

## AQUA 19: DIAGNOSIS OF TYPE OF AZOOSPERMIA AND DIAGNOSTIC TESTING FOR OBSTRUCTIVE AZOOSPERMIA

### STEWARD

AMERICAN UROLOGICAL ASSOCIATION

### DESCRIPTION

Percentage of patients who had minimum necessary concepts discussed as part of diagnosis of azoospermia alone, to determine possibility of obstructive versus non-obstructive azoospermia and underwent diagnostic testing for obstructive azoospermia

### TYPE

Process

### DATA SOURCE

Electronic Health Records: AQUA Registry Data

### NUMERATOR STATEMENT

Patients who had documentation of minimum necessary concepts discussed as part of diagnosis of azoospermia alone, to determine possibility of obstructive vs non-obstructive azoospermia and received proper diagnostic testing for obstructive azoospermia. Discussion must include: Normal testicular size, Normal FSH (<8), Normal semen volume and pH, AND Missing vas/beaded vas AND TESTING MUST INCLUDE: FSH AND Semen analysis volume and pH AND Genetic testing AND (one of the following): Open diagnostic testicular biopsies (unilateral) OR Open diagnostic testicular biopsy (bilateral) OR Needle diagnostic testicular aspiration (bilateral) OR Needle diagnostic testicular aspiration (unilateral) OR Biopsy gun diagnostic testicular biopsy (bilateral) OR Biopsy gun diagnostic testicular biopsy (unilateral) OR Epididymal aspiration (unilateral or bilateral)

### DENOMINATOR STATEMENT

All patients with azoospermia

### DENOMINATOR DETAILS

List Denominator Codes

### DENOMINATOR EXCLUSIONS/EXCEPTIONS

Patients with CF mutation and an absent vas



## RATIONALE

Proper testing is required to make an accurate diagnosis of obstructive azoospermia. Obstructive azoospermia is present in 96% of men with an FSH  $<7.6$  and a mean testis longitudinal axis  $>4.6$ cm. Thus, the FSH and testis volume should be measured in patients being evaluated for obstructive azoospermia. In addition, patients with congenital absence of bilateral vas deference (CBAVD) will have obstructive azoospermia and thus the vas deference should be examined in patients with azoospermia. Finally, the seminal vesicles are responsible for the majority of the seminal fluid, which is alkaline. Thus, obstruction of the seminal vesicles at the ejaculatory ducts will result in a seminal fluid with an acidic PH. In the case of ejaculatory duct obstruction, the patient will typically have a low ejaculatory volume.

## RISK ADJUSTMENT

No

## INVERSE MEASURE

No

## ALGORITHM

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