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## **CONSENT TO STERILIZATION OPERATION (SURGICAL VASECTOMY)**

I have been given the following information:

### **1. Explanation of Sterilization Procedure**

Vasectomy is a minor surgical procedure which can be performed in the doctor's office or hospital under a local anesthetic and involves cutting the vas deferens in the scrotum. The surgery takes approximately 30 minutes and involves making a small incision(s) on the scrotum. The sperm duct (vas deferens) is then cut and sealed, and the sealed ends of the duct are then returned to the scrotum. To reduce the possibility that the cut tubes may rejoin, a ½ to 1 inch piece of the vas deferens may be removed during the surgery. The skin incision(s) is so small that stitches may not be used. If stitches are used, they will dissolve by themselves.

### **2. Description of the Attendant Discomforts and Risks**

A small amount of oozing blood (enough to stain the dressing), some discomfort and mild swelling in the area of incision are not unusual and should subside within 72 hours. Occasionally, the skin of the scrotum and base of the penis turn black and blue. This is not painful, lasts only a few days and disappears without treatment. Another low risk complication is infection at the incision site. This is manifest by redness and possible purulent discharge from the incision site. Antibiotics and rarely surgical drainage may be required.

Very rarely, a small blood vessel may escape into the scrotum and continue bleeding to form a clot. A small clot will be absorbed after a time, but a large one is painful and usually requires reopening of the scrotum and drainage. Hospitalization and general anesthetic may be required for this purpose.

For 72 hours following the vasectomy, sex should be eliminated. Strenuous exercise (for example, climbing ladders, riding motorbikes, bicycles, playing tennis, etc.) should likewise be avoided for three days and nothing that weighs over a few pounds should be lifted. The reason for this is that engaging in these activities sometimes results in complications.

A rare condition called post vasectomy pain syndrome or vasal granuloma may also occur weeks after the procedure and may associated with a small painful knot within the scrotum where the vas deferens was divided. This may be treated with anti inflammatory medications, nerve block or possible surgical excision.

This surgical procedure is not always 100% effective in preventing pregnancy, because **on rare occasions the cut end of the cord may rejoin**. This only occurs at a rate of one in every 600 vasectomies.

Sperm can survive from the point where the cords were cut for months, so another form of contraceptive must be used until sterility is assured. For this purpose, a specimen of seminal fluid should be brought in for microscopic evaluation. In order for you to be considered sterile, you must have two (2) clear post-vasectomy samples. The specimen must contain no sperm before unprotected intercourse is allowed. Occasionally, it may take six months or longer to flush out all the sperm.

### **3. Benefits to be Expected**

The vasectomy is done in our office in approximately 30 minutes using a local anesthetic; it is a simple, safe method to prevent unwanted pregnancy. Recovery is quick; the patient can usually return to work in 2 days (over a weekend).

Sexual activity, penile sensitivity, and the production of male hormones are not adversely affected. In fact, the freedom from fear of unwanted children may greatly improve the mutual enjoyment in your sexual relations. You may find that your desire for sexual expression becomes more spontaneous and more frequent.

**4. Counseling Concerning Alternative Methods**

If your objective is merely to space pregnancies, or if you have even the slightest reason to believe that you might want to have children in the future, then a vasectomy will not suit your purpose, and should not be considered.

OTHER METHODS OF BIRTH CONTROL WHICH MAY BE USED ARE:

- |                                   |                                   |
|-----------------------------------|-----------------------------------|
| (a) oral contraceptive (the Pill) | (e) aerosol contraceptive foam    |
| (b) Intrauterine Device (IUD)     | (f) rhythm                        |
| (c) diaphragm                     | (g) contraceptive jellies & cream |
| (d) condom                        | (h) abortion                      |

If you should decide that a vasectomy is not for you, yet you and your wife are not sure you do not want to have children or more children; a tubal ligation for your wife is an alternative method. This is a permanent method of birth control and is a relatively simple and painless procedure.

A vasectomy should not have adverse effects on your sex life. Any problems which develop in relation to having sexual intercourse would result from psychological rather than physical causes. After a vasectomy, a man's hormones remain normal and there is no noticeable difference in his ejaculate since sperm make up only a tiny part of the semen. Because the sperm cannot come out after the cord is cut, like other dead body cells, the sperm disintegrate and are reabsorbed by the body.

A vasectomy is not the answer to a problem of sexual maladjustment or failing sexual powers. Therefore, if you are getting a vasectomy in hopes of improving your wife's attitude toward sex or to increase your sexual powers you are likely to be disappointed

**5. Effect and Impact of Sterilization**

The purpose of vasectomy is to prevent sperm from entering the seminal fluid so that the female egg cannot be fertilized subsequent to intercourse. Sperm cells continue to be produced in the testes but disintegrate and are reabsorbed. However, the amount of fluid discharged during intercourse does not decrease more than 5% after vasectomy.

Vasectomy is to be considered a permanent birth control procedure, even though these operations can be reversed if absolutely necessary with a subsequent pregnancy rate of approximately 60%. Although a vasectomy must be thought of as producing permanent sterility, the procedure is not always 100% effective.

**6. Inquiries**

Any inquiries I had about the sterilization procedures described in the document were fully answered.

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DATE

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SIGNATURE OF PATIENT

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SIGNATURE OF WIFE

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
SIGNATURE OF PHYSICIAN