

# Hampshire Hospitals

NHS Foundation Trust

Haematology Department  
Royal Hampshire County Hospital  
Romsey Road  
Winchester  
Hampshire  
SO22 5DG

Tel: 01962 824289

Referral for Semen Analysis – do not use for post vasectomy requests

**TO BE COMPLETED BY THE GP/CONSULTANT:**

PATIENT DETAILS:		REQUESTED BY:	
Surname		GP/ Consultant	
Forename		Practice/Clinic	
NHS No.		GP/ Consultant Tel No.	
Hospital No. (if known)		Copy to:	
Date of Birth		GP/ Consultant	
TEL. No.		Practice name/Clinic	
Address		Clinical details	
Partner's name and DOB		Investigation required	Fertility/Vasectomy reversal (delete as appropriate)
Clinician's signature		Date	

**PATIENTS:**

Telephone the Haematology Department on 01962 824289, to book a drop off time for analysis. Semen analysis drop off times are available on Tuesday and Wednesday mornings from 9.00am to 11.30am.

Samples **MUST** be labelled with your full name, date of birth, and the date and time that the sample was produced.

**TO BE COMPLETED BY THE PATIENT:**

Abstained (days)	
Complete ejaculation collected	YES/NO (delete as appropriate)
Sample produced	Date Time
Sample received	Date Time
Patient's signature	