

Reproductive Endocrinology and Infertility

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SEMEN ANALYSIS INSTRUCTION/COLLECTION FORM.

Semen analysis and other andrology tests are done **BY APPOINTMENT ONLY**. Appointments should be scheduled through the office by calling (813) 872 – 0018. It is recommended that patients have **ONLY 3 to 5 days of abstinence prior to the appointment**. Shorter or longer periods of abstinence may affect the test results.

1. Prior to collection by masturbation, thoroughly wash hands and genitals with soap and water. Rinse well of all soap residue and dry.
2. Do not use a condom for collection. Do not use creams or lubricants during collection.
3. Ejaculate one time only directly into the container and avoid touching the internal sterile wall of the container.
4. Please label the specimen container with your name and date of birth.
5. The laboratory **must** receive the specimen within 30 minutes of collection. A longer time may affect the test results. Care should be taken not to expose the specimen to extreme hot or cold, and the specimen should remain in the upright position. Try to maintain specimen at body temperature.
6. **This form must accompany the specimen when it is dropped off.** Payment is due before testing can begin. Our charge for semen analysis is \$150.00. **We do not accept insurance reimbursement.**

Patient Name: _____

Date of Birth: ____ / ____ / ____ **Age:** ____ **SS#:** ____ - ____ - ____

Spouse / Partner Name: _____

Referring Physician: _____

Date of Last Intercourse or Ejaculation: ____ / ____ / ____

Today's Date: ____ / ____ / ____ **Time Specimen Collection Completed:** _____

Did any part of this specimen not go into the container provided? No ____ **Yes** ____

Medications: _____

Medical History: _____

For Office Use Only

Method of Collection: Masturbation / Other _____

Specimen Container: Sterile Plastic Cup / Other _____

Collection off Premises: No Yes Transport Problems: No Yes Explain: _____

Time Specimen Received: _____ a.m. / p.m.

Received By: _____