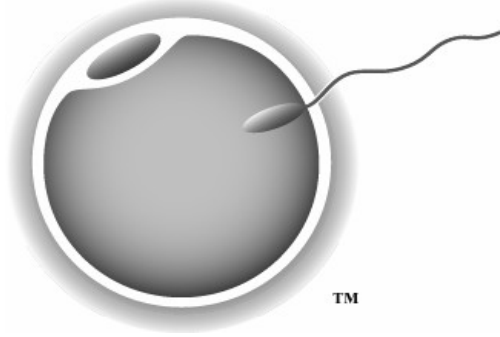


Patient and specimen requisition checked in by: _____ @ (time) _____ am / pm Verified specimen labeled



CENTER FOR
ASSISTED
REPRODUCTION
EMBRYO.NET

1701 Park Place Ave. 4461 Coit Rd Ste 307 1250 8th Ave Ste 365
Bedford, Texas Frisco, Texas Fort Worth, Texas
Phone: (817) 540-1157 Phone: (972) 661-9544 Phone: (817)924-1572

Kathleen M. Doody, MD: Kevin J. Doody, MD:
Anna C. Nackley, MD:
Board Certified Reproductive Endocrinology/Infertility
Christine W. Mansfield, MD
Board Eligible Reproductive Endocrinology/Infertility
Patricia A. McBride-Houtz, Ph.D.
Licensed Psychologist

A Professional Association.

REFERRING PHYSICIAN ANDROLOGY REQUISITION

Fax to: 817-545-2164

Patient / Partner to complete and circle responses below (do not complete the lower section):

Sperm Source (Please Print): _____ Female Patient (Please Print): _____

Initials _____ SS# _____ Initials _____ SS# _____

Contact phone number(s): _____

Date of Birth: _____ Date of collection: _____ Time of collection: _____ am / pm Date of previous ejaculation: _____

Specimen collected: **Off-Site / On-Site** The specimen cup is completely labeled: **YES / NO** (*Unlabeled specimens will be discarded*)
I **did / did not** read and follow the collection instructions on back. If you did not, please explain: _____

PATIENT TEST RESULTS WILL BE COMMUNICATED TO THE REFERRING PHYSICIANS OFFICE ONLY.

Referring Physician: (print) _____ Phone: _____

Address: _____ FAX: _____

City / State / Zip: _____

Signed Order: _____ Date: _____

Attention Referring Physician: Request for a semen analysis interpretation from CARE physician: Yes / No

Physician and or designee to initial test requested below:

ANDROLOGY TESTING DONE AT ALL CENTER FOR ASSISTED REPRODUCTION LOCATIONS:

_____ **COMPLETE SEMEN ANALYSIS - \$75.00** (Computer assisted semen analysis (CASA) for sperm concentration (M/ml) and motility parameters.
Manual semen analysis is additionally performed when <20M motile / ml.

_____ **STRICT SPERM MORPHOLOGY WITH COMPLETE SEMEN ANALYSIS - \$150.00** (Morphology using Kruger strict criteria)

_____ **PARTNER OR DONOR (circle) SPERM PREPARATION FOR IUI, IVF, ICSI WITH COMPLETE SEMEN ANALYSIS - \$110.00**
If Frozen IUI date / time: _____

_____ **SPERM DNA FRAGMENTATION TEST WITH COMPLETE SEMEN ANALYSIS - \$200.00**

_____ **INDIRECT SPERM ANTIBODY TESTING ON SERUM - \$50.00** (Indirect immunobead sperm antibody testing on female or male serum)

_____ **SPERM FREEZING FOR STORAGE WITH COMPLETE SEMEN ANALYSIS - \$200.00** (Sperm freezing for short or long term storage)

_____ **DIRECT SPERM ANTIBODY TEST WITH COMPLETE SEMEN ANALYSIS - \$150.00** (Complete semen
analysis with direct immunobead sperm antibody testing.)

SCHEDULING ANDROLOGY PROCEDURES:

Please call the Center for Assisted Reproduction office of choice to schedule ALL Andrology procedures. Andrology testing times do vary, please call to inquire. **All Andrology procedures require advance scheduling. Unscheduled “walk-ins” may be subject to increased wait times and are UNAVAILABLE on weekends.** The Fort Worth and Frisco Andrology laboratories are closed on weekends and holidays. The Bedford Andrology hours of operation on weekends and holidays are limited and subject to change based on patient volume.

REFERRALS:

All referral Andrology testing requires a signed order from the referring physician (see front page under physician information) or equivalent order. The laboratory WILL NOT perform any Andrology testing without a signed order. All tests must be scheduled at least 24 hours in advance.

IUI REQUIREMENTS:

All specimens for IUI must be accompanied by a signed IUI Consent. No IUI will be processed without an IUI Consent signed by both female patient and partner (if applicable) and dated within 3 months. All specimens must be scheduled and delivered at least 1.5 hours before the IUI.

SPERM FREEZE REQUIREMENTS:

All specimens for sperm cryopreservation must be accompanied by a NOTARIZED sperm freeze consent, current infectious disease blood work (within 1 year), and payment in full. All tests must be scheduled at least 24 hours in advance.

SEMEN ANALYSIS TEST RESULTS:

Laboratory personnel will report all test results to Center for Assisted Reproduction patients. The laboratory will request you wait following drop-off while a preliminary analysis is performed to determine whether additional testing is recommended. If you can not wait, please provide a contact number for the laboratory. Referral patient test results will be faxed and mailed to the referring physicians' office of record. Test results will be released within 2 business days.

Semen Collection Instructions

1. Complete the label on the sterile specimen cup provided by the lab. (***Unlabelled specimens will be discarded***)
2. Fill out the top section of the lab requisition on the front page of this form completely.
3. Specimens are to be collected by masturbation only (***Do not use any type of lubricant or saliva***)
 - For a **Semen Analysis, Sperm Cryopreservation, and Sperm Antibody testing** it is recommended to collect a specimen 2-5 days after the last ejaculation.
 - **Due to time restraint, Center policy DOES NOT allow the partner to assist during collection for IVF cycles on the day of egg retrieval.**
4. Collect the entire amount of semen in the sterile container provided by the lab. ***In the event you do not collect the entire specimen in the cup, please indicate on the front of the requisition form to notify the laboratory.***
5. Recap the lid tightly and place the cup in the supplied plastic biohazard bag.
6. Place the plastic biohazard bag in the white paper bag.
7. Do not place this form in the bag with the specimen cup.
8. Semen specimens need to be examined ***within 1 hour*** after collection. This ensures an accurate determination of count and motility. You may collect on site or deliver to our office promptly after collection. Do not attempt to cool or warm the semen sample. In the cool weather, please keep the specimen inside your jacket, sweater or purse.
9. After collection, bring this form and your specimen directly to the **check-out counter**.
10. At the time of specimen drop off, the front office will review the requisition for completeness and notify the laboratory.
 - For **IUI, IVF or Sperm Cryopreservation procedures**, you will maintain possession of your specimen until a laboratory staff member speaks with you. The laboratory will escort the patient to the laboratory. The patient or partner will be asked to sign and/or initial the specimen slide used for semen analysis. The technician will apply the semen specimen to the slide in the presence of the patient (partner). No semen analysis or interpretation will be done in front of the patient (partner).
 - For **Semen Analysis or Sperm Antibody Procedures**, the front office will verify your information and a lab tech will take the specimen from you and bring it to the lab.
11. **Any patients or partner who refuse to stay and leaves after being informed of the CAR lab policy for IUI, IVF or Sperm Cryopreservation and/or prior to speaking with a laboratory staff member will not have their specimen processed as per the physician's discretion and current policy in force.**
12. Weekday patients for IUI, IVF or Sperm Cryopreservation may be required to wait up to 30 minutes but normally this validation procedure should take less than 15 minutes from time of check in. Weekend patients may experience a longer time interval as required.
13. Please note that if you are scheduled for an IUI, IVF, or sperm cryopreservation procedure and are diagnosed as ***“Male Factor”***, you may need to collect a second specimen in addition to your initial sample. This may cause the IUI time to be rescheduled later in the day.