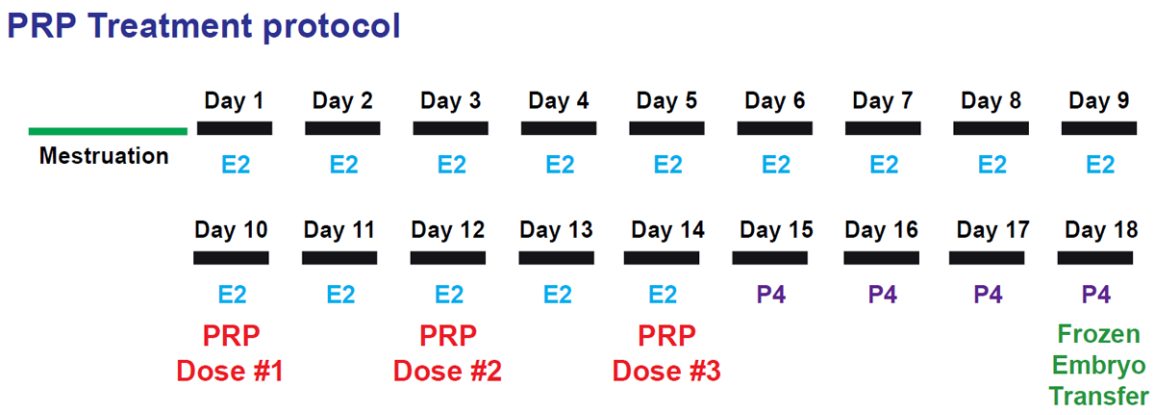
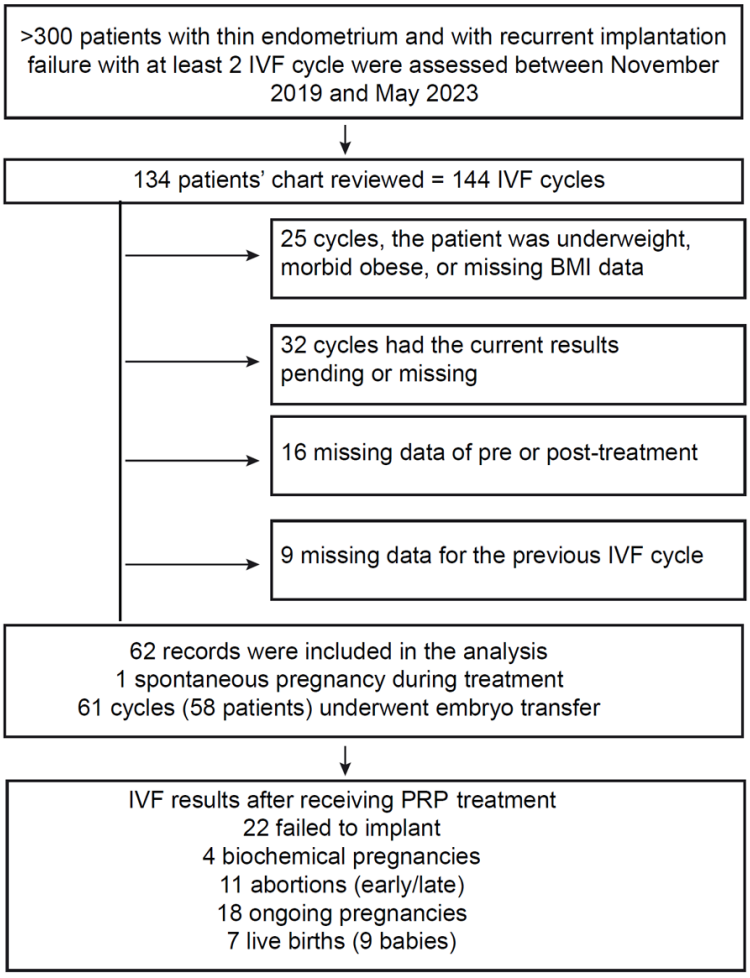
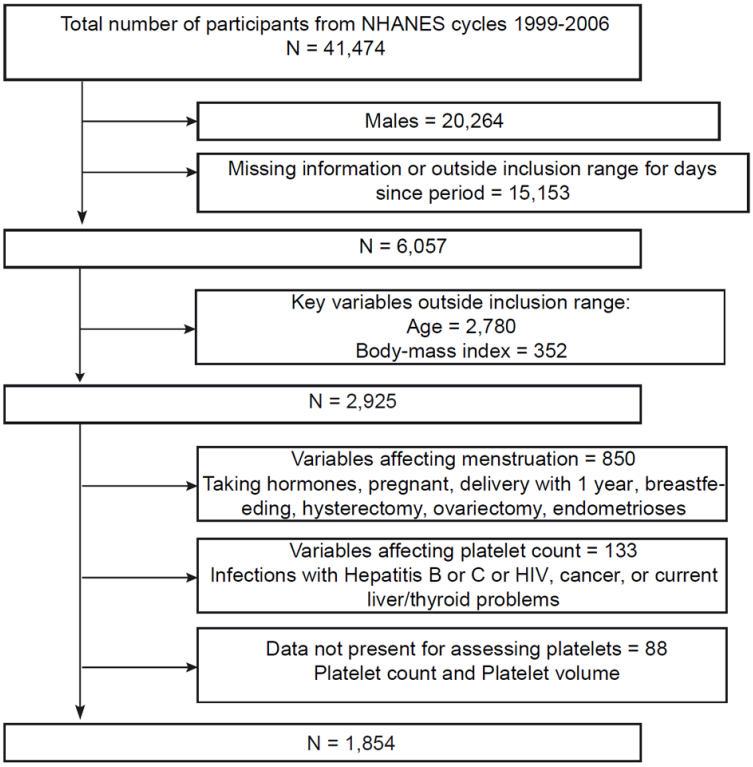


Supplementary Figure 1. Platelet Rich Plasma (PRP) treatment protocol for patients with atrophic endometrium under-going estrogenprimed cycle. Endometrial preparation with 6 mg of estrogen valerate was started on the menstrual cycle Day 2 or 3. On the menstrual cycle Day 10, PRP was infused into the uterine cavity. The procedure was repeated on the menstrual cycle Day 12 and 14 until a 7 mm endometrial thickness was reached. Then, progesterone support for the luteal phase was started, and embryos were thawed and transferred on their corresponding development day. Abbreviations: E2: estradiol, PRP: platelet rich plasma, P4: progesterone.



Supplementary Figure 2. The study flow chart demonstrating the selection of patients to examine the effect platelet-rich plasma has on endometrium thickness and in vitro fertilization outcomes, following the Strengthe-ning the Reporting of Observational Studies in Epidemiology (STROBE) statement.



Supplementary Figure 3. Flow diagram of the literature search and filtering results for the systematic review of the effectiveness of platelet-rich plasma on implantation and clinical pregnancy rates patients undergoing in vitro fertilization, according to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) 2020 guidelines.