

TESTING LABORATORY:
 MEDICAL ELECTRONIC SYSTEMS
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LABORATORY DIRECTOR:
 DR. WILLIAM ROUDEBUSH, PHD, HCLD
 CLIA ID NUMBER: 05D2315673
 CAP NUMBER: 9710818

SEmen ANALYSIS TEST REPORT

ORDER INFORMATION

ORDER ID:	MES-101423	TRANSPORT KIT ID:	1000001517
ORDERING PHYSICIAN:	Dr.Michael J Bauer,MD	PHYSICIAN LICENCE:	1346417086
PHYSICIAN PHONE:	8482566315	PHYSICIAN E-MAIL:	contact@mate.health

PATIENT INFORMATION

FIRST NAME:	Islam	LAST NAME:	Abdelmawla
PATIENT ID:	1752116199845	BIRTH DATE:	3/31/1990
PATIENT AGE:	35	PATIENT SEX:	MALE

SAMPLE INFORMATION

SAMPLE ID:	NA	TEST RUN BY:	Administrator
TEST TYPE:	POST VASECTOMY	APPEARANCE:	Clear/White/Grey
COLLECTED DATE / TIME:	7/22/2025 06:00	VISCOSITY:	NA
RECEIVED DATE / TIME:	7/23/2025 09:42	LIQUEFACTION:	NA
TEST DATE / TIME:	7/23/2025 10:00	CRITERIA:	WHO 6TH
OPTIONS:	MANUAL / RAW	OPTIONAL 1:	NA
ABSTINENCE (days):	NA	OPTIONAL 2:	NA

PARAMETER	RESULT	REF. VALUE	STATUS
VOLUME (ml):	3.90	>= 1.4	
MOTILE SPERM (M/ml):	2.203		
IMMOTILE SPERM (M/ml):	0.000		
TOTAL SPERM (M/ml):	2.203		
# MOTILE SPERM/VOL. (M):	8.592		
# IMMOTILE SPERM/VOL. (M):	0.000		
# TOTAL SPERM/VOL. (M):	8.592		

COMMENTS:

ADDITIONAL DATA

OPTIONAL INPUT 1:	Gross amount of sperm seen. Full Semen analysis recommended.
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REPORT CONTINUED | PATIENT ID: 1752116199845 | TEST DATE / TIME: 7/23/2025 10:00

CAPTURED IMAGES**RESULT**

IMAGES CAPTURED:

4

VIDEOS CAPTURED:

1

