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Patient's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Today's Date \_\_\_\_\_

Name of Patient Completing Semen Collection \_\_\_\_\_ Birth Date \_\_\_\_\_ Patient's Phone \_\_\_\_\_  
(if applicable)

### General Services

Infertility  RPL  Egg Freezing  Fertility Assessment  PCOS  Fertility Preservation **Cancer Dx:** \_\_\_\_\_

**Patient instructions:** Please call SRM to schedule a New Patient Visit.

### Andrology Diagnostic Services

Name of Patient Completing Semen Analysis is Required: \_\_\_\_\_

Semen Analysis  IUI Only - Intrauterine Insemination

**Intrauterine Insemination Services (IUI):** Brief appointment prior to IUI is required.

**Semen Analysis Patient instructions:** Please call SRM to schedule your appt. Patient should abstain from ejaculation for 2-5 days prior to the test.

**Semen Analysis with Phone Consult:** Includes phone consultation to go over results with Advanced Practice Provider. Required appointment, additional \$35 billed at time of service. Not billable to insurance.

### Hysterosalpingogram Referral Services

Please perform an HSG on my patient.

Reason for testing:

Tubes open  Uterine cavity normal  Recurrent miscarriage  
 Other, please detail \_\_\_\_\_

Please provide the following information to help us take care of your patients:

Gravidity \_\_\_\_\_ Parity \_\_\_\_\_ Age \_\_\_\_\_ Allergic to iodine/contrast  Yes  No  
History of PID  Yes  No Prophylactic antibiotics  Yes  No  
Pertinent Medical History (include surgeries): \_\_\_\_\_  
Diagnosis Code: \_\_\_\_\_

**Patient Instructions:** Call SRM to schedule HSG on first day of your cycle. Test generally occurs between day 6-12 of your cycle or anytime if you are on birth control pills.

### REFERRING PROVIDER

Name \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Address \_\_\_\_\_

**Referring Office Instructions:** Please fax referral request and attach patient demographic details to SRM at 206-301-5679, retain a copy for your records and give original to patient.

# Patient Guide for Semen Analysis

## **What is a semen analysis?**

The semen analysis is a microscopic examination of semen. A variety of parameters are assessed including concentration (number of sperm), motility, and morphology (shape). Values frequently fluctuate, and result interpretation will require your provider's input. Persistent abnormalities may require additional testing or consultation with an urologist.

## **Scheduling:**

To schedule your appointment, please call 206-301-5000 or toll free at 877-777-6002 for all locations. Phone Consultation appt. will be scheduled 2-5 days after the semen analysis.

## **Prior to Your Appointment:**

For the most accurate test results, abstain from ejaculation for 2-5 days, refrain from using a hot tub or sauna for at least 3 weeks, and wait 3 months if you had a recent fever.

## **The Day of Your Appointment:**

- You must present a government issued picture ID at your appointment.
- Masturbation is the recommended method of collection. Lubricants, saliva or vaginal secretions may interfere with test results.
- You will be directed to a dedicated private collection room for your test. A specimen cup and label for the sample will be provided.

## **Phone Consultation Following Your Appointment:**

You will have a short phone consultation 2-5 days after your appointment with one of our Advanced Practice Providers to go over your results and next steps. This information will then be sent to your referring provider.

# Patient Guide for Hysterosalpingogram (HSG)

## **What is an HSG?**

A hysterosalpingogram (HSG) is a radiographic test to evaluate both the fallopian tubes and the uterine cavity. A small amount of sterile, iodine containing fluid is injected through a small catheter that has been connected to the cervix. Intermittent exposures will be taken as the iodine solution fills the uterus and flows through the fallopian tubes. If you are allergic to iodine or contrast, please let your provider know as it is recommended to take 25 to 50 mg of Benadryl prior to the procedure. In most cases, this test takes only a few minutes to perform. The most common complaint with this test or contrast is mild to moderate discomfort and cramping.

## **Patient Instructions:**

HSG's are performed by provider referral only. SRM must receive a copy of the patient's written referral prior to scheduling an appointment. Referrals can be faxed to: 206-301-5679.

## **Scheduling:**

To schedule an HSG please call SRM at 206-301-5000 or toll free at 877-777-6002 on the FIRST day of your menstrual period. These tests should be performed after you are done bleeding, but before ovulation (generally days 6-12 of your cycle) or anytime if you are on birth control pills.

## **The Day of Your Procedure:**

You may eat and drink normally on the day of your procedure. We recommend that you take over-the-counter ibuprofen 800mg approximately 1-2 hours prior to the procedure in order to decrease cramping. The procedure takes approximately 15 minutes, but plan to be at SRM for up to 60 minutes to allow for check-in and recovery. Most of the time, you will be able to drive yourself home or back to work after the uterine evaluation appointment. However, some patients may experience temporary light-headedness, nausea, or persistent cramping. In these cases a longer recovery time may be needed before you are able to drive. For this reason, when possible, you may want to have someone come with you to the appointment. However, please note that partners are not allowed in the room during the actual procedure.

## **After Your Procedure:**

Complications of HSG are very uncommon. However, rare cases of infection can occur. It's important that you notify SRM immediately if you develop any of the following symptoms over the several days following your appointment:

- Fever (temperature greater than 100.5° degrees Fahrenheit).
- Flu-like symptoms associated with pelvic pain.
- Severe or progressive pelvic pain.
- Heavy vaginal bleeding (saturating a pad)