

PREREQUISITE LABORATORY CHECKLIST FOR RECIPIENTS

Female Partner Blood Work:

- *HIV I & II
- *Hepatitis B Surface Antigen
- *Hepatitis C Antibody
- *VDRL/ RPR

Annual tests:

Prolactin
Thyroid Function
CBC with Differential

One-time tests:

Blood Type/ Rh
Rubella Titer
Varicella Titer

Cervical Cultures:

- *Chlamydia
 - *Gonorrhea
- Pap Smear (annual test)

Uterine Evaluations:

Annual tests: Saline Infusion Sonogram (SIS) or
Mid-cycle ultrasound or
HSG

One-time test: Sounding/Trial Transfer (must be
done at Cornell)

Additional Testing:

Mammogram (for age 40 and above)

Male Partner Blood Work:

- *HIV I & II
- *Hepatitis B Surface Antigen
- *Hepatitis C Antibody
- *VDRL/ RPR

Genetic Testing- Expanded Pan-Ethnic Panel (280 disorders) through Mt. Sinai.

- Additional testing for CBC and Hemoglobin Electrophoresis will also be included

Semen Analysis

*- done initially as requirement prior to procedures and repeated at the time of match

These testing can be done at CRM or an outside facility and be current within the year unless otherwise noted.

If tests are done at an outside facility, please ask that the reports be sent to you. Please take personal responsibility to fax or mail the results. Results should be faxed to (646) 962-0362.