to remember that it can take normal, healthy couples many months to become pregnant. There are many factors which affect your ability to become pregnant even if you have been able to have intercourse during your most fertile time. If after several months you have no success, consult your physician. Since you have been monitoring your LH surge with the First Response™ Ovulation Predictor Test, you will be able to give your doctor a clearer picture of how you have been ovulating.

Q: Once I detect my LH surge, when is the best time to have intercourse?

A: Your two most fertile days begin with the LH surge. You are most likely to get pregnant if you have intercourse within 24-36 hours after you detect your LH surge.

Q: What if no line or only one line appears on the result strip?

A: If you do not see any lines or you see no Control Line (C) after 5-6 minutes, the result is invalid. You should repeat the test with a new test strip. The test strip is not reusable. Possible causes for an invalid result include not holding the test strip in the urine for the appropriate length of time, or not immersing the test strip far enough into the urine for adequate sample absorption. Immersing the test strip past the green area can also cause an invalid result. Review the Directions for Use and repeat with a new test strip.

Q: Do any medical conditions or drugs affect the test?

A: Certain medical conditions may adversely affect the reliability of this test for predicting ovulation. These include pregnancy, postpartum, post-abortion, polycystic ovary syndrome (PCOS), ovarian cysts, the onset of menopause, and untreated hypothyroidism. Some prescription drugs, such as menotropins for injection (Pergonal¹) may affect the result you see. If you are undergoing therapy with Clomiphene citrate (e.g., Clomid² or Serophene³), please consult your physician for the appropriate time to begin testing. Medications containing hCG or LH may affect the test and should not be taken while using this test. Women with medically diagnosed fertility problems should consult their physician before using this product.

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Q: Will oral contraceptives affect the results?

A: After using the pill your cycle may be irregular and make take some time to stabilize again. You may wish to wait until you have had two normal periods before starting to use the First Response™ Ovulation Predictor Test. Follow your physician's advice on when to best try to become pregnant.

Q: If the First Response™ Ovulation Predictor Test can determine my most fertile time, why can't I use it for contraception (birth control)?

A: Sperm can survive up to 72 hours (3 days), and this test predicts your LH surge only up to 24-36 hours in advance. Therefore, if you have intercourse before you discover your surge, the egg can still be fertilized.

First Response™ Pregnancy Test

After trying to conceive during a cycle, you can then perform a First Response™ Pregnancy Test to tell if you are pregnant. The First Response™ Pregnancy Test included in this kit is 99% accurate in laboratory testing, from the day before your expected period. It can be used at any time of the day to detect pregnancy. It is so sensitive it may be used as early as 6 days before your missed period (5 days before day of expected period).

The amount of pregnancy hormone increases as pregnancy progresses. In clinical testing, *First Response™ detected the hormone levels, consistent with pregnancy in 62% of women, 6 days before the day of missed period (5 days before the day of expected period), in 78% of women 5 days before their missed period, in 87% of women 4 days before their missed period, and in 98% of women 3 days before their missed period and 99% of women 2 days before their missed period.

Instructions for Use

- Read all the information in this insert before performing the test.
- Do not use after expiry date stamped on each foil pouch.
- Store in the sealed pouch in a dry place below 30°C.
- Do not freeze.
- For in-vitro diagnostic use. Not for internal use.
- Keep out of reach of children.
- Single use device. Do not reuse.

Instructions

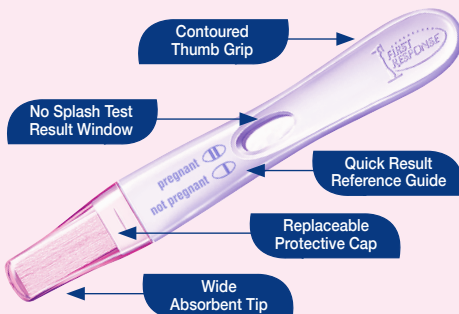
1. Remove the test stick from the foil wrapper and take off the cap.
2. Hold the test stick by the thumb grip with the absorbent tip pointing downward and the result window facing away from your body, place the absorbent tip in your urine stream for 5 seconds only. It is recommended to use a clock to time 5 seconds. (You may collect your urine in a clean, dry cup and immerse the entire absorbent tip in the urine for 5 seconds only.)
3. With the absorbent tip still pointing downward, replace the cap and lay the stick on a flat surface with the result window facing up. Replacement of the cap is not necessary for the proper functioning of the test.
4. You may soon see a pink colour moving across the result window to indicate that the test is working.
5. Read your results at 3 minutes but within 10 minutes.

Reading the Results

Pregnant **TWO PINK LINES** in the Result Window. (One line may be lighter than the other, they do not have to match).



Not Pregnant **ONE PINK LINE** in the Result Window. (There will be no trace of a second line).



Questions & Answers Pregnancy Test

Q: When can I do the test?

A: The First Response™ Pregnancy Test included in this kit is so sensitive it will give you a result as early as 6 days before the day of your missed period (5 days before day of expected period). You can use the First Response™ Pregnancy Test at any time of the day. You do not have to use first morning urine.

Q: How accurate is the First Response™ In-Stream Pregnancy Test?

A: In studies the First Response™ In-Stream Pregnancy Test is over 99% accurate the day before AND the day your period is due. Note that hormone levels vary: some women may not have detectable amounts of the pregnancy hormone (hCG) in their urine on the day they use the test.

Q: What do I do if the test result is positive (pregnant)?

A: Remember this test is not intended to replace your doctor's diagnosis. A positive test result shows that the pregnancy hormone (hCG) was detected. See your doctor to confirm that you are pregnant.

Q: What do I do if the result is negative (not pregnant)?

A: You may not be pregnant, or it may be too early to tell. If you do not get your period within seven days, you should retest with another First Response™ In-Stream Pregnancy Test. It is possible that either you miscalculated the length of your cycle or your urine may not have had enough pregnancy hormone (hCG) for the test to give a positive result. If you retest and again no hCG is found, and your period still has not started, you should consult your doctor.

Q: Will my result change if left standing for a certain period of time?

A: The test result should be read as soon as possible after waiting 3 minutes but before 10 minutes. If negative (i.e. 1 pink line) the result will last for 10 minutes. After 10 minutes disregard any further changes, it is still a negative result.

Q: Do any drugs or medications affect the test?

A: Only medications containing the pregnancy hormone (hCG) can affect the result (e.g. A.P.L.¹, Pregnyl² and Profasi⁴). The test should not be affected by hormone therapies containing Clomiphene citrate (e.g. Clomid³ and Serophene⁵), alcohol, painkillers, antibiotics or the contraceptive pill.

- 1 A.P.L is a registered trademark of Wyeth-Ayerst Laboratories Division of American Home Products Corp.
- 2 Pregnyl is a registered trademark of Organon, Inc.
- 3 Clomid is a registered trademark of Merrell Pharmaceutical.
- 4 Profasi is a registered trademark of Ares Trading SA.
- 5 Serophene is a registered trademark of Ares Trading SA.