

NHS number: _____
 Name: _____
 Address: _____

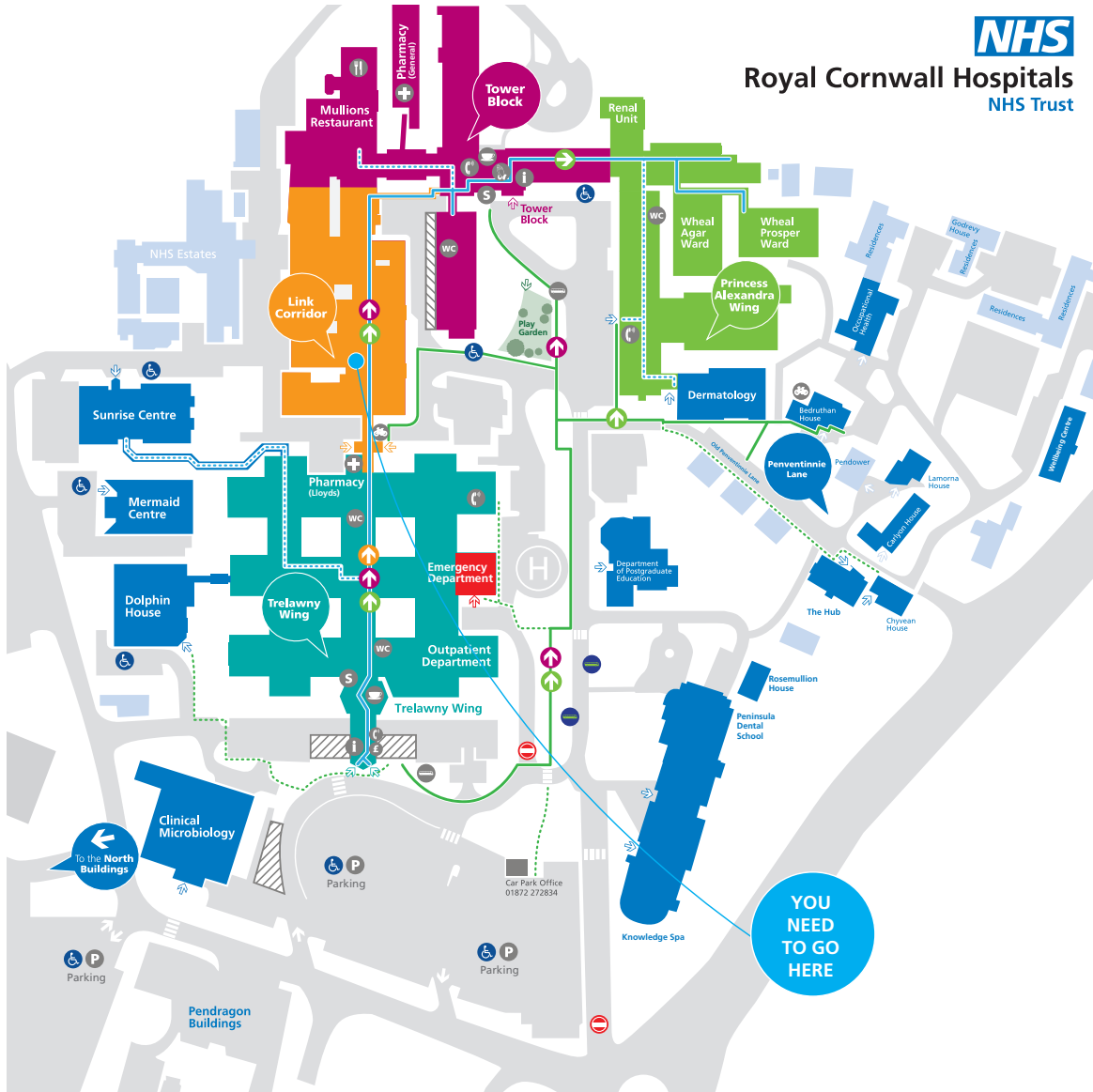
 Date of birth: _____
 CR number: _____

Affix patient label

Post vasectomy request form - Including patient information

Requestor information	
Requesting GP / Clinician:	Location:
Patient details	
NHS number: Surname: Forename: Date of birth:	Address:
Procedure information	
Date of procedure (vasectomy):	
Date of sample production :	
Time of production:	
Number of post-surgery ejaculations - (guidelines recommend a minimum of 20)	
Days since the last ejaculation:	
Did you collect the entire sample into the container?	Yes <input type="checkbox"/> No <input type="checkbox"/> If no reason for failure to collect entire sample:
Sample number (please tick relevant box)	1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> Other <input type="checkbox"/>
Number of weeks post-surgery - (please tick relevant box)	12 weeks <input type="checkbox"/> 14 weeks <input type="checkbox"/> 16 weeks <input type="checkbox"/> 20 weeks <input type="checkbox"/> 4 weeks later (if required) <input type="checkbox"/>
Have you completed ALL details on this form; added one of the labels provided to this request and another to your sample together with the date and time of collection.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you avoided Intercourse (or masturbation) for at least two days (but no longer than seven days) before collecting your sample	Yes <input type="checkbox"/> No <input type="checkbox"/> If no, how many days since your last ejaculation: _____
Please sign to confirm that all the details are correct on this form and your sample	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please sign to confirm your sample may be used for internal quality control.	SIGN HERE

NHS Royal Cornwall Hospitals NHS Trust



YOU NEED TO GO HERE

- | | | | | | |
|------------|------------------|-------------------------|---|---------------|---|
| Key | Restaurant | Toilets & Baby Changing | Bus Stop | Routes | Recommended internal route through the hospital |
| | Refreshments | Barclays Bank + ATM | Park & Ride Bus Stop | | Internal routes to departments |
| | Public Telephone | Shop | Chapel | | Recommended external route through the hospital |
| | Information | Entrances | Voluntary car services drop off & pick up | | External routes to departments |
| | Parking | No Entry | | | |
| | Disabled Parking | Pharmacy | | | |

- | | | | |
|----------|---|-----------|--|
| 2 | Trelawny Wing | 5 | Tower Block |
| | Trelawny Floor 2
Critical Care Unit
Pendennis Ward
South Crofty Ward
St Mawes Unit
Surgical Unit Reception
Theatre Direct
Trauma Unit
Wheal Coates Ward | | Tower Floor 5
The Children's Unit |
| 1 | Trelawny Floor 1
Acute Cardiac Unit
Diabetic Foot Clinic
Fracture Clinic
General Office & PALS
Grenville Ward
Medical Admissions Unit
Neurophysiology
Outpatient Department
Rheumatology Unit
Roskear Ward
Wellington Ward | 4 | Tower Floor 4
Gwithian Unit
Tolguis Ward |
| G | Trelawny Ground Floor
Acute GP Service
Audiology & ENT
DVT Clinic
Headland Unit
Newlyn Unit
Oral, Facial & Orthodontics
Scanning Unit
X-Ray (Trelawny) | 3 | Tower Floor 3
Poldark Ward (FAU)
Surgical Admissions Lounge |
| | Link Corridor | 2 | Tower Floor 2
Clinical Sciences
Pre-op Assessments
Stoma Care
Surgical Unit |
| | Bereavement Services
Cardiac Department
Haematology Clinic
Haematology Lab
Lowen Ward
Pharmacy (Lloyds) | 1 | Tower Floor 1
Carnkie Ward
Chapel & Prayer Rooms
Endoscopy Unit
Spiritual & Pastoral Care Service
Voluntary Services & Friends of RCH
X-Ray (Tower) |
| | Penventinnie Lane | G | Tower Ground Floor
Mullions Restaurant
Pain Clinic
Pharmacy (General)
Phoenix Ward
The Eye Unit |
| | Bedruthan House
Carlyon House
Dermatology Unit
Lamorna House
Occupational Health
Residences
The Hub
Wellbeing Centre | LG | Tower Lower Ground Floor
Medical Physics
MRI Department
Nuclear Medicine |
| | North Buildings | | Princess Alexandra Wing |
| | Child & Family Unit
Cornwall Mobility Centre
Diabetes and Endocrine Centre
Kedhlow Building | | 2
PAW Floor 2
Therapy Department |
| | | | 1
PAW Floor 1
Delivery Suite
NeoNatal (NNU)
Wheal Fortune Ward |
| | | | G
PAW Ground Floor
Day Assessment Unit
Gynaecology & Antenatal Clinics
Kernowflex Office
Renal Unit
Wheal Agar Ward
Wheal Prosper Ward
Wheal Rose Ward
Wheal Unity |
| | | | Dolphin House |
| | | | Hydrotherapy
Child Development |
| | | | Mermaid Centre |
| | | | Mammography Unit |
| | | | Sunrise Centre |
| | | | Oncology |

affix patient label