

VASECTOMY CONSULTATION

You are here to see the doctor for consultation regarding the performance of the elective sterilization procedure called “vasectomy”. Please be sure to ✓ areas listed as they are covered. The last page will give you an opportunity to make a list of questions you would like to ask.

_____Your doctor will wish to be assured that you have arrived at this decision without coercion and that performance of sterilization does not go against your own moral or religious codes.

_____The Vasectomy procedure should be considered a permanent sterilization and that the conception rate following re-anastomosis (re-joining) of the vas deferens is 60% or less.

_____You will not be sterile immediately after the procedure is performed since storage areas for the sperm have to be emptied prior to any assurance of sterility. **YOU MUST CONTINUE YOUR PRESENT CONTRACEPTIVE METHODS UNTIL TWO CONSECUTIVE SEMEN SPECIMENS ARE TAKEN IN TO THE LABORATORY FOR ANALYSIS AND ARE FOUND TO BE FREE OF SPERM.** These specimens are related more to the number of ejaculations rather than to specific time elements. You will be given a second instruction sheet which will specifically detail how and when to collect the specimens.

_____Avoid any strenuous physical activity such as lifting, running or strenuous sports for a period of not less than 72 hours following the performance of the vasectomy. Following that period, you may gradually increase your activity, limited only by the amount of discomfort that you are experiencing at that time.

_____The majority of our patients have the surgery performed under **local anesthesia**. Under local anesthesia, you will feel two things: first, the isolation of the vas deferens from the other structures in the scrotum, then the injection of the local anesthetic, in the skin and in the cord. If you have in the past had any intolerance to local anesthesia, you should so inform your doctor during the interview.

_____The **consent form** that you sign will state that we DO NOT guarantee sterilization since there is a failure rate in vasectomies with fistulization occurring between the cut ends of the vas deferens in a few cases. This usually occurs during the immediate post-operative phase and is usually determined by the fact that the sperm count does not reach zero. Pregnancies, however, have been reported years after vasectomy was performed. The rate of this occurrence is considered to be 1 in 400 or .25%. This compares to the usual rate of 5% failure using birth control medication.

_____The procedure will be scheduled at the mutual convenience of your physician and yourself to be performed in the office. Payment is required at the time of surgery. You will be responsible for checking with your insurance on what is covered under your policy and what co-pay will be due at the time of your procedure.

_____You will be given a prescription for a mild sedative. If you feel that you will benefit from the sedative, please be sure to get the physicians signature before you leave. The Urology Team requires that you be accompanied by someone who can drive you home.

_____NATIONAL INSTITUTES OF HEALTH RECOMMENDATIONS

Based on a review of the epidemiologic and biologic evidence, the National Institutes of Health recommends that clinical practice remain unchanged in providing vasectomies and screening for prostate cancer. The National Institutes Health recommends that:

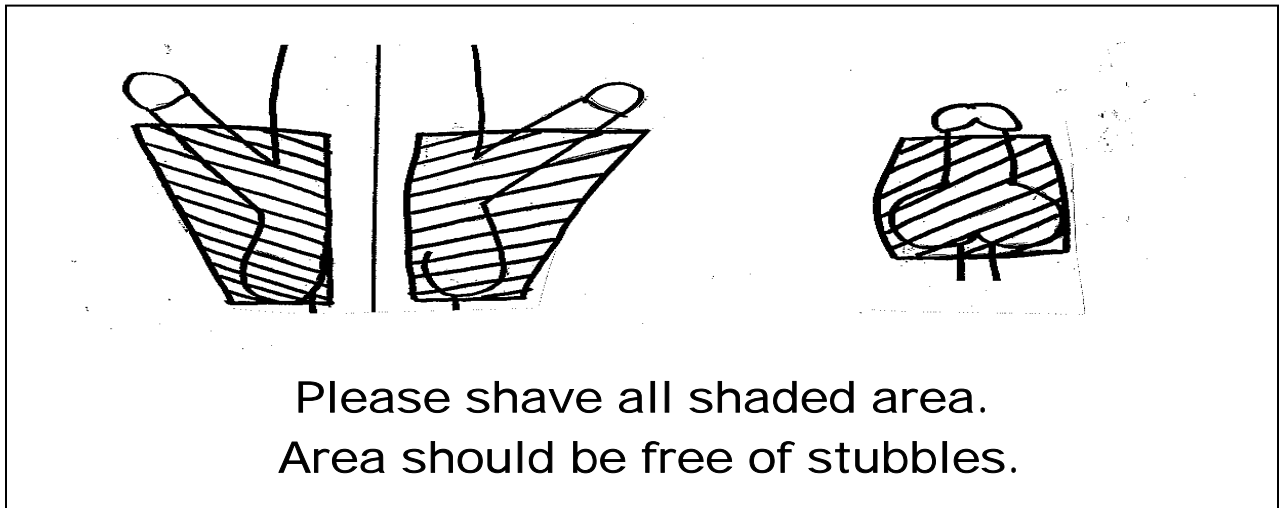
- Healthcare providers should continue to offer vasectomy and perform the procedure.
- Vasectomy reversal is not warranted to prevent prostate cancer.
- Screening for prostate cancer should not be any different for men who have had a vasectomy than for those who have not.

THE UROLOGY TEAM

VASECTOMY PREPARATION

NIGHT BEFORE PROCEDURE:

SHAVE SURGICAL AREA-BEGIN 2" ABOVE PENIS AND SHAVE DOWNWARD TO INCLUDE ENTIRE SCROTUM (TESTICLES). **DO NOT USE ELECTRIC RAZORS OR HAIR REMOVAL PRODUCTS.**



SOAP AND LATHER THE SCROTUM FOR 10 MINUTES. USE AN ANTIMIRCROBIAL SOAP. EXAMPLE: DIAL SOAP, ETC.



MAKE SURE YOU HAVE BROUGHT AN ATHLETIC SUPPORTER (JOCK STRAP) TO WEAR AFTER THE PROCEDURE. NO BOXER SHORTS OR BRIEFS IN PLACE OF THE ATHLETIC SUPPORTER. THE ATHLETIC SUPPORTER IS AN ADDED MEASURE TO REDUCE PAIN AND SWELLING.

DAY OF PROCEDURE:

SOAP THE SCROTUM AGAIN FOR 5 TO 10 MINUTES. AGAIN USE AN ANTIMICROBIAL SOAP.

TAKE SEDATIVE ONE HOUR PRIOR TO VASECTOMY

INSTRUCTIONS TO FOLLOW AFTER VASECTOMY

PLEASE READ CAREFULLY

1. **Wear the scrotal suspensory or supporter for 72 hours.** Thereafter, you may wear it as long as you are more comfortable with it than without it.
2. **Avoid strenuous physical exercise for three to four days.** You may perform all other normal duties.
3. **You may shower 24 hours after the day of surgery.** You may **NOT** sit in a bath for 3 days after the day of surgery. You may apply soapy water gently to the scrotum to wash. Rinse and dry by blotting the skin, not rubbing.
4. **All “stitches” will dissolve by themselves.** They do not require removal. If a stitch comes away prematurely, the incision may open a little and possibly a small discharge from the wound or a slight amount of bleeding may develop. Do not worry about this; continue to bathe as before and place a small gauze sponge inside the suspensory which you are to wear until the incision dries up.
5. If you have **pain or discomfort** immediately after the vasectomy, two (2) Tylenol tablets taken at four to six hour intervals are usually enough to provide relief from the discomfort. An ice bag will provide additional comfort after the local anesthetic wears off, if used for several hours.
6. **A small amount of oozing blood** (enough to stain the dressing), some tenderness and mild swelling in the area of the incision are not unusual and should subside in twelve to fourteen days. Bluish discoloration fading to green and yellow may be noted in the scrotal wall. These should cause no alarm but if there is an unusual amount of pain, a large swelling of the scrotum or continuing free bleeding, feel free to call the doctor at any time.
7. Maintain the **usual precautions against pregnancy** until TWO specimens have been checked and we have notified you that BOTH are free of sperm, either dead or alive.
8. A specimen should be taken into the laboratory after 20 to 25 ejaculations and not earlier than three months after surgery. Collect the specimen by masturbation directly into the covered container you were given at the time of surgery and take specimen with the requisition you were given to the appropriate laboratory as instructed by the nurse. This specimen must be in the laboratory by no later than 5 p.m., Monday thru Friday. **Then, after 1 month and after 15 ejaculations, you will need to take in another specimen.** If sperm are found, it will be necessary for you to submit at least TWO more specimens at a later date.

BE AWARE THAT THERE WILL BE A SMALL AMOUNT OF DELAY AT THE LAB WHEN YOU TAKE IN YOUR SPECIMEN. PLEASE ALLOW TIME FOR THIS. IT IS IMPORTANT THAT THE LAB HAVE YOU REGISTER AND THEN CONFIRM YOUR INFORMATION ON YOUR LAB REQUISITION.

After we received the results of two consecutive negative specimens in a row, you can discontinue precautions against pregnancy.

We will send you a copy of your results in the mail. If you have not received any results within a two week period, please call us at 231-1444 and ask for the Triage Nurse.

POST OPERATIVE VASECTOMY INFORMATION SHEET

ACTIVITY:

- DAY 1 PUT YOUR FEET UP IN AN EASY CHAIR WITH AN ICE BAG ON YOUR GROIN TO REDUCE SWELLING AND BLEEDING.
- DAY 2 YOU MAY WALK AROUND, BUT YOU SHOULD NOT ENGAGE IN LIFTING OR VIGOROUS PHYSICAL EXERCISE. IF SWELLING INCREASES, SIT DOWN AND RELAX AS YOU DID THE FIRST DAY. SHOWERING IS PERMITTED.
- DAY 3 YOU MAY BE AS ACTIVE AS YOU DESIRE, BUT CONTINUE WEARING YOUR ATHLETIC SUPPORTER.

BANDAGE:

- DAY 1 WHEN YOU LEAVE THE OFFICE, YOUR ATHLETIC SUPPORTER WILL BE IN PLACE AND FILLED WITH GAUZE. LEAVE IT IN PLACE FOR THE REMAINDER OF THE DAY.
- DAY 2 CONTINUE WEARING YOUR ATHLETIC SUPPORTER. GAUZE MAY BE REMOVED.
- DAY 3 CONTINUE WEARING YOUR ATHLETIC SUPPORTER UNTIL YOU ARE COMFORTABLE WITHOUT IT.

- PAIN: IF MEDICATION IS NOT PRESCRIBED WHEN YOU LEAVE THE OFFICE, TAKE TYLENOL EVERY FOUR (4) HOURS IF NEEDED. IF YOU FEEL YOU NEED SOMETHING MORE, CONTACT THE PHYSICIAN.

SEXUAL ACTIVITY:

- WEEK 1 NO SEXUAL INTERCOURSE OR AS DIRECTED BY YOUR DOCTOR.
- WEEK 2 TWO TO THREE TIMES MAXIMUM.
- WEEK 3 AS DESIRED.

POSSIBLE REACTIONS:

INFECTIONS ARE RARE, BUT CONTACT THE PHYSICIAN IF REDNESS SWELLING, TENDERNESS, FEVER, OR OOZING OF PUS FROM THE INCISION OCCURS.

BRUISING OVER THE SCROTUM IS NORMAL FOR UP TO ABOUT TWO WEEKS.

A SMALL AMOUNT OF SWELLING IS NOT UNCOMMON, BUT ANYTHING MORE SHOULD BE REPORTED.

ABOUT 30 PERCENT OF MEN DEVELOP A SMALL NODULE OF TISSUE OVER THE INCISION (GRANULOMA). USUALLY THIS IS NOT PAINFUL AND WILL GO AWAY.