

SEMEN COLLECTION INSTRUCTIONS

OBTAINING THE SPECIMEN:

1. Abstain from sexual activity for at least 3 days before the specimen is collected. This includes ejaculation by any means.
2. The specimen is to be produced by masturbation. No lubricant, including saliva, may be used.
3. The entire ejaculation must be collected in a clean screw-cap container. Collection containers are available at Wisconsin Diagnostic Laboratories. There must be no residue of possible spermicidal materials (soap or detergent, for example) in or on the interior surface of the container.
4. Label the container with **patient's full name, date of birth, and date/time of collection.**
5. The specimen may be collected at home and transported to the main laboratory.
6. Please **deliver specimen within (sixty) 60 minutes of collection** for infertility testing and within (twenty-four) 24 hours for post vasectomy testing.

TRANSPORTING THE SPECIMEN TO THE LABORATORY:

Specimens should be kept at body temperature, in a pocket for example, during transport. Failure to keep the specimen at body temperature during transport may cause abnormal results.

1. **Infertility testing** sample must be delivered to the laboratory immediately, within one (1) hour after collection, Monday through Friday 7:00 am to 1:30 pm. No holidays.
2. **Post vasectomy testing** sample must be delivered to the laboratory within twenty-four (24) hours, Sunday through Saturday 7:00 am to 11:00 pm.
3. Please **deliver specimen within (sixty) 60 minutes of collection** for infertility testing and within (twenty-four) 24 hours for post vasectomy testing to:

Wisconsin Diagnostic Laboratories
9200 West Wisconsin Avenue, Milwaukee, WI 53226
414.805.7600

(Park in Children's Hospital Emergency Department Parking Lot. Enter Door 21.)

Specimen Information:

Patient name: _____			
Date of collection: _____		Time of collection: _____	
Reason for semen analysis (<i>check one</i>):	<input type="checkbox"/> Infertility	<input type="checkbox"/> Post Vasectomy	Date of surgery: _____
Collected by masturbation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Complete specimen (ejaculate) delivered?	<input type="checkbox"/> Yes
Type of container: _____			
If specimen was transported here, was it kept close to the patient's body? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Comments/problems: _____			
Questionnaire completed by: _____			
Date received in laboratory: _____		Time received in laboratory: _____	
Received by: _____			