



Vasectomy Procedure

A vasectomy is a surgical procedure where the tubes that connect the testicles to the prostate are cut and closed. This prevents sperm, produced in the testicles, from being ejaculated into the seminal fluid from the prostate. The prostate will still produce seminal fluid, but there will be no sperm in the seminal fluid or ejaculate which results in sterility.

We regard a vasectomy to be a permanent form of contraception. We do not consider it reversible. If you are interested in sperm banking our office can provide you with referral information.

The procedure is performed in our office and takes 20-30 minutes. You will not be under general anesthesia; however you do have the option to utilize Nitrous gas in the office during the procedure. There is a self-pay charge for Nitrous that will be collected upon check-in the day of your procedure if you elect to use it. Insurance does not cover Nitrous.

Our physicians use a minimally invasive technique, which allows for quicker healing and less bleeding. This technique includes anesthetizing a small area of the scrotum with numbing medicine and then make a small opening in the skin under the penis. He is then able to move each vas to the opening and remove a small piece. He then seals the ends using heated cautery and a titanium clip. The opening will be closed with one absorbable suture.

You will not be able to feel the clips and they will not be detectable. The suture will absorb on its own with time. Do not cut this suture out on your own.

By removing a piece of the vas and obstructing the channel, sperm is no longer able to be transported into the prostate which causes infertility. Your body still produces sperm, but it no longer has a pathway out of the body. Your body absorbs the sperm that is produced.

Infertility will not be immediate. You will need to have two negative semen specimens examined by the laboratory before sterility is confirmed. You will need to ejaculate 30 times before leaving the first and ejaculate another 30 times before leaving the second sample.

Contraception will be needed until our office has examined both specimens and notified you that they are absent of sperm. (Please see below regarding specimens).

The vasectomy does not affect testosterone production, libido, orgasm or erections. You may notice a slight decrease in ejaculate volume.

It is required that you drop off two semen specimens at Clinical Pathology Laboratory (see below for specimen instructions). Your next office visit with a provider will be scheduled for 4 months after your vasectomy. At that time, we will perform an exam and go over any questions or concerns you may have. We will also ensure that both of the specimens needed have been received.

Immediately after the procedure, the provider will discuss post procedure instructions with you and any others that you give permission. We will also provide specimen cups for you to take home at that time.

We ask that you go directly home after the procedure and begin the post procedure instructions. Strictly adhering to these instructions will significantly reduce inflammation and sensitivity. It will also reduce your risk of bleeding complications.

Our office will call you shortly after the procedure date to ensure you are doing well, answer any questions and remind you of the post procedure instructions.

The provider will go over the details of the procedure before it is performed and ensure your consent. He will also advise you of the instructions for post procedure care and follow-up.

How to prepare for the procedure

1. A consult to discuss the vasectomy must be completed before the procedure.
2. A consent form must be signed on the day of the vasectomy consult.
3. Pick up all prescriptions. Usually this includes an antibiotic and Motrin. All instructions are provided on the bottles as to how and when to use.
4. Shave your entire scrotum and the hair around your penis as best you can the morning of your procedure.
5. Buy supportive underwear/briefs to use for 8 days after the procedure. Bring a pair with you to the procedure.
6. You will not be able to shower for 24 hours after the procedure in order to keep the area dry.
7. If you take blood thinners, including Aspirin, this will need to be discussed with the provider so we can stop them safely.
8. Get a bag of frozen peas or corn to apply to the scrotal area immediately after the procedure.
9. You will need to ensure that you will have a full 2 days off your feet and with no need for strenuous activity/lifting during this time.
10. If interested in sperm banking, this will need to be completed before your procedure.
11. Disclose any medications, allergies, medical or surgical history to the provider.

Instructions on the day of the procedure before you come in:

1. Make sure the area is shaved. (Lower part of your shaft & full scrotum)
2. Start the antibiotic.
3. Bring supportive underwear to wear immediately after the procedure.
4. If opting in to use the Nitrous Gas, we will collect the self-pay fee when you check-in.

Instructions immediately after the procedure until day 2

1. Go home. Rest. Stay off your feet for 2 days.
2. Ice the area using a bag of peas or corn on and off every 15-30 minutes. This helps with swelling and inflammation. Be sure to place a paper towel or wash cloth between the skin and the frozen bag of peas or corn.
3. Start the anti-inflammatory prescription and continue it for at least 48 – 72 hours.
4. Continue the antibiotic.
5. Do not apply ointments or band-aids to the suture site.
6. Do not shower.

7. Restart blood thinners as directed.
8. If you notice a small amount of bleeding from the area where the suture is, do not worry. Simply pinch the area between your fingers and hold pressure for five minutes. The bleeding will stop.

What are normal expectations after the procedure?

- Swelling
- Bleeding from the suture site
- Bruising
- Temporary change in semen color
- Discomfort at the suture site, testes or around the vasectomy

Instructions for days 3-7 after the procedure

1. Continue light duty only.
2. Avoid straining, bumping, bouncing or jarring activities.
3. Continue to wear supportive underwear/briefs.
4. Abstain from sexual activity.
5. Finish the antibiotic prescription.
6. Finish the anti-inflammation prescription.
7. Your suture will absorb on its own with time. Do not remove this suture yourself.
8. Do not apply Band-Aids or ointments to the area.
9. Use ice, as well, for discomfort.

Reasons to contact our office:

- If you have an enlarging lump, like a golf ball, in the scrotum during the first few days.
- If you have excessive swelling, pain, redness or pus around your suture site.
- If you have a fever over 101.

Day 8 after the procedure

1. Go back to your normal activity level. Start slowly. If you experience pain, then stop.
2. If sexually active, you must use a method of contraception until you have been notified by our office that two semen specimens are absent of sperm.

Specimens

A fair amount of sperm is stored downstream from the portion of the vas that is removed. Thus, the initial ejaculations always contain sperm. Eight days after the procedure you can engage in sexual activity. It is important to adhere to the timing and amount of ejaculations needed for the specimens. A back up method of contraception is still needed at this time.

Please bring your sample into the laboratory on the day of collection. If you are unable to bring it in the same day, you may bring it in the next day, however please be sure to refrigerate the sample until you are able to bring it into the laboratory.

1. We ask that you dispose of 30 ejaculations prior to providing ONE ejaculation in the specimen cup for assessment. Please drop the specimen off at Clinical Pathology Laboratory of your

choice and provide your name, DOB, phone # and that this is sample #1. Once they notify you that the first specimen is negative, we will need you to provide a second specimen.

2. After another 30 ejaculations, you will provide a second specimen. Please drop the specimen off at CPL and provide your name, DOB, phone # and that this is sample # 2 .Once they notify you that the second specimen is negative then you are considered sterile and there is no need for contraception.

Complications/Risks of a Vasectomy

- Bleeding

- Infection

- Sperm granuloma: Sperm find their way out of the cauterized end of the vas. This cannot be prevented, in some circumstances, and the sperm that is released into the tissue is irritating and cause a small nodule. These nodules usually resolve in time as the body seals them off.

However, they can persist and be painful. Sometimes it requires surgical removal.

- Recanalization. The ends of the vas grow back together making a man fertile again.

- Rarely, some men have poor migration of sperm in the vas after a vasectomy, which causes the persistence of sperm to be seen in semen checks for 6 months to one year. This does not mean the procedure failed, just that more time is needed.

- Pain: Any surgical procedure may cause sensitivity around the surgical site. Strictly adhering to the post procedure instructions will significantly reduce inflammation and potential for sensitivity. If you have pain, apply the same methods (ice, Motrin, decrease strenuous activity) that you did post vasectomy to help alleviate the symptoms.

- If, after a prolonged period of follow-up, sperm continue to persist on semen checks, especially if active, it may necessitate a repeat vasectomy.

If you have any questions or concerns please contact our office between Monday-Thursday 8:30 AM-4:30 PM, Friday 8:30 AM-1:00 PM (we are closed for lunch and do not answer the phones between 12:00 PM-1:30 PM).