

Semen Analysis

I. Post Vasectomy samples

The patient should ring the collection centre to arrange a suitable time to bring in the specimen

Samples may be accepted at any Collection centre. Because the specimen should be delivered to a laboratory for prompt analysis, the patient should be given a time to bring in the sample, so that the first available courier can deliver this to the laboratory

It is recommended that the post-vasectomy sample is collected when there have been at least 10 ejaculations in the previous 10 weeks

II. Fertility samples

The patient should ring the collection centre to arrange a suitable time and place to bring in the specimen. NOTE: No more than 30 minutes should elapse between collection and delivery to the collection centre as timely examination by the laboratory is required to prevent potential deterioration of the specimen.

WA Metropolitan Locations

Balga	95 Princess Road	9344 3435
Duncraig	Suite 4, 60 Arnisdale Road	9246 5800
Joondalup Health Campus	Cnr Grand Blvd and Shenton Ave	9400 9810
Mandurah – Peel Lab	110 Lakes Road	9531 8510
Midland	72 The Crescent	9274 4398
Mount Medical Centre	Suite 11, 146 Mounts Bay Road	9321 3300
Myaree	74 McCoy Street	9317 0999
Rockingham	Hunsdon House, 11 Council Avenue	9528 3013
Thornlie	Cnr. Spencer & Warton Rd	9493 2033

WA Country and NT Locations

Albany	87 - 89 Albany Highway	(08) 9841 6211
Alice Springs	CLP Building, 84 Todd Street	(08) 8952 6633
Busselton	21 Albert St	(08) 9752 2452
Darwin Private Hospital	Rocklands Drive, Tiwi	(08) 8945 2377
Kalgoorlie		
Goldfields Medical Centre, Cnr Cassidy and Egan Street		(08) 9021 4833

III. All Semen Samples

1. **PLEASE NOTE: Abstinence from ejaculation is required for at least three days prior to test.**
2. Collect the ENTIRE sample by means of masturbation. Other collection methods are not suitable as they may interfere with the test.
3. DO NOT use condoms, artificial lubricants, talcs etc., as these will interfere with the test.
4. Collect the specimen in the container provided (MSU Jar). DO NOT expose the specimen to extremes of temperature ie: DO NOT refrigerate.
5. Write your name on the label of the container, time of collection and complete the details below.
6. Deliver the sample, the request form and this form to the Collection Centre (as arranged by telephone).

SURNAME :	GIVEN NAME :
DOB :/...../.....	DATE :/...../.....
Time of ejaculation:.....(1)	Time of delivery :
(Please Circle)	Date of previous ejaculation:...../...../.....
Specimen Collection Complete: YES / NO	(Please tick applicable test)
Method of Collection was Masturbation: YES / NO	Fertility Studies <input type="checkbox"/>
Previous Semen Test: YES / NO	Post Vasectomy <input type="checkbox"/>
	Date of vasectomy operation:/...../.....
If YES, approximate date:...../...../.....	Date of vasectomy reversal:/...../.....