A Patient’s Guide to Semen Collection

Samples may be dropped off Monday through Friday between the hours of 7 a.m. to 5 p.m.

Please follow these steps to collect a good specimen for testing:

1. Write your full name and date of birth on the provided collection cup.
2. Do not open the cup before you are ready to collect the semen.
3. Do not ejaculate for at least 2 days before collecting the sample.
4. Semen can be collected either by masturbation or withdrawal.
5. Do not collect the semen in a condom. Condoms may contain chemicals that will kill the sperm.
6. The entire sample should be ejaculated into the collection cup. The sample will not fill the cup.
7. When the sample is collected into the cup, replace the lid and tighten to prevent spills.
8. Place the cup into the zippered pocket of the biohazard bag and close the pocket.
9. Fill out the information sheet (located on the back of this form) and place into the non-zippered pocket of biohazard bag.
10. The sample and form should be brought to the laboratory as soon as possible. They must be delivered no later than 45 minutes after collection for fertility testing or 90 minutes for post-vasectomy testing.
11. The container must be kept at body temperature. Carry it against your body, close to your skin. Perhaps under your arm or inside your undergarments.

12. The sample may be dropped off Monday through Friday between the hours of 7 a.m. to 5 p.m. at one of the two locations listed below.

<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>Laboratory phone</th>
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<tbody>
<tr>
<td>Bronson Methodist Hospital</td>
<td>601 John Street, South Campus, First Floor, Kalamazoo, MI 49007</td>
<td>(269) 341-6440</td>
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<tr>
<td>Bronson Battle Creek Laboratory</td>
<td>175 College Street, Battle Creek, MI 49015</td>
<td>(269) 969-6161</td>
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Due to the need to perform testing promptly, specimens cannot be dropped off at other locations.
Semen Collection Information Sheet

The sample may be dropped off Monday through Friday between the hours of 7 a.m. to 5 p.m. at one of the two locations listed on previous page (front of this document).

Please complete the following information and include it when you bring the sample to the laboratory:

Donor Full Name: ___________________________  Date of Birth: __________________

Partner Full Name: ___________________________  Date of Birth: __________________

Date of Sample Collection: __________________

Time of Sample Collection: __________________

Days since last ejaculation: ________________

Method of Collection:  ☐ Masturbation  ☐ Withdrawal

The last two questions to be completed when taking the sample to the lab.

Entire sample collected in container?  ☐ Yes  ☐ No

Sample exposed to extreme hot or cold?  ☐ Yes  ☐ No