

Referral proforma for diagnostic or post vasectomy semen analysis

Patient's details: (please print or apply patient ID st	icker)	PRIVATE NHS (please select)	
Surname:	NHS No:		
Forename:	Hosp No:	Hosp No:	
Address:	Date of birth:		
Postcode:			
Partner's details (if applicable):			
Surname:	DOB:		
Forename:			
Referring clinician's details: (please print or apply	stamp ensurin	ng name and address are clear)	
Name:			
Surgery address:			
Surgery Tel:	Surgery Fax:	Surgery Fax:	
Clinician's Signature:	Referral Date	Referral Date:	
Copies to:			
☐ Other (Please state) Type of analysis required: ☐ Diagnostic Semen A		□ Post Vasectomy Semen Analysis Date of Vasectomy	
Other special or specific tests required: (please s	elect)		
Antisperm Antibody	·		
☐ Retrograde Analysis (patient must notify CIVF w ☐ *DNA Fragmentation (patient must notify CIVF w	_	• • •	
Has your patient ever tested positive for <u>Hepatitis B</u> , <u>He</u>	patitis C or HI	<u>V</u> ? If yes, please state:	
Relevant condition / medication: (please state)			
Please complete this section after you have prod	uced your sa	mple:	
Please complete this section after you have prod Sample produced on: dd / mm / yyyy	-	<i>mple:</i> mple: <u>hh:mm</u>	
	Time of sa	•	

- To book your appointment please call 01223 349010 option 2
- 2. Please arrive on time for your appointment
- 3. Bring this **form with you** to your appointment
- 4. Samples produced at home must be delivered within **45 minutes** (using a pot we supply and accompanied with photo ID)
- 5. Abstain from sex or masturbation for at least **2 days (48 hours)** and no more than **5 days** prior to your visit
- 6. If you arrive late, without an appointment or without your referral form we will not be able to see you
- 7. Test results will be sent to your referrer, please allow **10** working days before phoning your referrer.

In Use: 29/01/2024



Finding Cambridge IVF in Trumpington

Please note that Cambridge IVF is not located on the main CUH Campus.

Cambridge IVF is located in Trumpington (off-site from the main Addenbrooke's Hospital) with free parking for patients. Please park in one of the yellow bays outside Kefford House marked with a 'K'.

Finding Cambridge IVF at Ipswich Hospital

The Ipswich Andrology Service is located in the Central Zone, in the Gynaecology Clinic on the 1st floor. This is clearly signposted. A map of the hospital is available online, please see https://www.esneft.nhs.uk/your-visit/getting-here/ipswich-hospital/. Please park in car park G. Please note that parking charges apply (pay and display). Your appointment should not last longer than one hour.

Finding Cambridge IVF in Peterborough

The Peterborough Andrology Service is located in the Women's & Children's Unit (Peterborough City Hospital) - A map of the hospital is available online, please see https://www.nwangliaft.nhs.uk/peterborough-city-hospital/. Please note that parking charges apply (pay and display). Your appointment should not last longer than one hour.

Please report to Women's Health Outpatients

If you require any further information regarding the clinic and available treatments please contact us on 01223 349010 or e-mail us at enquiries@cambridgeivf.org.uk. Visit our website at www.cambridge-ivf.org.uk.

Cambridge Andrology Laboratory	Ipswich Andrology Laboratory	Peterborough Andrology Laboratory
Cambridge IVF at KEFFORD HOUSE Maris Lane Trumpington Cambridge CB2 9LG	Ipswich Hospital Heath Road Ipswich Suffolk IP4 5PD	Women's & Children's Unit, Peterborough City Hospital - Edith Cavell Campus Bretton Gate, Peterborough PE3 9GZ
☎ 01223 349010 (option 2)	☎ 01223 349010 (option 2)	☎ 01223 349010 (option 2)

Please treat our staff with respect and dignity during your appointment

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