

Request & Consent for Vasectomy



- ◆ Please read this form carefully before you have your consultation with the doctor.
- ◆ You should tick or mark the box next to each paragraph to indicate that you have read and understood that section.
- ◆ You will have the opportunity to discuss any specific questions or concerns that you may have when you talk with the doctor
- ◆ Please do not sign this consent form until you have spoken with the doctor.

Name: _____ DOB _____

Vasectomy is a permanent, safe and effective method of contraception. By the age of 40 years, about 25% of Australian men have undergone vasectomy and there are about 30,000 procedures performed annually. Vasectomy is a low risk procedure however no medical practitioner can provide a guarantee or assurance regarding the outcome of any procedure, and this clinic has an obligation to warn you of the known risks when undergoing vasectomy, regardless of how unlikely these risks are. The list below is not to alarm you but to make you aware of some possible minor complications

- Description of the vasectomy procedure** - It is a simple operation taking about 30 minutes. A small incision is made in the skin of the scrotum, the vas deferens is cut and the two ends are sealed by cauterisation (hot needle) to prevent rejoining. The procedure is carried out using local anaesthesia which will numb this area preventing pain.

Known possible complications of the proposed operation:

- Swelling and/or bruising**
you may experience some bruising and swelling after the vasectomy. This may last a few days and may be relieved by simple analgesic medication, eg. Panadol, (not aspirin) and applying an ice pack.
- Infection**
This complication may occur up to 7 days after the procedure and may appear as an enlarging painful lump above the testicle and around the area where the vas deferens (tube) was divided. This complication may occur in up to 3 in every 100 patients. If you notice any severe pain, swelling and redness of the scrotum, please call us. Treatment with antibiotics may be required.
- Bleeding**
A small number of people may experience bleeding from the incision site (approximately 2 in every 100) This type of bleeding may be ceased by pinching the skin edges together for 5 minutes and applying some pressure. More rarely, the bleeding may occur inside the scrotum-causing swelling and pain. This deeper collection of blood is called a haematoma. It may settle spontaneously but may in-fact require treatment, usually drainage under a general anaesthetic
- Tender Lump or Sperm Granuloma**
Less than 1 - 3 in every 100 men may develop a hard, sometimes painful, pea-sized lump, at the testicular end of the vas deferens. This is the result of some sperm leakage from that end of the tube. The lump is not a serious problem and is almost always absorbed by the body in time, but if it troubles you, it can be surgically removed.
- Long Term Testicular Pain Syndrome**
If the testicular end of the vas deferens (tube) becomes blocked, then back pressure into the testicle may occur and result in chronic, usually mild aches or pain in the scrotum, back or lower abdomen. This may occur in approximately 1% of cases and is usually treated with oral analgesia for 1-3 months until it resolves spontaneously. Rarely, additional surgery is required.
- Failure**
About 1 in 2000 vasectomies fail. There is no contraception that is 100% effective, except abstinence. Despite dividing the two ends of the vas deferens, the ends may rejoin making the man fertile again! This usually occurs in the first few months after vasectomy, so it is very important to have the recommended sperm counts after the procedure. It is much rarer for the ends to rejoin at a later date.
- Reversal**
Vasectomy should always be considered a permanent and not temporary form of contraception. Microsurgery is required for reversal and there is no Medicare rebate, so it would be very costly to have a reversal (approx \$6000) and may only be successful in about 40-50% of cases. Despite the two ends of the vas deferens being rejoined with successful microsurgery, some men may produce antibodies against their own sperm, making the sperm infertile anyway.

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- Psychological Effects**
It is unlikely that men experience psychological effects from a vasectomy. A vasectomy makes no difference to a man's sex drive and performance. In fact, some men state that their sex life is better because the worry about adequate contraception has been removed.
- Anaesthetic complications.** If you are having an intravenous anaesthetic, the anaesthetic medications are given through a needle into a vein in your arm. These medications carry some risk, including allergic reactions, however these are rare. Drug reactions may be potentially serious, even fatal, but can usually be treated effectively with no long-term consequences for the patient. Prior to the procedure you must have had nothing to eat for 6 hours and no water to drink for 3 hours. You must also tell the doctor about any existing health problems or known allergies.
- Possibility of unexpected costs** On rare occasions, it may be necessary to arrange for additional diagnostic tests or for treatment at another facility by another medical practitioner in circumstances that were not foreseeable or not known to be needed at the time this consent was given. You will be advised if any such tests or referrals are necessary, but you will be responsible for any costs that may arise if this happens.
- Aftercare:** The clinic will issue you with an aftercare instruction sheet before you leave the clinic. It is important that you read this sheet and follow these instructions carefully. Please contact the clinic immediately or see your GP if you have any concerns about symptoms that you may be experiencing

Do you have any specific concerns?.....

By signing this consent form:

- I am requesting and consenting to a vasectomy being performed, along with the administration of anaesthetic drugs and other medications normally associated with this procedure.
- I am acknowledging that I have read and understood this consent form.
- I am sure of my decision to have a vasectomy and understand that as a general rule, this procedure should be considered to be permanent and irreversible.
- I have had the opportunity to ask the operating doctor questions, and I am satisfied with the answers to these questions. I acknowledge that all care will be taken to provide an uncomplicated outcome from my procedure, but that no guarantees or assurances have been made to me concerning the results of this operation.
- I accept all risks, whether stated or unstated, and I understand that complications can occur in any operation or procedure.
- I understand that it is impossible to list every possible adverse outcome or complication that could occur and that the surgery may not always be successful.
- If I have had an intravenous sedation, I understand that I must not sign legal documents, operate machinery or drive a car until the day following my operation.

Patient Signature _____ Date ____/____/____
 (to be signed during the consultation with the doctor)

I have consulted with the patient, explained the procedure and answered any of his questions. I believe that he has understood the nature and purpose of the operation and wishes to proceed.

Doctor's Signature _____

Doctor's Name _____ / /