
Men's Fertility History

Name _____ Birth date of husband/partner _____

Present Age _____ Present Weight _____ Height _____

How long have you and your partner been trying to conceive?

How would you define your sexual energy? No Yes

Do you have any history of the following?

Prostatitis No Yes

Epididymitis No Yes

Orchitis No Yes

Previous vasectomy No Yes

Testicular tumor No Yes

Injury to testes No Yes

Undescended testicles No Yes

Gonorrhea No Yes

Chlamydia No Yes

Syphilis No Yes

Nonspecific urethritis No Yes

Difficulty with erection No Yes

Difficulty with ejaculation No Yes

Exposure to radiation No Yes

Exposure to chemicals No Yes

Exposure to substances No Yes

How much caffeine does your partner drink per day? _____ cups

How much cigarettes does your partner smoke per day? _____ for how long? _____ years

How much alcohol does your partner drink per week? _____ what kind _____

Have you had a fertile workup? No Yes

If yes, what is your sperm count? Below normal Normal Number _____

What is the sperm motility? Below normal Normal Notes _____

What was the sperm morphology? Abnormal Normal Notes _____

**Tang Acupuncture
Acupuncture and Chinese Medicine**

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List all significant **medical illnesses and surgical procedures** which you have experienced

List current **medications**: State the name of the drug, reason partner is taking it, and for how long?

| Medication | Reason | Duration/Last time taken |
|------------|--------|--------------------------|
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I understand that I should be evaluated by a physician for the condition I am requesting consultation. The diagnosis and treatment plan I will be given by Tang Acupuncture is based on Traditional Chinese medical principles and natural treatment only, and does not constitute a western medical diagnosis. I understand that I am not to rely on Traditional Chinese diagnosis and treatment as my sole remedy for the treatment I am seeking. I understand if no substantial improvement is made in the condition for which I am seeking consultation, I am to seek advice from a western medical doctor. Further, if I am concurrently undergoing western medical treatments, it is my responsibility to advise my physician of any herbal supplements I am concurrently taking.

Signature

Date