

Melanie R. Freeman, Ph.D., HCLD/CC (ABB) **Medical Laboratory Director**

345 23rd Avenue N, Ste. 401, Nashville, TN 37203 Phone: (615)321-4740 Fax:(615)320-0240

1725 Medical Center Pkwy, Ste. 200, Murfreesboro, TN, 37129 Phone: (615)321-4740 Fax:(615)546-4496

LABORATORY SERVICES REQUEST FORM

Lab use only:
Acc#:

Doctor's Office Instructions:

- 1. Please complete the patient information; include Referring Physician's name and Fax number to receive test results (Section #1)
- 2. Check the tests/services requested (Section #2), and Diagnosis code (Section #3)
- 3. The Physician or his/her delegate must sign the form
- 4. Fax the completed Laboratory Services Request Form to our office (615-320-0240).

·	l our office to schedule an app	ointment (615-321-4740)).
		FAX #:	
Appointment Date:			(to receive results)
ASSAYS / SERVICES REQ	<u>UESTED</u> (Type of specimen	required)	<u>Cost</u>
ANDROLOGY TESTS:	Semen Analysis, comple	te (SA) (semen)	\$147
	Antisperm-Antibody Test	: (<u>SERUM</u>)	\$132
	Semen culture (semen) ((Ques	This test will be sent to 0 twill bill patient's insura	
ANDROLOGY PROCEDUR	ES:		
	Sperm cryopreservation (see +SA, complete (required) (see		\$515
Reason for sperm cr	ryo:	(Cancer	pt, vasectomy, military, etc)
	_ Sperm storage for 1 year		\$500
	_ Sperm isolation, simple (wa	ash for IUI)	\$252
			ertility, MaleN46.01 Infertility, Azoospermia
	<u>S</u> :	-	
and payment will be required We will Fax the pation Your office for review of the A	d at the time of service. Prices ent's test results to your office	are subject to change. within 7 business days. vish the patient to consu	Alth plans. All others will NOT be filed Your patient will be referred back to alt with one of Nashville Fertility Cente or an appointment.
Provider/ Delegate Signature	 9	 Date	_

Do not file this form in chart. Return to Ovation Fertility Laboratory

Patient Instructions

Welcome to Ovation Fertility

Your Physician has referred you to the Ovation Fertility Laboratory for testing. Please call our office to schedule an appointment for this test (615-321-4740). For any test on semen (semen analysis, semen culture, or sperm cryopreservation), abstinence from ejaculation for a period between <u>2 to 5 days</u> before your appointment date is required for accurate test results.

When you arrive for your appointment, you will be given some forms to fill out and will be shown to a private collection room. The lab will give you instructions. After collection, you will check out at the front desk. Payment is required at the time of service.

We will Fax your test results to the referring physician's office within 7 **working** days. You will be referred back to his/her office for review of the Andrology test results. If you wish to consult with one of Nashville Fertility Center's physicians concerning your laboratory results, <u>after obtaining the results from your physician</u>, please contact NFC for an appointment (615-321-4740).

Address, Phone numbers and Parking

Nashville Office

345 23rd Ave North, Suite 401, Nashville, TN 37203. Phone: **(615)321-4740** Fax: **(615)320-0240**

The parking garage is located directly across 23rd Avenue North from our building which is called, "Centennial Professional Plaza". Parking is free. Take the garage elevator to the 3rd floor and then take the overhead crosswalk to the building. You will be on the 2nd floor when you reach the building. Take the building elevator to the 4th floor. The Ovation Fertility Lab is within the Nashville Fertility Center suite.

Murfreesboro Office

1725 Medical Center Pkwy, Suite 200, Murfreesboro, TN 37129

Phone: (615)321-4740 Fax: (615)320-0240

From Medical Center Parkway, turn south onto Arnhart Drive and then take the first right into the parking lot of Gateway Medical Plaza. Our office is on the second floor in Gateway Medical Plaza II.