

For use with semen collection for full semen exam and sperm preparations for intrauterine insemination (IUI)

A semen analysis is not just a simple sperm count. It is an accurate measurement of the number of sperm, their ability to move (motility), and the percent of normal morphology (shape). For these reasons, we would appreciate your cooperation in collecting your semen specimen according to the instructions below.

SEMEN ANALYSIS: INSTRUCTIONS FOR COLLECTION OF A SPECIMEN

1. Please call the laboratory (701-323-5480) **PRIOR** to the date of specimen collection and schedule an appointment for the semen analysis. Please **do not** direct schedule a lab appointment via My Sanford Chart. **Specimens delivered to the laboratory without a prior appointment may be rejected.**
2. Specimens will be accepted between the hours of 7:30am and 2:30pm. Exceptions may be made on a case by case basis, as arranged with laboratory personnel.
3. Collection of the semen by masturbation is preferred. Alternative methods such as withdrawal from intercourse or condoms are not acceptable. The most accurate results are obtained when patient has not ejaculated for 2-7 days.
4. Your healthcare practitioner or laboratory will provide a sterile specimen cup. Please avoid touching the inside of the cup when collecting. If any semen is spilled, **DO NOT** attempt to transfer the spilled specimen into the cup, but note the collection error on question #2 below.
5. Bring the specimen to Sanford Laboratories-Bismarck at 222 North 7th Street, Bismarck, ND (1st Floor) within 30 minutes of collection. Protect the specimen from extreme temperatures. One way to do this is to place the cup inside a foam rubber can cozy (cooler) and keep it close to your body. If you are unable to deliver the specimen to the lab within 30 minutes of collection, arrangements need to be made for a room to collect at the laboratory or at the physician's office.

THE FOLLOWING INFORMATION MUST BE PROVIDED AND SENT WITH THE SPECIMEN TO THE LAB:

NAME: _____ DOB: _____

COLLECTION METHOD: _____ MASTURBATION _____ OTHER – EXPLAIN _____

ADDRESS _____

CITY _____ ST _____ ZIP _____

PHONE NUMBER _____ PARTNER'S NAME _____

ORDERING PHYSICIAN: _____

1. WHAT TIME WAS THE SAMPLE COLLECTED? _____
2. WAS ANY PORTION LOST OR SPILLED DURING COLLECTION? _____
3. I WAS ABSTINENT (DID NOT EJACULATE) FOR _____ DAYS BEFORE PRODUCING THIS SEMEN SAMPLE.
4. WAS THE SPECIMEN EXPOSED TO TEMPERATURE EXTREMES? _____ IF YES, PLEASE EXPLAIN:

