

## ***What You Should Do After The Operation***

Ice Packs should be applied to each side of the scrotum for 4-6 hours to minimize the possibility of bleeding and also relieve discomfort. When you come for the vasectomy, bring a jockey strap or scrotal support which is to be worn as long as it provides comfort.

## ***Limitations and Restrictions For 3 Days Following Surgery***

- 1) Sexual intercourse.
- 2) All strenuous activity such as lifting heavy objects, i.e., anything weighing more than 25 lbs.
- 3) All contact sports such as basketball, softball, etc. or activity where there is a risk of scrotal trauma or injury.

## ***Fees***

The total charge for a Vas Ligation is \$ \_\_\_\_\_

This fee includes the procedure, the semen analysis, supplies, drugs, and anesthesia. An initial consultation fee of \$ \_\_\_\_\_ is charged.

If there is insurance it will be filed. The portion of fees not covered by insurance is expected at time of surgery.

## ***Collection of Semen Specimens***

These must be collected by masturbation directly into a clean well rinsed container. They cannot be collected in a condom and transferred into the container. The specimen can be brought to our office by any responsible person within four hours from the time it is collected.

All specimens requested (6 weeks, 3 months, and 6 months post-operatively) are to be brought in regardless of the results of the previous specimen.

## ***A Sample Consent Form You Will Be Asked To Sign***

I, the undersigned person have requested Dr. John E. Walton to perform the following operation, BILATERAL VAS DEFERENS LIGATION FOR THE PURPOSE OF STERLIZATION on me.

It has been explained to me and I understand that in some cases the cords so cut and tied off grow back together causing the operation to fail.

I understand that it will be necessary for me to have my semen analyzed at regular intervals for a period of at least six months to be certain there are no sperm present in the semen.

Both my wife and I understand that the operation is intended to sterilize the male. I also understand that it is necessary to continue using a contraceptive until the semen is analyzed and found free of sperm.

Patient's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Wife's Name: \_\_\_\_\_

Wife's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Witness: \_\_\_\_\_

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# **THE VASECTOMY**

## **An Important Consideration In Family Planning**

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## *The Vasectomy: A Permanent Form Of Contraception*

The vasectomy is an operation to permanently sterilize the male. It is the safest, easiest, most economical and most effective operation to achieve this. The vasectomy can be reversed, but if you want a child in the future or if you are unsure, you should not have a vasectomy.

The operation is done in the office using local anesthesia and takes about 30 minutes to complete. Usually, the only discomfort is the injection of the anesthetic agent. The accompanying illustrations show how the procedure is done.

Possible complications are few and rarely cause loss of time from work or require further treatment. Recognition and prevention is discussed in the post-operative care section. The most common complications are discussed below:

**BLEEDING** — If excessive, will usually occur within the first 24 hours after the operation and presents as pain, swelling and blue discoloration. The blood clot which forms cannot migrate to the lungs or heart, but could require surgical removal.

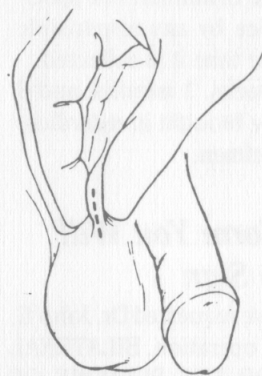
**INFECTION** — This usually will not appear until 1-4 weeks after the operation and presents as a painful, tender swelling. This may require antibiotic treatment.

**RECANALIZATION** — or growing back together of the vas. In my patients this has occurred less than one half of one percent of the time. The semen checks after surgery will verify you are sterile and help detect recanalization early.

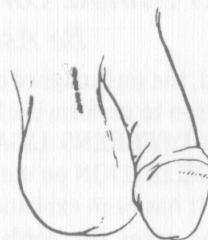
Semen specimens are checked 6 weeks, 3 months, and 6 months after surgery. You must continue to use your contraception of choice until the semen specimen is checked and found to be free of sperm. After bringing the semen specimen to the office you may call for the results. Usually the need to use contraceptives has passed when you bring the first specimen in for exam, but this must be confirmed by our office.

Many men fear this operation will affect their sexual ability or "nature". These fears have no basis in fact except for the psychological effect which cannot be predicted. This operation does not alter the production or distribution of the male hormones produced by the testes, or the blood supply to the genitals and these factors control sexual ability and libido.

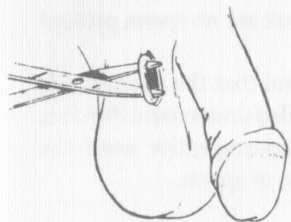
## *The Vasectomy Illustrated*



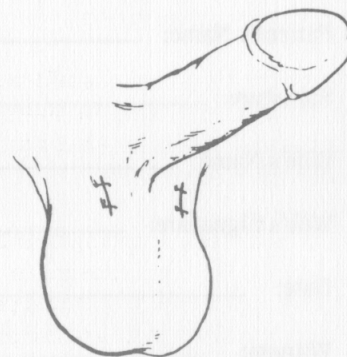
a) Vas is located



b) Incision and  
area of anesthesia



c) Section of Vas lifted  
out of incision



d) Two-incision  
technique

Vasectomy is usually performed using local anesthesia in an office or clinic setting.

<sup>1</sup>My Body My Health; Stewart. et. al.

## *Normal Or Expected Post-Operative State*

**PAIN:** The pain experienced post-operatively should be relieved by any mild non-prescription analgesic such as aspirin, acetomenopherin or ibuprofen. Most of the discomfort usually occurs during the first 6-8 hours after the operation and after the local anesthetic has worn off.

**SWELLING:** There will be some swelling at the site of the incision on each side of the scrotum. This swelling is usually about the size of the tip of the little finger and may take up to three months to disappear completely.

**BRUISE OR DISCOLORATION:** There will be a small area of blue discoloration on each side of the scrotum near the incision. This discoloration represents a small amount of bleeding into the tissue and will usually clear within 7-14 days after the operation.

## *Danger Signals*

**PAIN:** Pain which is not relieved by the mild analgesic, especially if this pain is associated with additional swelling or discoloration.

**SWELLING:** This usually represents internal bleeding if it occurs within 24 hours of the operation. If this increases to ping pong ball size it should be reported to the doctor immediately.

**BLEEDING:** Bleeding from the incision can be controlled with direct pressure to the bleeding point. All blood clots should be removed prior to applying pressure to the bleeding point and the pressure should be maintained continually for a minimum of 5 minutes. If the bleeding recurs, the pressure should be reapplied for an additional 5 minutes.