

BLOOD DRAW DATE

PAYMENT RECEIVED BY

PATIENT First Name: _____ Last Name: _____

Health Card No: _____ Version: _____

Date of Birth (M/D/Y): _____ Telephone: _____

Address: _____ City: _____ Postal Code: _____

Service Date (Day 1): _____ Days of Abstinence (Day 1): _____
MM DD YY

<u>Time specimen produced</u>	<u>Time specimen received</u>	<u>Specimen Number</u>
DAY 1 _____	DAY 1 _____	DAY 1 _____
DAY 2 _____	DAY 2 _____	DAY 2 _____

WIFE/PARTNER First Name: _____ Last Name: _____

Date of Birth: _____
MM DD YY

PROCEDURE: Sperm Wash Assessment Sperm Wash for Insemination Sperm Freeze

TESTING REQUIRED:

- | | |
|---|---|
| 1) Basic Semen Analysis <input type="checkbox"/> | 5) ENDTZ Test <input type="checkbox"/> |
| 2) Retrograde Ejaculation Screen <input type="checkbox"/> | 6) MAR Screen <input type="checkbox"/> |
| 3) Post-Vasectomy Screen <input type="checkbox"/> | 7) Strict Morphology <input type="checkbox"/> |
| 4) Viability Screen <input type="checkbox"/> | 8) Other: _____ |

REQUESTED BY: _____ DATE (M/D/Y): _____

NOTES FOR PATIENT:

- Sperm wash assessments may be booked by phone 3-4 weeks after blood is drawn.
- For sperm wash assessments and for day-one inseminations, it is recommended that you have 3 to 5 days of abstinence.
- All payments should be made to the respective physician. ReproMed will not process specimen unless the appropriate fee has been paid.
- Sperm samples may be produced at home or in our facility.

- Call our lab to book an appointment (416-233-8111, EXT 341). Sperm wash assessments and sperm freezes may be booked 2-3 weeks after blood is drawn.
- Maintain abstinence from ejaculation 3-5 days before your appointment, to achieve an optimal sample.
- OHIP does not cover lab fees. A fee of \$375.00 applies to Sperm Wash Assessments. Payment can be made the day of your appointment at Suite 300 (we accept VISA, M/C, AMEX, cash or debit).