

Frequently asked questions

- Q. Is this procedure guaranteed to prevent my partner from becoming pregnant?
- A. You need to use another method of birth control until a follow-up semen-analysis that will take place at least 3 months after the procedure, and after 25 ejaculations. The success of the surgery will not be confirmed until the semen-analysis. Even with a successful semen-analysis, there is a rare chance that a man may still impregnate his partner (1/2,000 men).
- Q. Is a vasectomy really permanent?
- A. You should consider a vasectomy permanent when making the decision to have one. However, there are vasectomy reversal procedures and other methods to impregnate a woman after having a vasectomy. These are not covered by insurance.
- Q. How does a vasectomy compare to other methods of birth control?
- A. A vasectomy is a permanent type of birth control. Sperm are still produced after a vasectomy, but they die and are reabsorbed into the body.
- Q. How soon after the surgery can I have sexual intercourse?
- A. About a week after the surgery you can have sexual intercourse. You must use another method of birth control until your follow-up sperm-count test, however.
- Q. Will this procedure affect my sexual health?
- A. No, a vasectomy should not interfere with your sex drive, ability to have erections, sensation of orgasm, or ability to ejaculate.

Notes



Vasectomy

A common procedure that acts as a permanent form of birth control for men.

Vasectomy

A vasectomy is a common procedure that clamps, cuts, or seals the vas deferens from each testicle. This should be considered a permanent form of birth control that stops sperm from being released when a man ejaculates. An egg cannot be fertilized when there are no sperm in the semen.

You will be asked to sign a consent form before your procedure. Before you sign this consent form, **it is important to be sure that you do not want to father children in the future.**

- * **You must use another method of birth control until you have a post-vasectomy semen analysis that will confirm if the procedure was successful.**

Before your vasectomy

- **Make sure you plan for a family member or friend to drive you home after the procedure.**
- Stop taking aspirin, ibuprofen, or naproxen **for 1 week before surgery.** These may cause bleeding.
- Talk with your doctor about any blood-thinners you take, including Coumadin (warfarin), Lovenix, Plavix, etc.
- Shower, clean and shave your scrotum on the day of your vasectomy.
- **Arrive at least 15 minutes** before your appointment time.
- If your surgery is being done in the clinic, eat a light snack before. However, if you are going under general anesthesia in the operating room, do not eat before you procedure.
- Bring an athletic supporter (jockstrap) or snug cotton briefs to wear after.

During your vasectomy

The entire procedure takes about **20 to 30 minutes.**

To begin, the testicles and scrotum are cleaned and may be shaved. Your doctor will apply a numbing medication to the area.

Your doctor will make one or two small openings in your scrotum. The vas deferentia are lifted through the openings and are permanently sealed. They are then replaced inside the scrotum. The site is sealed with dissolvable stitches that do not need to be removed.

After your vasectomy

- Your scrotum will be numb for **1-2 hours** after the procedure.
- **Apply an ice pack** to the area and lay on your back as much as possible.
- Wear tight cotton briefs or a jockstrap for support after the procedure.
- Avoid heavy lifting or strenuous activity and exercise for **5-7 days** after your procedure.
- Schedule a semen analysis **3-6 months** after your vasectomy to confirm if the procedure was successful.

Post procedure symptoms

These symptoms are **normal** after your procedure:

- Some swelling and minor pain in the scrotum for a few days.
- A small amount of bloody discharge from the incision

These symptoms are **abnormal**—please call the Urology clinic if you have any of the below symptoms:

- Increasing pain or swelling in the scrotum
- A large black-and-blue area, or a growing lump
- Fever of 100.5 F or greater or chills
- Increasing redness or drainage of the incision
- Trouble urinating

