

Introduction

This guide is intended to give every man contemplating vasectomy the information needed to make an informed decision and prepare for the procedure. If you have any questions about the information below, call us to discuss. We're here to help.

Let's Talk About Family Planning

There are several choices of temporary and permanent birth control available, and couples should choose a method of contraceptive that best suits their needs. Temporary methods include condoms, spermicides, diaphragm, IUD, the pill, the patch, and Depo-Provera. Permanent methods include female sterilization by tubal ligation and male sterilization by vasectomy.

Questions for you to consider when considering permanent sterility: While no one can predict the future, try, and take into consideration the possibility of unforeseen changes in your life, or in the lives of your partner and children. Can you imagine a situation in which you would regret no longer being to father children biologically? Would you consider adoption? You should also consider the risks and consequences of having an unintended pregnancy while using a temporary method of contraception.

Choosing any form of permanent sterility is a major life decision that should be considered carefully. Couples should discuss the pros and cons. You may also want to speak with your primary care. Be sure to reach a decision you'll be happy with now, and in the future.

Vasectomy, a Brief Overview

Vasectomy is an operation on a man to cause permanent sterility. It's a common operation performed over 500,000 times annually in the United States. It can be performed in a doctor's office or clinic and usually takes between 15 and 30 minutes. It works by blocking the transport of sperm from

the testicles. **While over 99.5% effective at preventing pregnancy, a vasectomy has zero effect on sex drive, testosterone, or sexual performance.**

After the procedure, men will still be fertile for several weeks. Temporary birth control should be used until semen is tested and shows no more sperm. After a man receives a successful semen test result, no additional testing is required. Semen released with ejaculation will appear normal but will not contain sperm.

A vasectomy is reversible, but it is not always successful. Men should only get a vasectomy when they are sure they do not want to have any more children.

Let's Review Male Reproductive Anatomy

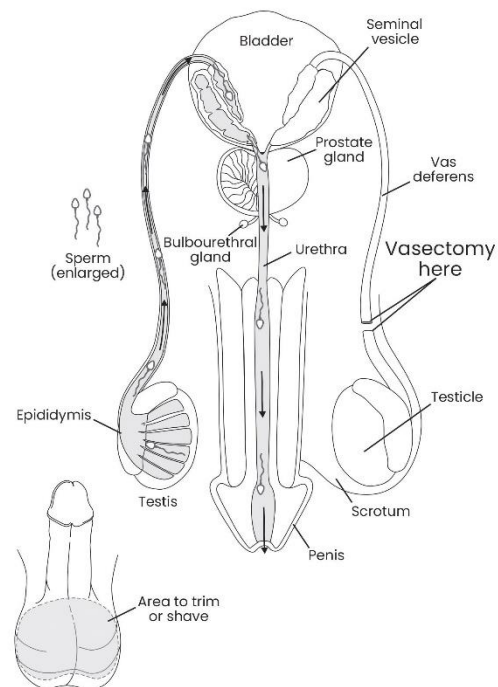
Men have two testicles. Each testicle is a smooth, oval-shaped gland, which rests in the sack-like scrotum and is connected by its blood vessels, nerves, and vas deferens.

The testicle has several long tubes in which sperm are made and channeled into the epididymis, a soft, comma-shaped tube on the top and back of each testicle.

The epididymis collects sperm that travels through the vas deferens, a long firm tube leading out of the scrotum and around the bladder to join the seminal vesicle.

Sperm can be stored for weeks in the vas deferens before release during ejaculation.

Both left and right seminal vesicles empty through the single prostate gland and out the penis through the urethra, the tube that also carries urine from the bladder. Remember the organs are paired, left and right, so both vas deferens must be interrupted for a successful vasectomy.



DrSnip Vasectomy Technique

DrSnip has been performing vasectomy for decades, and continually innovates to make the procedure less and less invasive. We do not use any needles, nor scalpels; we do not make any stitches or insert any titanium clips; and we do not remove any part of the vas deferens.

We use a hypospray injector to instantly deliver a tiny stream of lidocaine solution through the skin and into the vas deferens. The numbing effect is instantaneous, faster, and more effective than a needle injection. Patients typically describe the sensation as a mild snap of a rubber band against the skin. In addition to improving patient comfort and relieving anxiety, it also avoids needle damage to blood vessels in the area.

After the doctor gently locates each vas deferens and administers local anesthetic, the vas deferens is then held just under the skin on the front of the scrotum while a small puncture opening (about 1/8th of an inch) is made to expose the vas. The vas is delicately separated from the sheath of surrounding tissues and brought out through the opening. It is cut and sealed using a small electric current (electrocautery). The two ends of the vas are then separated by a half-inch, and a layer of sheath tissues closed and tied with an absorbable suture, forming a barrier between the ends. This barrier helps to ensure that when healing is taking place, the ends of the vas will not reattach.

The DrSnip technique uses the same central opening for both vas deferens. We do not make a second incision. No stitches or clips are needed in the DrSnip Vasectomy Technique.

Vasectomy Risks

As with any surgical procedure, complications do occur occasionally. Most of these complications are minor and temporary and are easily treated with rest and medication. More serious complications occur in less than 1% of all vasectomies, and less than 1 in 1,000 DrSnip patients.

WHAT COMPLICATIONS CAN OCCUR?	WHAT TREATMENT IS REQUIRED?
Inflammatory response, tenderness along the vas or around the testis and epididymis may occur after three to five days, usually just on one side, in one out of 20 patients (5%).	Anti-inflammatory medicine, such as Aleve or ibuprofen. The inflammation usually subsides within a few days.
Bleeding from the skin incision.	Controlled with direct pressure.
Infection of the scrotum (0.1%).	Antibiotic or other treatment.
Sperm granuloma, a tender, inflamed bump in the scrotum, in response to sperm leaking into the tissues. Delaying ejaculation during the first week after vasectomy may reduce the risk, but it can occur spontaneously at any later time (1.5%).	Usually no treatment is required; it resolves spontaneously, over time.
Scrotal hematoma is a large collection of blood inside the scrotum, where a blood vessel has leaked. A large swelling in the scrotum would be noticeable, usually within 48 hours after vasectomy (0.1%).	Requires immediate treatment with strict bed rest, ice, and elevation. Surgery to stop the bleeding is very rarely necessary.
A sensitive scar or neuroma may form along the vas at the site of vasectomy.	Rarely bothersome enough to require injection with medicine or surgical removal.
Allergic reactions or other unusual reactions to anesthetics, medications, or surgery can occur even with a prior history of reaction or drug allergy. These reactions are very rarely serious or life threatening.	Medications or rest.

Vasectomy Aftercare

The following table illustrates what you can and cannot do the day of your vasectomy and the week following the procedure. There are no restrictions after 7 days.

ACTIVITY GUIDELINES TO PREVENT COMPLICATIONS FOLLOWING VASECTOMY		
	YOU MAY:	DO NOT:
<p>Day of surgery: You must go directly home after your vasectomy. Rest until the next day</p>	<ul style="list-style-type: none"> • Eat and drink normally • Sit, recline, or lie down • Enjoy TV, reading, computer work • Take Aleve, Tylenol • Take ibuprofen • Write love letters 	<ul style="list-style-type: none"> • Drive yourself home • Return to work • Go out to eat or shop • Exercise, go for a walk • Have guests over • Visit friends • Engage in sexual activity
<p>Next 7 days:</p>	<ul style="list-style-type: none"> • Do office work • Go walking • Drive your car • Lift/carry up to 40 lbs. • Go shopping • Take showers • Do light physical work • Have sex gently 	<ul style="list-style-type: none"> • Heavily exert yourself • Go jogging or golfing • Ride a bike • Lift/carry more than 40 lbs. • Roughhouse with kids • Go swimming, bathing • Jump or strain • Disturb your incision

Getting a Vasectomy

If you decide on vasectomy, check around for suitable providers. If you choose DrSnip, you can begin by submitting your information at on [our site](#), or call us at 888.SNIP.DOC to discuss any questions you have.

Appointments are available weekly, including Saturdays. We offer a single visit option that includes the consultation and procedure in one appointment. We accept many insurances and will check your insurance benefits for you.

Other DrSnip Resources

Below is a list of links that can provide you with more information as you consider vasectomy:

[Insurance Estimate](#)

Enter your insurance information to receive an up-to-date estimate of coverage and out-of-pocket costs.

[DrSnip FAQs](#)

Questions about everything from preparation to aftercare.

[DrSnip Technique](#)

More information about the DrSnip Vasectomy technique.

[Semen Testing](#)

Explanation of semen testing options and mail-in semen test kits.

[Contact Us](#)

Online form for any questions you have.