



Seattle Reproductive Medicine®

A N I N T E G R A M E D® A F F I L I A T E

Postcoital Test

The postcoital test (PCT) is a test to evaluate 1) the quality of the cervical mucus just prior to ovulation and 2) the presence and motility (movement) of sperm within the mucus (sperm-mucus interaction). This test may or may not be recommended as part of your routine infertility evaluation, depending on your diagnosis and treatment plan. It is primarily used for couples who are attempting conception with timed intercourse rather than intrauterine insemination (IUI) or in vitro fertilization.

Throughout most of the menstrual cycle, the cervical mucus serves as an immunological and physical barrier to foreign substances (such as bacteria) to the sterile inner cavity of the uterus. Prior to ovulation, high levels of estradiol secreted by the ovary result in a distinct change in the character of the cervical mucus-it becomes thinner, clear, is produced in a greater quantity, and has fewer cells. This change in mucus character allows the sperm to swim up into the cervix, uterus, and tubes only during the few days around ovulation. Certain situations might pre-dispose to decreased quantity or quality of mucus, including:

- Previous surgical removal of a portion of the cervix and mucus glands (e.g., cone biopsy)
- Abnormality in the shape or size of the cervix from birth
- Use of clomiphene citrate (in a small percentage of patients)
- Chronic cervical infection
- Immunological reaction against sperm (antisperm antibodies)-this is a rare cause of infertility where an immune response against the sperm causes sperm to be killed or become immobilized

A PCT is performed 2 to 18 hours after intercourse, just prior to ovulation. At the time of your examination, a small, soft plastic tube will be inserted into your cervix and a sample of cervical mucus will be removed. The cervical mucus will then be examined under the microscope and the mucus and number of motile or moving sperm will be evaluated. A PCT can only be expected to be normal during the few days around ovulation (2 to 3 days before up until the day after the LH surge). Falsely abnormal PCT's are common, usually due to poor timing, limiting the usefulness of the test. However, a normal PCT provides useful, reassuring information about the cervical mucus and sperm.

Scheduling a PCT

- If your cycles are very regular, you may schedule the PCT 15 to 17 days prior to the expected period.
- You may schedule the PCT the day after detection of a positive urine LH surge with an ovulation predictor kit (OPK). This method improves the precision of timing and reduces the possibility that the PCT will need to be repeated.
- Call SRM at (877) 777-6002 to schedule your PCT. If using the OPK, please test daily between 12:00 and 4:00 in the afternoon; if positive, call before 4:30 p.m. to schedule your test for the following day.
- To schedule a PCT on a weekend or holiday, you leave a message on the clinic voice mail by 6:30 a.m. on the day you need your PCT. A staff member will call you back by 8:00 a.m. to give you an appointment time.
- Intercourse should occur between 2 and 18 hours prior to your scheduled appointment time (ideally, 8 to 12 hours).