

TEST NAME	RESULT	UNIT	REFERENCE RANGE
<u>Examination of Seminal Fluid</u>			
Colour	Greyish White opalescent		GREYISH WHITE
Volume	6.0	ml	> 1.5
Method of Production	Masterbation		
Reaction	Alkaline 8.0		> 7.2
Viscosity	Hyper Viscous		
Sperm Concentration	7100000	/ml	>/=15,000,000
Total Count	42600000	/Ejaculation	>/= 39,000,000
Liquified after	Prolonged	Min	15 - 60
Sperm Vitality	30	%	Up to 40
Total MOTILITY	10	%	>/=40
<u>SPERM TYPE OF MOTILITY</u>			
a- Rapid Progressive	3	%	>/=32
b-Slow Progressive	2	%	
c-Non progressive motility (NP)	5	%	
d-Immotile (IM)	90	%	
<u>ABNORMAL FORMS</u>			
Total Abnormal Forms	40	%	<=70
a-Abnormal Head Forms	15	%	
b-Abnormal Neck	15	%	
c-Abnormal Tail	10	%	
Round Cells	6-8	/H.P.F.	0-5
Red Blood Cells	2-4	/H.P.F.	0-5

Comment : Endocrine work up (FSH, LH, Testosterone) is recommended.

Asthenozoospermia

Sperm count is not susceptible to accurate measurement due to incomplete liquefaction of the semen sample .

Alphaglucosidase is recommended, Endocrine work up (FSH, LH, Free Testosterone) is recommended

PELVIS AND SCROTAL DUPLEX SCANNING REVEALED :-

- Both testicles are small in size, more of the left testis (atrophied), displaying uniform texture. No evidence of any focal lesions or cystic changes within the testicular stroma.
- Normal vascularity of the scrotal stroma bilaterally.
- Right testis = $3.8 \times 2.3 \times 1.9\text{cm}$ (volume 8.3cc). Left testis measured $3.1 \times 2.2 \times 1.6\text{cm}$ (volume 5.5cc).
- Average dimension of pampiniform plexus of veins on right side (1 – 1.3mm) with no reflux detected.
- Mild dilatation of the pampiniform plexus of veins on left side (2.1 – 2.7mm) with augmentation and reversal of flow detected on straining.
- Normal appearance of both epididymi apart from small right epididymal head 3mm cyst.
- No evidence of significant vaginal hydrocele on either side.
- Suboptimally filled urinary bladder with no gross masses or typical calculi.
- Average sized prostate (12 grams)

Opinion: -

Mild left sided varicocele with significant reflux and atrophic changes of both testis, more of the left testis.





