Vasectomy is a surgical procedure often performed in your doctor’s office that renders one sterile for the purpose of birth control. Under normal circumstances (prior to a vasectomy), sperm develop in the testis and during intercourse travel from the testicles through the vas deferens to the ejaculatory ducts. Here they are mixed with seminal fluid (produced by the seminal vesicles and prostate gland) and are ejaculated through the penis, sperm actually compromises only 5-10% of the total amount of fluid of each ejaculated specimen. Ejaculation changes very little, if any, after a vasectomy is performed. Other male genital functions including erection and urination also do not change.

The actual procedure takes generally less than 30 minutes in the doctor’s office. The scrotal area is cleansed with an antiseptic solution and sterile drapes are placed. A very fast acting local anesthetic is injected into the skin of the sac just below the base of the penis. Through this area, a small single or double incision is made and the vas deferens is located. More local anesthetic is used here to numb the special nerves of the testis and vas. A section of each vas deferens is excised and the cut ends either tied or cauterized. Small dissolvable sutures are then placed in the skin. A small gauze dressing is then placed on the wound following which you may get dressed and go home. The skin sutures generally dissolve and fall out in about 7 to 10 days following the procedure.

The decision to undergo a vasectomy should be well thought out. Other forms of birth control are available and, for all intent and purposes, once the surgery has been declared successful (after the follow-up sperm check), you will be permanently sterile. The chance of recanalization occurring is typically less than 1 in 1000. Any vasectomy, however, can be reversed. This is a long and tedious procedure performed in the hospital, which has a 50-80% chance of success. One should consider the vasectomy procedure to be permanent, realizing that changes in life-style (divorces, death, etc.) may occur. Sperm banking may wish to be considered prior to the vasectomy.

PRE-OPERATIVE INSTRUCTIONS

DO NOT TAKE ASPIRIN OR ASPIRIN PRODUCTS OR ADVIL, MOTRIN, IBUPROFEN FOR 7 DAYS PRIOR TO YOUR SCHEDULED PROCEDURE DATE. (UNLESS SPECIFIC INSTRUCTIONS ARE GIVEN TO YOU BY YOUR PHYSICIAN).

DAY OF THE VASECTOMY

YOU WILL RECEIVE A PRESCRIPTION FOR AN ANTIBIOTIC, TAKE AS DIRECTED.

PLAIN TYLENOL ALONG WITH ICE PACKS SHOULD ELIMINATE MOST OF YOUR DISCOMFORT. IF THIS DOES NOT ALLEVIATE YOUR PAIN YOU WILL BE GIVEN A PRESCRIPTION FOR PAIN MEDICATION, TAKE AS DIRECTED.

ACTIVITY

YOU ARE ADVISED TO GO DIRECTLY HOME, RESTRICT YOUR ACTIVITIES AND REST FOR THE DAY.

FOR THE NEXT 2 (TWO) WEEKS DO NOT ENGAGE IN ANY HEAVY OR STRENUOUS ACTIVITY.

SEXUAL ACTIVITY CAN BE RESUMED ACCORDING TO YOUR PHYSICIAN’S INSTRUCTIONS.

COMPLICATIONS

EXCESSIVE BLEEDING OR UNEXPECTED SWELLING.

ANY FOUL OR EXCESSIVE DRAINAGE, EXCESSIVE REDNESS, WARMTH, OR HARDNESS AT THE INCISION SITE.

FEVER IN EXCESS OF 100.5 (ORALLY) OR HIGHER.

IT IS ABSOLUTELY NECESSARY THAT A SPERM COUNT BE OBTAINED 3 MONTHS FOLLOWING THE PROCEDURE. SPERM CAN LIVE IN THE DUCTAL SYSTEM, DOWNSTREAM FROM THE SITE OF THE VASECTOMY FOR A NUMBER OF MONTHS. ADDITIONALLY, FOR UP TO A 3-MONTH PERIOD, THE BODY MAY ATTEMPT TO HEAL OR RECANALIZE THE DUCTS. THE CHANCE OF ONE BECOMING PREGNANT IS VERY RARE; HOWEVER, YOU MAY NOT RELY ON THE VASECTOMY FOR BIRTH CONTROL UNTIL CLEARED BY YOUR DOCTOR.

MICHIGAN INSTITUTE OF UROLOGY, P.C. policy states that full payment is expected at the time of the procedure. Our billing
personnel will assist you in dealing with your particular insurance company’s program concerning reimbursement for the vasectomy procedure. Removed portions of the vas deferens may be sent to a pathology lab for examination. That laboratory may charge for that examination and that bill is the responsibility of the patient, not the MICHIGAN INSTITUTE OF UROLOGY, P.C.