

WHAT IS A VASECTOMY?

Vasectomy is a voluntary procedure that is a permanent form of birth control in men. This information is provided to you as an explanation of the procedure, its risks and alternatives.

The vas deferens is a small tube that transports sperm from a testicle. A vasectomy blocks the flow of sperm through this tube. After a vasectomy, the ejaculate will remain essentially normal, as only the sperm is missing from the fluid produced. Also, orgasm, erection and libido (sexual desire) are unaffected.

The vasectomy is performed in the office with a local anesthetic. There are two methods: the “no scalpel” technique and the traditional method performed with a scalpel. The main difference is the way the skin is opened. In the “no scalpel” technique, a sharp pair of surgical scissors is used to open the skin. With the traditional method a scalpel is used. With either method the incision is essentially the same size (approximately 1 cm.). After the skin opening is made the methods are very similar. A section of the vas deferens from each side is removed and the remaining ends are closed off with either surgical clips or electric current (cautery) or both. The skin opening may be closed with a suture, which will dissolve and not need to be removed.

Alternatives to a vasectomy include birth control pills, various forms of barrier methods (condoms), IUDs, bilateral tubal ligations and abstinence.

Although a vasectomy is a very safe procedure, no surgical procedure is without risk of complication. Some risks associated with a vasectomy include:

1. Infection: This may range from a skin incision infection to an abscess of the internal structures. This would typically respond to antibiotics.
2. Hematoma: This is a collection of blood (blood clot) within the scrotum. This is rare, and will usually resolve spontaneously.
3. Prolonged pain: A few men will experience discomfort longer than expected. Rarely a patient will experience long-term pain
4. Sperm granuloma: This is a swelling located at the end of the vas deferens. While it does not typically cause symptoms it may rarely be tender and require treatment.
5. Failure: “Immediate” failure (1 in 600 men) means there will be persistent sperm in the semen. A “delayed” failure would mean after a period of having no sperm in the semen there subsequently is sperm in the semen again (1 in 5000 men). Failure may result in pregnancy and may require repeat vasectomy.

Following vasectomy, sterility does not occur until all sperm is cleared from the vas deferens. This will take several weeks and for some men months. Birth control must be used until laboratory testing has shown that the semen is free of sperm.

Although a vasectomy is considered permanent, it can be surgically reversed. If not too much time has elapsed between the vasectomy and reversal, our success rates are excellent, with a 75% pregnancy rate. Alternatively, if a man is considering fertility after a vasectomy he can bank sperm prior to the procedure.

QUESTIONS: (Circle True or False)

1. TRUE or FALSE: The ejaculate can contain sperm after the vasectomy.
2. TRUE or FALSE: A semen analysis is necessary after the vasectomy to determine if the vasectomy was successful or not.
3. TRUE or FALSE: Complications due to a vasectomy include bleeding, infection, pain, failure.
4. TRUE or FALSE: Pregnancy can occur months or years after a vasectomy, even after semen analysis shows no sperm in the semen.

By my signature, I hereby give my consent for a vasectomy procedure.

Signature

Date

Witness

Physician

APPOINTMENTS

Consultation:

A Board Certified urologist at Urologic Consultants will meet with you to discuss the vasectomy procedure and answer any questions you may have. **If you are married, we encourage you to bring your spouse.**

Vasectomy Procedure:

The procedure will take approximately 45-minutes. **Patients are encouraged to bring a driver**, wear comfortable clothes and verify their insurance coverage for this procedure.

DIRECTIONS

Coming from North or South:

- Take US 131 to 196 East
- Exit onto College Ave. Exit 78
- Turn right (south) onto College Avenue from exit ramp
- Turn right (west) onto Michigan Street
- Go to 25 Michigan, which will be on the right.
- Turn right into Parking Ramp #1
- Take the parking elevator to the first floor and proceed across the hall to the building elevator. Take this to the third floor.

Coming from East or West:

- Take Interstate 196 to College Avenue Exit 78
- Turn right (south) onto College Avenue from the exit ramp
- Turn right (west) onto Michigan Street.
- Go to 25 Michigan, which will be on the right.
- Turn right into Parking Ramp #1.
- Take parking elevator to the first floor and proceed across the hall to the building elevator. Take this to the third floor.

PATIENT'S GUIDE TO VASECTOMY

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