

Questions for the man

Surname _____

Height _____

First name _____

Weight _____

Date of Birth _____

Occupation _____

Address: _____

Fertility-clinic: _____

Do you smoke?

If yes, how many cigarettes do you smoke per day?

If yes, how many years have you been smoking?

If no, have you ever smoked?

If yes, how many cigarettes did you smoke per day?

If yes, how many years did you smoke?

Do you drink alcohol?

If yes, how many units per week do you drink?

Do you have a special diet?

If yes, what diet are you on?

If yes, what reason are you on a special diet?

For how long?

Are you vegan or vegetarian?

General health

Have you had any allergies?

If yes, what are they?

Have you had any surgery in the past?

If yes, what and when?

Are you on any long-term medication?

If yes, give details

Have you had any illnesses or operations in the past?

Please indicate (with dates) any prescribed medication you have taken during the last 2 years (not including assisted fertility treatment).

Have you ever had any of the following (answer yes or no to each)

- HIV
- Hepatitis B/C
- Asthma
- High blood pressure
- Herpes
- Colitis
- Cystitis
- Thyroid problems
- Diabetes

- undescended testicle(s)
- surgery for hernia
- surgery for prostate problems
- testicular surgery
- testicular tumor
- varicocele
- mumps
- vasectomy
- vasectomy reversal
- Radiotherapy
- Chemotherapy
- inflammation of the testicle or epididymis

If you have had any of the above, are they recurrent?

Sexual history

Do you have any sexual problems?

Are you able to produce a semen sample by masturbation?

Are you aware of any history of genetic/hereditary illness in your family?

Fertility investigation

Have you ever been diagnosed with a sperm problem?

Have you ever been advised to have a testicular biopsy?

Have you ever been advised to have a male hormone test?

Do you have a prostate problem?

Do you have erectile dysfunction?

Do you have an impotence problem?

Semen analysis

If you have had any semen analysis, list the details below.

Date

Volume (ml)

Count (in millions)

Motility (%)

Forward progression (A)

Progression (A+B)

Abnormal form (%)

For a couple who have had a long history of infertility, the following results may be quite important:

DNA fragmentation index (%)

High DNA sustainability (%)