

**EASTERN CONNECTICUT UROLOGY
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DESCRIPTION: The term "vasectomy" refers to the surgical obstruction (by any of various methods) of the tube that transports sperm from each testicle known as the "vas deferens". Vasectomy is a minor surgical procedure that should be considered permanent, as it can be costly and sometimes impossible to reverse. Because of the permanent nature, the decision to have a vasectomy should be carefully considered and entered into only after careful consideration and exploring other alternatives. This procedure is frequently carried out by urologists in the office setting and offers reliable and permanent birth control.

BENEFITS: Vasectomy is performed under local anesthesia in a doctor's office and offers a greater than 99% success rate. Depending on the study referenced, the failure rate of vasectomy is less than or equal to all other methods of contraception except abstinence.

DRAWBACKS: (1) Vasectomy is considered a minor surgical procedure with low surgical risks. (2) Vasectomy is costly to reverse and in some cases is NOT reversible. (3) There is no protection from sexually transmitted diseases.

RISKS: Include but are not limited to: (1) **Bleeding.** Rare cases of bleeding following vasectomy do occur. The vast majority of these cases are minor. Rarely the bleeding may require surgical drainage in the office or operating room. (2) **Infection.** Rare cases of infection occur and could require antibiotic treatment and rarely surgical management. (3) **Sperm Granuloma.** A small (pea sized) lump commonly occurs in up to 25-40% of vasectomy patients. These are considered normal after vasectomy but rarely may cause symptoms and require removal. (4) **Failure/Recanalization.** In less than 1% of vasectomies there may be failure of the vasectomy. This may occur "early" in which the vasectomy fails to remove all the sperm from the semen. You are therefore required to use alternative birth control until semen analysis is performed and shows no sperm in the semen. If early failure is identified you will be offered a repeat vasectomy at no cost. Failure can occur "late" in which patients who were proven to have no sperm in their semen redevelop sperm in the semen. Late failure is medically called "recanalization" and is considered a spontaneous healing of the vasectomy. (5) **Vasal pain syndrome/epididymitis.** Less than 1% of patients report chronic, intermittent discomfort following vasectomy. The vast majority of these men use occasional ibuprofen to relieve discomfort, but more serious chronic pain has been described after vasectomy. (6) **Anti-sperm antibodies.** Men who undergo vasectomy may develop anti-sperm antibodies which may reduce chances of vasectomy reversal but otherwise cause no medical harm.

ALTERNATIVES: There are many alternatives to vasectomy all of which have their own risks and benefits. Common alternatives include: (1) Barriers including condoms or female diaphragm, (2) Spermicide, (3) Tubal ligation (female), (4) Oral contraceptive pills (female), (5) Intrauterine device (female), (6) Abstinence.

I, the undersigned, have read the above information, been counseled to my satisfaction, and request a bilateral vasectomy be performed for permanent birth control. I understand that there is no absolute guarantee that this or any method of birth control will be successful. I understand that alternative contraception must be used until semen analysis shows no sperm. I understand that there is a small risk of side effects that may require additional medical treatment and release the physicians at Eastern Connecticut Urology from liability for such conditions, including but not limited to time lost from work, salary unearned, and medical expenses incurred to treat such complications.

Patient Signature _____ Significant Other's Signature _____
(Optional)
Date _____ Date _____

Print Name _____