1. HYPOTHALAMUS - gives GnRH (Gonadatrophin releasing Hormone) to PITUITARY
2. PITUITARY - sends FSH to OVARY
3. OVARY - FSH starts to stimulate the follicles
4. 1st FOLLICLE- produces OESTROGEN, slight rise in oestrogen
5. 1st FOLLICLE- inhibits other follicles to stop growing ~ "STOP"
6. 1st FOLLICLE to Mature becomes GRAAFIAN FOLLICLE
7. GRAAFIAN FOLLICLES secretes OESTROGEN
8. OESTROGEN - starts to thicken womb lining
9. OESTROGEN - start to thin mucus
10. MUCUS - Makes wet & slippery fertile mucus, ready to nourish sperm
11. OESTROGEN - inhibits LH @ PITUITARY GLAND ~ "STOP"
12. GRAAFIAN FOLLICLE - develops PRIMARY OOCYTE
13. OESTROGEN tells PITUITARY to release LH
14. LH thins membrane of GRAAFIAN FOLLICLE
15. 24-48hrs later LH surges
16. PRMIARY OOCYTE develops into SECONDARY OOCYTE
17. GRAAFIAN FOLLICLE ruptures, releases SECONDARY OOCYTE
18. SECONDARY OOCYTE develops into OOTID
19. OOTID develops into MATURE OVUM
20. FALLOPIAN TUBE wafts to collect the egg (mature ovum)
21. LH & FHS get together tell GRAAFIAN FOLLILCE to become CORPUS LUTEUM
22. CORPUS LUTEUM produces PROGESTERONE
23. PROGESTERONE ; warms the endometrium to become receptive to receive a baby
24. PROGESTERONE triggers ADRENALS to increase production of OESTROGEN
25. PROGESTERONE increases temperature for BBT
26. PROGESTERONE decreases LH & FSH
27. LH & FSH are low - therefore CORPUS LUTEUM degenerates
28. CORPUS LUTEUM degenerates no PROGESTERONE
29. NO PROGESTERONE = WOMB starts menses
30. WOMB - spiral arteries in the endometrium contract, therefore lack of blood supply, lining dies and sheds

**OR if Pregnant**

* OVUM meets SPERM in fallopian tube = fertilises into a ZYGOTE
* ZYGOTE - produces HCG (Human Chorionic gonadotropin)
* HCG tells CORPUS LUTEUM to secrete PROGESTERONE
* 6 days later ZYGOTE is a mass of cells and becomes a BLASTOCYST and implants
* 8 weeks later , placenta takes over.
* 266 +/- 6 days - baby is born!