

Complete Semen Analysis Collection

Instructions for Patients

Patient Preparation:

- Refrain from sexual activity at least 2 days but not more than 7 days before collecting a semen specimen
 - Three days of sexual abstinence is optimal for fertility exam
- **Label the container with your first and last name, date of birth, and the date and time of collection**

Sample Collection:

- Collect a complete semen specimen by masturbation into a clean, sterile container obtained from your physician or laboratory
 - Lubricants may not be used as they will interfere with the test
 - Condoms are not acceptable
- Keep the specimen at room temperature or body temperature by storing it in an inside pocket or under a coat, and deliver it to the laboratory within **1 hour** of collection
 - Avoid exposing the specimen to extremes of hot or cold temperatures because temperature affects the accuracy of sperm motility testing, which is a very important part of the fertility exam

Note: If you prefer to collect the specimen after arrival in the lab, a restroom is available

Deliver the specimen with your doctor’s order, and the form below to the laboratory at any of the following locations during their posted hours:

Providence St. Vincent 9205 SW Barnes Road Portland, OR 97225 7:00AM – 6:00PM	Providence Portland 4805 NE Glisan Street Portland, OR 97213 7:00AM – 6:00PM	Providence Milwaukie 10150 SE 32 nd Avenue Milwaukie, OR 97222 7:00AM – 5:00PM M-F
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COMPLETE THE FORM BELOW—SEND IT TO THE LAB WITH YOUR SPECIMEN

NAME (Last name, First Name) _____ DOB _____

Date & Time Collected _____ Days of Abstinence _____ days

Was Sample Protected Against Extreme Temps During Transport to Lab? ___ YES ___ NO

Was the Sample Complete (All Ejaculate Captured In Container)? ___ YES ___ NO

Was the Sample Collected By Manual Masturbation? ___ YES ___ NO

If the answer is “No”, please indicate method of collection _____

Specimen Collection Location? ___ HOME ___ LAB

TO BE COMPLETED BY LAB STAFF

Date & Time Specimen Received _____ Specimen at 20°C to 37°C? ___ YES ___ NO

Proper Container Used (i.e. sterile specimen cup)? ___ YES ___ NO

Notify the technologist immediately upon receipt