



Instructions for Semen Analysis

A container is enclosed for the test; please bring the sample to Cherish-UK on:

.....

Your co-operation is requested with the following:-

1. Abstain from intercourse or masturbation for a period of 2 days before, but no longer than 7 days prior to giving a sample for the test.
2. The specimen must be produced within 1 hour before arriving at Cherish-UK.
3. The specimen must be produced by masturbation, into the container supplied. It is important that we know if the whole sample is not collected as the first part of the ejaculate contains the highest concentration of sperm. If some part is missed please tell us on the form overleaf so that we can take this into account when evaluating the results.
4. Secure the top of the pot and keep upright to ensure there is no risk of spillage.
5. Your sample pot **MUST** be labelled with your full name, date of birth.
6. Please keep the sample warm whilst bringing it to Cherish-UK, e.g. keeping it in a pocket next to the skin will help to keep it at body temperature or using a warming device (thermos bag).

If these conditions are not fully complied with the test may not be performed as the results may be affected.

UNDER NO CIRCUMSTANCES SHOULD THE SAMPLE BE REFRIGERATED

Please fill in your details on the form below and bring this form together with your sample to Cherish-UK. The questions on the form are very personal. Answering the questions will help give a better evaluation of your semen analysis. Your results will be emailed to you once the test is complete (usually the same day), and if requested we will forward the results to your clinic.



Cherish-UK Ultrasound Scans Limited
Specialist Nurse Sonographers – Diana Ham and Jacqui Rutter
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PLEASE COMPLETE THIS FORM AND BRING IT WITH YOU TO YOUR APPOINTMENT.

Full name:.....

Address:.....

Mobile number:.....

Date of birth:.....

Email address for result to be sent to:.....

Clinic email address if applicable:.....

Sample Details:

Date collected:..... Time Collected:.....

Was the whole sample collected? YES / NO

How long since you last had intercourse (sex) or masturbated?days.

Have you suffered from any illness or infection in the last 3 months? YES / NO

I confirm that this sample was produced by myself on(date).

Please indicate below any other information which may be relevant such as:

I am a non- smoker / I smoke _____ per day

Cannabis / other recreational drug use

Steroid use or other body building supplements

Medication

Operations (vasectomy, reversal of vasectomy, hernia repair etc)

Have you previously had a semen analysis test?