

Vasectomy Information and Consent Form

A vasectomy is a minor operation that interrupts the flow of sperm from the testis through the ejaculatory system by removing a small piece of the vas deferens (the tube that conducts sperm from the testis to the prostate) and occluding the cut ends by cautery, clip or ligation.

A vasectomy renders you sterile but should not affect your sex drive or potency.

Sterility cannot be assumed unless no sperm are seen in the ejaculate.

It typically takes >15 ejaculation and > 2 months to have a zero sperm count.

Rarely (<1%), the ends of the vas reunite and fertility is re-established.

The goal of a vasectomy is sterility although an operation (vasovasostomy) can be done to reconnect the ends of the vas deferens. However, a vasovasostomy is not always successful.

You should consider that you would be permanently sterilized after a vasectomy.

You should use birth control until the sperm count is zero.

Risks and Complications after Vasectomy

Long-term studies (25 years) have failed to show any significant increase in any systemic disease including prostate cancer, after vasectomy.

Complications are uncommon after vasectomy. Some, but not necessarily all, of the complications are:

Bleeding: Usually mild, treated by bed-rest, compression, ice, scrotal elevation but may require an incision to evacuate a blood clot (hematoma). This normally resolves over a period of 4-6 weeks. Normally, some bruising will appear around the incision and may extend to the penis.

Epididymitis/orchitis: Acute inflammation of the epididymis and testicle associated with pain and swelling, occasionally fever and chills. Treatment includes bed-rest, scrotal elevation, and antibiotics.

Post-vasectomy Pain Syndrome: Treatment may include anti-inflammatory medications, antibiotics, and rarely anesthetic or steroid injections, and surgery.

Wound infection: Requires antibiotics. A small amount of discharge and inflammation is normal and should not be confused with a wound infection.

Spermatocele or hydrocele: Fluid collections near the testicle but rarely need treatment.

Sperm granuloma: Small swelling inside at the site of the vasectomy that is a result of the body's reaction to sperm. This usually requires no treatment and resolves over a period of months. The granuloma can be excised.

Injury to the testicular artery: May result in shrinkage and loss of function of the testicle.

Failure to achieve or maintain a zero sperm count: This may require a repeat operation.

Allergic reaction: Local anesthetic agents are used and reactions sometimes occur.

Consent:

I have read and received a copy of this form, and understand the vasectomy procedure, alternatives, and risks.

It has been recommended that I should have someone drive me home following this procedure.

I give my consent for vasectomy to be performed.

Printed name: _____

Signature: _____

Date: _____