In this retrospective study, researchers looked at the impact of transfer distance from the fundus (TDF) on clinical pregnancy rate (PR) and ectopic pregnancy rate in 699 ultrasound-guided embryo transfers. "Funds" refers to the bottom portion of the uterus, nearest the fallopian tubes. TDF was calculated by subtracting the depth of catheter insertion from the uterine cavity depth which was determined by ultrasound or by mock transfer.

A difference of at least 10 millimeters was found in more than 30 percent of the reviewed cases between cavity depth measured by ultrasound and cavity depth measured by mock transfer. Accordingly, TDF by ultrasound was highly predictive of pregnancy rate, whereas TDF by mock transfer was not predictive. Increasing the transferred embryo's distance from the fundus with the use of ultrasound resulted in significantly increase pregnancy rate and lower ectopic rates. Specifically, data collected suggests "that for every additional millimeter embryos are deposited away from the fundus," clinical pregnancy odds are increased 11 percent.

The researchers conducted that TDF has a significant impact on pregnancy rate after embryo transfer, and that ultrasound in particular is useful for helping practitioners determine the limit of depth for catheter insertion of embryos.