

## NO SCALPEL VASECTOMY

### Booking:

- Vasectomy is covered by provincial health care plans, however due to the occasional occurrence of patients who do not show up for their scheduled procedure, a **refundable** deposit of **\$250.00** is required at the time of booking.
- A patient may cancel their scheduled appointment with a minimum of **48 hours** notice and receive a **full refund of their deposit**.
- Cancellations with **less than 48 hours notice** will lose their deposit.
- The procedure can only be done on certain days of the week due to resource utilization in the clinic.

### Procedure:

- No-scalpel vasectomy is a minor procedure done in the office setting.
- It is done under local anesthetic “freezing” and the patient remains awake during the procedure.
- From start to finish the procedure takes approximately 45-60 minutes
- After the scrotum is prepared and the local anesthetic is applied, the vas deferens is isolated and ultimately transected “cut”, cauterized “burnt”, and a fascial interposition is performed (the cut ends of the tubes are sutured in different tissue planes)
  - The transection, cauterization and fascial interposition are 3 ways that all serve to prevent sperm from communicating from the testicles and the penis.
  - **\*\* Vasectomy is NOT IMMEDIATELY effective to prevent pregnancy\*\***
    - A minimum of 12 weeks **AND** 20 ejaculations are required **AND** then the patient must submit a semen sample to the lab for analysis.
    - It is only considered effective once a negative sperm count is reported (occasionally a repeat sample is necessary). Your Doctor will notify you of your result.
    - Do not stop using alternate contraception prior to receiving your negative semen-analysis result.

### **Pre-op:**

- Starting 10 days prior to procedure, do not take any aspirin, ibuprofen or other anti-inflammatory medications. These medications thin the blood and increase the chance of bleeding and adverse events.
- Additionally alcohol should be avoided for 48 hours prior to and after your procedure to prevent bleeding.
- The day before, shave the frontal part of your scrotum (below the penis). (Try not to cut yourself as this can increase the risk of infection)
- 1 hour prior to your procedure take 1000mg of Tylenol (unless you are allergic or intolerant to it)
- Wear loose pants but **supportive underwear**
- **Bring your consent form signed by both you and your partner.**

### **Post - Op**

- Day 1
  - Stay off your feet and rest as much as possible
  - Wear supportive underwear
  - Ice the scrotum for 15 minutes out of every hour you are awake
  - Take Tylenol for pain as needed
- Day 2
  - Stay off your feet and continue to rest as able
  - Remove dressing and you may shower (do not scrub the area, let the water run down)
  - Continue to ice as able
- Day 3-7
  - Avoid any strenuous physical work. You may be upright and walking, but any aggressive or heavy activity will increase the chances of having a surgical complication (Eg. Hematoma/swelling, pain, infection)
- Day 7 to Week 12
  - Ensure a minimum of 20 ejaculations during this time
  - Following the instructions on the semen sample requisition, submit a semen sample to the lab after week 12
  - Do not stop using contraception (condoms/birth control/etc.) until you are notified of a negative sperm

count

## **Consent for Sterilization**

- The procedure for “no-scalpel” vasectomy, and the material risks have adequately been explained to me by Dr. Thomson.
- I consent to undergo “no-scalpel’ vasectomy
- I understand that this operation is intended to result in permanent sterility, although this result has not been guaranteed.
- I understand vasectomy is not a method to prevent sexually transmitted infection.
- I acknowledge I have read the vasectomy information sheets and understand that a vasectomy is not immediately effective as a form of contraception. Furthermore I understand I will need to wait for a negative semen-analysis prior to considering my vasectomy a success.
- I understand that for all intents and purposes vasectomy may be an irreversible procedure.

_____	_____
Patient Signature	Date
_____	_____
Partner/Spouse Signature	Date
_____	_____
Physician Signature	Date