



# Insemination Kit



1. Warm up the GM501 SpermAir vial to 37 °C.
2. Remove metal cap from the stopper and disinfect the stopper's surface with isopropylalcohol (70%).
3. Insert the enclosed short cannula through the stopper. (It serves as a pressure balance valve).
4. Aspirate liquefied, analysed ejaculate into an enclosed 2 ml syringe and attach a long cannula.
5. Hold the syringe with its tip upwards to collect air in the upper part of the syringe and press it out.
6. Insert the syringe's cannula (tip downwards) through the vial's stopper until the tip touches the bottom of the vial.
7. Now release the ejaculate slowly and carefully by depressing the syringe and let it suspend under the preparation medium without mixing the two liquids.
8. Remove the syringe with the cannula carefully while leading the tip along the inner wall of the vial. Discard the syringe and the cannula.
9. Now carefully place the vial's neck into the rack's fork and store the vial at 37 °C in an incubator (no CO<sub>2</sub>) or in a warming cabinet for least 45 minute and not longer than 3 hours.
10. At the appropriate time carefully take the vial out and turn it upright. Attach a fresh long cannula on the tip of a fresh 2 ml syringe, aspirate 1ml of air and insert it again through the disinfected stopper.
11. Aspirate 0.5 to 1.0 ml of the upper media layer and remove the syringe with the cannula. The syringe now contains the SpermAir fraction with the isolated motile sperms. Until the insemination procedure place the syringe with the cannula with the attached protection cap of the cannula in a incubator (no CO<sub>2</sub>)/ warming cabinet at 37 °C.
12. To inseminate remove the cannula from the syringe and attach the enclosed IUI-catheter to the tip of the syringe.
13. The position assistance is adjusted corresponding to the anatomical proportions determined before.
14. The catheter is inserted until the assistance is positioned on the outer uterine orifice.
15. As soon as the requested position has been reached, the catheter will be turned, so that the marks on the grip are lying visible on top. In this way both of the lateral openings at the very end of the catheter are lined up towards the applicators orifice.
16. The suspension with the spermatozoa is injected slowly into the cave uteri.
17. Finally the catheter is slowly extracted out of the uterus.

## Advice

If the sperm is not liquefied sufficiently 30 minutes after ejaculation, liquefy it by aspirating it into a sterile disposable syringe (2 or 5 ml) and flushing it out several times.

Before doing this, let disturbing rude particles sediment and do not aspirate them into the syringe.

It is recommended that the sperm concentration is analysed prior to insemination. At least 2 million grade A spermatozoa should be present. An insemination with lower than 0.5 million/ml motil spermatozoa is not recommended.

If performed optimally, the sperm suspension should contains no or very few immotile spermatozoa.

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