

Consultation

We will discuss the procedure in person to determine the suitability of no-scalpel vasectomy for you. Among other things, we will go over your health history as it relates to vasectomy, and you will receive a detailed instructions on how to prepare.

At some point, you will be required to sign a consent form. It will state that you understand the vasectomy procedure and its potential risks and that it is not guaranteed to result in permanent sterility.

Prior to signing this form, be sure that you are informed and comfortable with your decision. It is important that you fully discuss and resolve with me any lingering questions or concerns that you may have.



Can a vasectomy be reversed?

In many cases, the cut ends of the vas deferens can be surgically reattached. However, this procedure, *vasovasectomy*, is expensive and, for a variety of reasons, does not guarantee return to fertility. **Vasectomy should be considered a permanent procedure.** If you're thinking about a reversal now, perhaps you should take more time to decide whether vasectomy is right for you.

Before the Procedure

1. If you have not already done so, sign the elective surgery informed consent form.
2. **Do Not** consume any aspirin or other blood thinners for 5 days prior to the surgery without prior medical approval. Taking aspirin or other blood thinners increases the risk of bleeding.
3. The day of, shave away the hair from the front of the entire scrotum below the penis.
4. To reduce the risk of infection, thoroughly bathe the scrotum and groin the day before and the morning of the procedure.
5. Several hours before the procedure, take any preoperative medications as directed.
6. Bring with you a clean athletic supporter or brief underwear.

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Patient Information

No-Scalpel Vasectomy

Your Personal Guide
To This Safe,
Innovative Procedure



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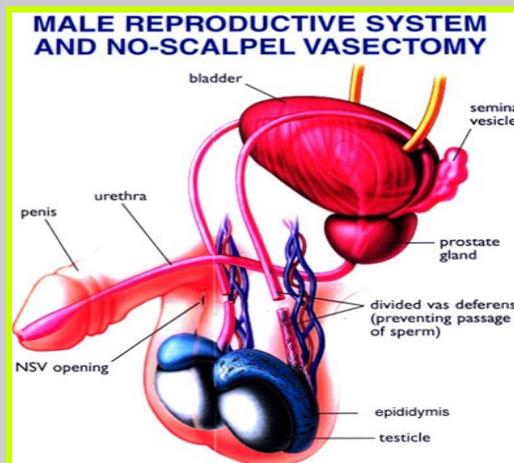
Safe, Effective Birth Control

Vasectomy is one of the safest and most effective methods or permanent birth control. It is less expensive than tubal ligation, the other most common contraceptive surgery. For these reasons, some 500,000 men in North America choose vasectomy each year.

No-Scalpel Vasectomy

Developed in China in 1974, No-Scalpel Vasectomy (NSV) reduces vasectomy's already low complication rate.

NSV uses an advanced technique to anesthetize the scrotum more effectively. It requires no scalpel. Instead, the physician carefully isolates the vas deferens using the fingers of one hand. The vasa are then fixed just below the scrotal skin with an instrument designed to hold firmly without pinching. A single small opening in the skin is made with pointed forceps. The vasa are then pulled through the skin, cut, and sealed conventionally. When the operation is done, there are no sutures needed to close the tiny opening.



Benefits of NSV

- Less Discomfort
- 10 times fewer complications
- No stitches or sutures
- Quicker recovery

Commonly Asked Questions

How will vasectomy affect me?

Vasectomy only interrupts the tubes that carry sperm from the testes to where they are added to your semen. Your penis and testes are not altered. All hormonal and sexual functions are completely unaffected. Your body still produces semen, and erections and ejaculations occur normally. The only difference is that your semen will no longer contain sperm. As before, the body naturally absorbs unused sperm.

Can I discontinue other birth control methods right away?

NO! Sperm can remain in the vas deferens above the operative site for weeks or even months after vasectomy. You are not considered sterile until *two* post-surgical semen tests have shown that no sperm remain. Until then, you must continue to use other birth control to prevent pregnancy.

Is vasectomy painful?

No. You may feel mild discomfort when the local anesthetic is given. After it takes effect, you should feel no pain, although some men feel a slight 'tugging' sensation as the vasa are manipulated.

How long is the recovery time?

Generally, two to three day's rest is recovery enough before men return to work and most non-strenuous physical activity. Sex with other contraceptive methods can usually be resumed after seven days.

What are some potential complications?

- Bleeding (hematoma) and infections, though rare, are the most common complications of vasectomy. NSV reduces likelihood because the opening in the scrotum is so small that the blood vessels responsible for bleeding are less likely to be affected.
- Recanalization is a highly unusual situation in which sperm finds its way across the void between the blocked ends of the vas deferens. It usually occurs in the first 2-3 months, but has been known in extremely rare cases to occur even years later.
- Sperm granuloma, a hard, sometimes painful pea-sized lump that forms from sperm leaking from the cut vas deferens. It is not dangerous and is almost always resolved by the body in time. Mild pain relievers and scrotal support are usually all that are needed for the symptoms.
- Congestion, a sense of pressure in the testes, may cause discomfort some 2 to 12 weeks after vasectomy. Symptoms usually resolve in time.

Does vasectomy pose long term health risks?

In 1993, a panel assembled by the American Urology Association, the National Institutes of Health, the Association for Voluntary Surgical Contraception, and the National Cancer Institute affirmed that vasectomy is a safe, effective means of permanent birth control and advised that physicians continue to offer all men, vasectomized or not, regular screening for prostate cancer and other illnesses.