

Semen Collection Information Sheet

- **Appointments are required for semen specimen drop offs**
- **Semen Specimen drop offs are only available at select locations**
- **Semen appointments cannot be booked online**

To schedule an appointment, call LifeLabs Customer Care Centre to arrange a time, date, and a drop-off location for your specimen:

Ontario (ON)	British Columbia (BC)
1-877-849-3637	1-855-412-4495

Notes: If this is a repeat collection due to transportation or delay issues, please inform the booking agent. For post vasectomy, it is recommended that the first post vasectomy semen sample be collected after at least 12 ejaculations and 8-16 weeks post vasectomy. Specimens must be delivered to the designated Patient Service Centre no later than **30 minutes after collection**. If your appointment is at the on-site collection center, do not collect your sample prior to your appointment time.

Collection Instruction for Seminal Fluid

1. **Abstain** from sex or masturbation for a minimum of 2 days to a maximum of 7 days.
2. Using only the container provided, produce specimen by masturbation. Ensure to collect the entire ejaculate directly into the container.

Note: Specimen containers, other than that which is provided, are unacceptable for collection and will be rejected.

Do not use a sheath/condom or lubricants for collection, as they are harmful to sperm.

If a portion of the specimen is lost, the sample should be discarded. A new collection should be attempted at a later date and using a new kit.

3. Ensure the lid is on properly and tightly closed.
4. **Clearly label the container** with your full name and date of birth or health card number.
5. Specimens must be kept at body temperature by carrying it close to the body until dropped off at a LifeLabs location.
6. When you arrive at the Patient Service Centre, go directly to the front desk, and tell the staff you have an appointment to drop off a time-sensitive specimen.

Complete all the information requested below:

Date of Collection:		Time of Collection:	
Choose one: <input type="checkbox"/> Post Vasectomy. Date of Vasectomy:			
<input type="checkbox"/> Fertility Testing			
Patient's Name (as it appears on the Health Card):			
Health Card Number or Date of Birth:			
Number of days since last ejaculation prior to specimen collection:			
Method of Collection: <input type="checkbox"/> Masturbation <input type="checkbox"/> Other (specify):			Complete sample? <input type="checkbox"/> Yes <input type="checkbox"/> No
Collection/Transportation Issues (specify):			
Lab Use Only	Time of receipt:		Time of analysis: