

Autologous Sperm Cryopreservation Requisition

Completion of * fields is mandatory - Patient's Name, HCN, Physician's first and last name and date of request.
When bringing specimens to the laboratory, date of birth and health card expiry date are also required.

BRING YOUR MCP AND HOSPITAL CARDS WHEN YOU GO FOR YOUR LAB TEST

St. John's Laboratories

<p>PATIENT INFORMATION</p> <hr/> <p>* Patient's Name as on Health Care Card</p> <hr/> <p>* Health Care Number (MCP or other Insurer)</p> <hr/> <p style="text-align: center; color: lightgrey;">DD/MONTH/YYYY</p> <p>Date of Birth</p>	<p><input type="checkbox"/> Dr. T. O'Grady OGRT</p> <p><input type="checkbox"/> Dr. S. Healey HEAS</p> <p><input type="checkbox"/> Dr. D. Murphy MURDEA</p> <p><input type="checkbox"/> Dr. S. Murphy MURSEA</p> <hr/> <p>* Practitioner's Signature _____ DD/MONTH/YYYY</p> <p style="text-align: right;">* Date of Request</p>
<p>Test Request:</p> <p>Semen for autologous sperm banking</p>	<p>Date collected: _____ DD/MONTH/YYYY Time: _____ HH:MM</p>

Lab use only:	Lab Ref (CH): _____
Freeze Sample Number 1 2 3 _____	Received by: _____
Freezer Number: P _____	Date: _____ DD/MONTH/YYYY Time: _____ HH:MM

<p>Collection Instructions</p> <p><i>*APPOINTMENT ONLY</i></p> <p>CONTACT NL Fertility Laboratory</p> <p>Telephone: 709-752-3649</p>	<ul style="list-style-type: none"> ➤ Avoid ejaculation for 2 days, but no more than 5. ➤ Do not use any condoms or lubricants for collection. ➤ It is recommended to collect the sample on-site at the Fertility Clinic in a designated specimen collection room. ➤ If collecting the sample off-site, deliver to the Fertility lab, 35 Major's Path, Suite 103. ➤ Deliver the sample within 30 minutes after collection. Keep sample as close to body temperature as possible. ➤ Label specimen container with name, MCP/HCN and date/time of collection. ➤ Your physician will give you a form to have serology bloodwork completed. This should be done prior to banking the specimen.
<p>Payment Instruction</p>	<ul style="list-style-type: none"> ➤ The Sperm banking procedure is not insurable under MCP. ➤ The cost of the procedure is \$350 which includes three years of storage. ➤ After the initial 3 years of storage period, the Eastern Health Finance Department will send you a bill for \$50 to cover the annual storage fee. This storage fee will then be charged yearly while the specimens are stored at Eastern Health's Fertility Laboratory. ➤ Patients experiencing financial hardship may contact Eastern Health Finance Department at 709-752-4761 to discuss payment options.

For more information please contact Newfoundland and Labrador Fertility Services at 709-777-7452.