

# Vasectomy Request Form

Name \_\_\_\_\_

Address \_\_\_\_\_

D.O.B / Age \_\_\_\_\_

Contact Number (M) \_\_\_\_\_ (H) \_\_\_\_\_

Number of Children \_\_\_\_\_ Age/s of children \_\_\_\_\_

Partner aware of request for Vasectomy  Yes  No

Considered other Contraceptive options  Yes  No  
(pill, condoms, iud, etc)

Specific Drugs  Warfarin

Clopidogrel

Allergies  Nil Known

If yes, please specify \_\_\_\_\_

Medications  Nil

If yes, please specify \_\_\_\_\_

Comorbidities / medical problems  Nil

If yes, please specify \_\_\_\_\_

## OPERATION

1. If under local anaesthetic – a quick injection on each side of the scrotum – pain for a few seconds which then resolves.
2. If general anaesthetic, you will be put to sleep by an anaesthetist.
3. Small scrotal incision (cut) – one on each side of the scrotum.
4. Vas (pipe that joints testis to penis and conveys sperm) is lifted out.
5. 1-2cm length of vas excised (cut out).
6. Ends diathermied (burnt, to seal ends).
7. Bleeding stopped and vas returned to scrotum.
8. Incision (cut) closed with dissolving stitches – they will fall out in 7 – 14 days.

## AFTER OPERATION

1. Tight 'Y' front underwear for 2 – 5 days.
2. Avoid alcohol for 5 days.
3. Avoid strenuous activity for 7 days.
4. Avoid heavy lifting for 7 days.
5. Must continue contraception until 2 clear semen samples at 10 and 12 weeks (this will be organized after your operation, before discharge).
6. Can resume sexual activity after 2 weeks.



**CONSENT INFORMATION/RISKS**

**INITIAL & DATE  
WHEN READ**

1. You must consider this operation to be irreversible – if you choose to have it reversed in the future, there is less than 50% success (pregnancy) rate. \_\_\_\_\_
  
2. There is a very small failure rate (<1%) – the cut ends can rejoin and fuse together and transmit sperm in the ejaculate – this will usually be picked up by the semen samples at 10 – 12 weeks – therefore you **MUST** continue to use contraception until 2 clear semen samples – usually at 10 – 12 weeks. \_\_\_\_\_
  
3. Bleeding from the incision (cut) edges. Bruising around the incision (cut). \_\_\_\_\_
  
4. Rarely a large bleed and scrotal swelling. You may require reoperation, or the clot/bleed (haematoma) will resolve by itself over weeks to months. \_\_\_\_\_
  
5. Infection of the incision wound (cut) requiring antibiotics. \_\_\_\_\_
  
6. Pain – most men experience minimal to moderate discomfort that can be controlled with simple painkillers – panadol, panadeine forte. This should resolve in 1-3 days. Very rarely for reasons we do not always understand, a small number of men will develop chronic pain in their scrotum. Often there is no cause found for this and a referral to a pain specialist may be required. \_\_\_\_\_
  
7. Granuloma formation – little lumps that develop on the cut edges of the vas – usually painless – rarely painful. If painful they can be cut off at a further operation. \_\_\_\_\_
  
8. Numbness around the incision (cut) and extending onto scrotum. \_\_\_\_\_

