


Semen Analysis Requisition

Accession # <i>(lab only)</i>

Patient	PHN		Alternate Identifier 		Date of Birth <i>(yyyy-Mon-dd)</i>	
	Last Name		First Name		Middle	Gender Male
	Address		City/Town	Prov	Postal Code	
Requestor (s)	Requestor Name <i>(last, first)</i>		Copy to <i>(last, first)</i>		Copy to <i>(last, first)</i>	
	Location/Facility/Address		Location/Facility/Address		Location/Facility/Address	
	Phone		Phone		Phone	
	Healthcare Provider ID		Healthcare Provider ID		Healthcare Provider ID	
Collection	Date <i>(yyyy-Mon-dd)</i>		Time <i>(24 hr)</i>		Date of Vasectomy <i>(if applicable)</i>	
	Was the complete sample collected? <input type="checkbox"/> Yes <input type="checkbox"/> No		Was the method of production masturbation? <input type="checkbox"/> Yes <input type="checkbox"/> No		Number of days since previous ejaculation:	

Test Request and Collection Requirements <i>(Select the Seminal Fluid Specimen Type)</i> For testing locations and important information, see Side B (back of requisition)	
<input type="checkbox"/> Fertility Screen - By appointment only <i>(If you have never had a vasectomy OR if you have had your vasectomy reversed)</i>	<input type="checkbox"/> Post-Vasectomy - Appointment may be required at select labs. See Side B (back of requisition) for details.
Collection of semen	<ul style="list-style-type: none"> Abstain/Do not ejaculate for a minimum of 2 days and a maximum of 7 days. Collect entire sample directly into the container provided. Semen sample must be complete. Report any loss of specimen. DO NOT collect in a condom DO NOT use lubricants
Sample labelling	<ul style="list-style-type: none"> Label container with patient Name, Personal Health Number and Date/Time of collection. Ensure the information on this requisition is complete.
Delivery Requirements	<ul style="list-style-type: none"> Deliver sample to Lab as soon as possible after collection and within time limit noted below. Central Zone – samples must be delivered to lab within 30 minutes of collection. North Zone and South Zone – samples must be delivered to lab within 60 minutes of collection. Some labs may have a separate area available for sample collection. <i>(Phone local lab for availability)</i> Sample MUST remain at body temperature until delivered to the laboratory. Place specimen in an inside jacket pocket to keep warm.

Date/Time Received in Laboratory: _____

North Zone	
Fertility Screen Testing <ul style="list-style-type: none"> ■ Is performed only at the location below. ■ Please book an appointment prior to sample collection. ■ Specify that the appointment is for fertility testing. 	Post-Vasectomy Testing <ul style="list-style-type: none"> ■ Is performed at North Zone hospital laboratories with the exception of the following sites: NOT performed at Swan Hills, Boyle or Elk Point ■ Please follow the directions for the specific location as noted below.
<input type="checkbox"/> QEII Hospital Laboratory (Grande Prairie) Phone: 780-538-7408 Appointment: (date/time) _____	<input type="checkbox"/> NZ Hospital Laboratories Drop sample off at hospital laboratory Monday to Friday between 8:00 a.m. and 2:00 p.m. <input type="checkbox"/> Bonnyville: By appointment only. Phone 780-826-3311, ext 3263 Specify the appointment is for post-vasectomy testing.
Central Zone	
Fertility Screen Testing <ul style="list-style-type: none"> ■ Is performed only at the location below. ■ Please book an appointment prior to sample collection at one of the two locations. ■ Specify that the appointment is for fertility testing. 	Post-Vasectomy Testing <ul style="list-style-type: none"> ■ Is performed only at the locations below. ■ Please follow the directions for the specific location as noted below.
<input type="checkbox"/> Red Deer Phone: 403-309-2847 or 1-877-309-2847 Appointment: (date/time) _____	<input type="checkbox"/> Red Deer Drop sample off at hospital laboratory Monday to Friday between 8:00 a.m. and 2:00 p.m. <input type="checkbox"/> Wetaskiwin, Drumheller, Sylvan Lake, Lacombe: By appointment only. Phone 403-309-2847 or 1-877-309-2847 <input type="checkbox"/> Other Central Zone Laboratories: Call local lab to book appointment
South Zone	
Fertility Screen Testing <ul style="list-style-type: none"> ■ Is performed only at the two locations below. ■ Please book an appointment prior to sample collection. ■ Specify that the appointment is for fertility testing. 	Post-Vasectomy Testing <ul style="list-style-type: none"> ■ Please follow the directions for the specific location as noted below.
<input type="checkbox"/> Medicine Hat Regional Hospital Laboratory Phone: 403-529-8919 (client services) <input type="checkbox"/> Chinook Regional Hospital Laboratory (Lethbridge) Phone: 403-388-6057 Appointment: (date/time) _____	<input type="checkbox"/> Medicine Hat Regional Hospital Laboratory Drop sample at hospital laboratory Monday to Friday between 8:00 a.m. and 2:00 p.m. <input type="checkbox"/> Chinook Regional Hospital Laboratory (Lethbridge) By appointment only 403-388-6057 Specify the appointment is for post-vasectomy testing. <input type="checkbox"/> Brooks, Cardston, Coaldale, Crowsnest Pass, Fort Macleod, Magrath, Milk River, Picture Butte, Pincher Creek, Raymond Drop sample at hospital laboratory Monday to Friday between 8:00 a.m. and 2:00 p.m. <input type="checkbox"/> Bassano, Bow Island, Oyen, Taber Drop sample off at hospital laboratory Monday to Thursday between 8:00a.m and 2:00 p.m.