



Vasectomy

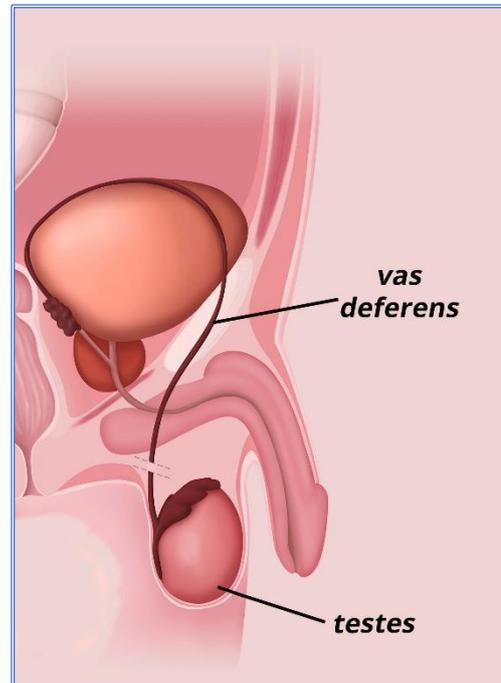
Patient information

1. Introduction

A vasectomy is a safe, effective, and permanent method of birth control for men. It is also the most cost-effective form of birth control, costing half as much as a tubal ligation (having a woman's "tubes tied"). In Australia, about 30,000 men have a vasectomy every year.

The vasectomy is a simple surgical procedure which closes off the vas deferens in the scrotum to stop sperm from getting into the semen. The vas deferens are tubes that carry sperm from the testes to the penis.

The vasectomy is highly effective so the chance of pregnancy after the procedure is around 1 in 1000. It can sometimes be reversed, but it is generally permanent.



2. The vasectomy procedure

A vasectomy takes 20 to 40 minutes. It is usually carried out under a local anaesthesia but can be done under IV sedation or general anaesthesia. Through a small (about 5mm) incision on the front of the scrotum each vas deferens is cut and sealed off. The wound is closed with a dissolvable stitch which will disappear in 1-2 weeks. After the procedure, you will still be able to ejaculate but the sperm that are produced will be reabsorbed by the body.

3. What to expect after the vasectomy?

You will have pain and swelling in the scrotum, and probably some bruising. It is important to rest for a few days and avoid heavy lifting to ease the pain and swelling. Simple analgesia such as Panadol, supportive underwear or ice packs can also help.

4. How soon will a vasectomy work?

A vasectomy does not work immediately. It can take a few months and up to 20 ejaculations to clear the sperm in the vas deferens after the procedure. A semen test 3 months after the procedure will determine if it is safe to stop using other forms of contraception. You will need to use another method of contraception until the semen sample shows free of sperm under a microscope.



5. Can a vasectomy be reversible?

A vasectomy is generally permanent. Sometimes it is possible to re-join the vas tubes, but this does not guarantee the man will be able to produce another child. The chances of success decrease with time after the procedure.

Retrieving sperm directly from the testes for use with assisted reproductive techniques, such as IVF, may be an option for men who have had a vasectomy and then decide they would like to father children.

6. How do I prepare for my procedure?

- Avoid taking Aspirin or anti-inflammatory tablets for five days before the procedure.
- Shower before leaving home.
- Wear firm fitting underwear on the day of your procedure.
- If you choose to undergo IV sedation, you must not eat anything for 6 hours prior to your procedure. (please follow further instructions from the anaesthetist)

7. What complications can happen?

General complications

- Pain
- Bleeding (Bruising, Haematoma formation)
- Wound infection

Specific complications

- Sperm granuloma
- Congestion/ Congestive epididymitis
- Post vasectomy pain syndrome
- Failure (or recanalization)

8. How soon will I recover?

- You should be able to go home the same day.
- You should be able to return to work after about 2 days (about a week if your work involves strenuous exercise).
- To reduce the risk of bleeding, do not ejaculate or do strenuous exercise, like running and riding a bicycle, for 5 to 7 days.



9. How will vasectomy affect my body?

Your testicles will continue to produce sperm. Because the sperm cannot get through the tubes any longer, they simply get reabsorbed into the body. The procedure will not affect your male hormones nor sexual function such as erection, ejaculation or orgasm.

10. Postoperative instructions

- On the same day of your vasectomy, you should go home and rest for the remainder the day after the procedure. Minimize any kind of activity. You may take Panadol regularly for a couple of days (max 2 tablets every 6 hours). Applying an Ice pack may help to reduce swelling and bruising.
- You will have only one small wound less than 5 mm after your procedure. It may be anywhere from the base of your penis to anywhere on your scrotum. A single stitch will be noticed on the wound, but it will disappear in 2-3 weeks. A little bleeding from the wound is normal.
- No swimming or baths in the first week. Have quick showers, in and out, and keep the dressing intact for 3-4 days and then replace with a new dressing for another 3-4 days.
- No sex or ejaculation for 7 days after the operation.
- Avoid heavy lifting or strenuous exercise in the first week.
- You may get a small drop or two of blood in the ejaculate during the first 1-2 months post-op. This is normal and of no concern, unless it continues beyond 2 months or is very heavy (ejaculate becomes red).
- You will have a pathology request and instructions to have a post-vasectomy sperm count carried out at your local pathology in 3 months' time. The specimen should be delivered to the pathology laboratory within ½ an hour after collection. Please phone the Pathology centre before collection to confirm the timing of delivery, for the specimen.
- It is important to continue alternative contraceptive measures until this semen analysis has been performed and returned with a '0' sperm count. Should it happen that the test show "viable sperm", it needs to be repeated one month later to confirm that the operation was successful.
- You will want to achieve 20 ejaculations within the first three months of your vasectomy to flush out the existing sperm in your reproductive tract.



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Consent for Vasectomy

I, _____ confirm that I have been explained of the following information by Dr Jong Woo via the information sheet provided:

- What is a vasectomy
- What alternatives I could choose instead of having a vasectomy
- How the procedure is carried out
- What I expect after the procedure
- The risks of having a vasectomy and potential complications that may arise during or after the procedure and their likelihood
- The requirement for a sperm test 3 months after the vasectomy

I confirm that:

1. I understand the vasectomy procedure and its associated risks.
2. I acknowledge other relevant procedures/treatment options and their associated risks
3. I understand that vasectomy is not my only option for contraception and that I could also use condoms, abstain from sex or my partner could use female forms of contraception (such as the pill or long acting contraceptives like Implanon, Mirena or a 3 month depot injection) to ensure I do not have children
4. I give the doctors and nurses permission to treat me if there is a life-threatening event during the procedure,
5. I was able to ask questions and raise concerns with the doctor about vasectomy, its risks, and my other treatment options. I confirm that my questions and concerns have been discussed and answered to my satisfaction.
6. I understand I have the right to change my mind at any time, including after I have signed this form
7. I understand that I must get a semen test performed approximately 3 months after the procedure to confirm that the vasectomy procedure was successful, and I am sterile. I understand that until I have been advised I am sterile following this test I should consider myself fertile and use appropriate contraception
8. I understand that there is a chance the procedure may not work, and I may still be fertile after the vasectomy has been performed
9. I have been advised to abstain from strenuous exercise, heavy lifting and sex for at least 1 week following my vasectomy.
10. I understand vasectomy is permanent sterilisation and after this operation I will not be able to father children
11. I understand if there are post-operative complications, I may require referral to another specialist such as a urologist. I understand that I am responsible for fees payable in this situation

I consent to the treatment or procedure and the above listed items (1-11). I am satisfied with the explanation.

Signature: _____ **Date:** _____