Contact Numbers

Who can I contact if I have a problem when I get home?

If you experience any problems related to your surgery or admission once have been discharged home.

Please feel free to contact the ward you are discharged from for advice from a nurse. They will assist you via the telephone, advise you to attend a walk in centre or ask you to make your way to the Emergency Department at Whiston Hospital depending upon the nature of your concern.

Sanderson Suite 01744 646089/646098

Ward 4A 0151 430 1420

Ward 4B 0151 430 1637

Ward 4C 0151 430 1643

Whiston Hospital Warrington Road, Prescot, Merseyside, L35 5DR Telephone: 0151 426 1600 St Helens Hospital Marshall Cross Road, St Helens, Merseyside, WA9 3DA Telephone: 01744 26633

www.MerseyWestLancs.nhs.uk



Vasectomy Aftercare Information

If you need this leaflet in a different language or accessible format please speak to a member of staff who can arrange it for you.

اگر به این بروشور به زبان دیگر یا در قالب دسترسپذیر نیاز دارید، لطفاً با یکی از کارکنان صحبت کنید تا آن را برای شما تهیه کند.

Jeśli niniejsza ulotka ma być dostępna w innym języku lub formacie, proszę skontaktować się z członkiem personelu, który ją dla Państwa przygotuje.

Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil, vă rog să discutați cu un membru al personalului să se ocupe de acest lucru pentru dumneavoastră

如果您需要本传单的其他语言版本或无障碍格式、请联系工作人员为您安排。

إذا احتجت إلى هذه النشرة بلغة أُخرى، أو بتنسيق يسهل الوصول إليه، يرجى التحدث إلى أحد الموظفين لترتيب ذلك لك.

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Department: Sanderson Suite **Document Number:** MWL2235

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Vasectomy

A vasectomy is regarded as an irreversible day case surgical procedure for men who do not wish to have more children and have completed their family.

Small tubes called vas deferens in the scrotum that carry sperm are cut or blocked. This is to prevent sperm from mixing with the semen which is released when a man ejaculates.

It is important that you understand you are **not instantly sterile** after the operation. This is because some of the sperm have already passed beyond the section where the tubes are tied off.

These sperm need to be cleared by normal ejaculation. On average, you will need 20 to 30 ejaculations to clear them

Vasectomy is the most effective method of male sterilisation. The procedure should always be regarded as irreversible.

It will not protect you against sexually transmitted infections.

Failure of the procedure is possible but rare.

At least 12 –16 weeks after your vasectomy, you will be asked to produce a specimen of semen for examination under a microscope. Please read the instructions for producing and delivering the specimen very carefully. If no sperms are present, you will be given the "all-clear" that you are sterile. If the sample still contains sperm, you will be asked to produce a further sample a few weeks later to ensure that you are clear.

Results

The result is sent to the secretary at St Helens Hospital for the consultant's attention. The consultant will then contact you by letter to confirm the sample was clear, and the operation a success.

If your sample shows some sperm present, the consultant will ask you to produce a second sample for motility testing (to see if the sperm is live or dead).

If a motility test is required, the appropriate bottle, form and special instructions for providing the sample will be sent to you in the post.

A further letter will be sent to you from the consultant to confirm if the second sample was clear, and therefore your vasectomy a success.

Results will be sent by post – the secretary or ward cannot give results over the telephone.

Remember you are not sterile immediately after your procedure. IMPORTANT Until you get the "all clear" confirmation, you MUST continue with other contraceptive methods as precautions.

After-effect	Risk
Mild bruising and scrotal swelling with seepage of clear yellow fluid from the wound after a few days	Almost all patients
Blood in your semen the first few times you ejaculate	Between 1 in 2 & 1 in 10 patients
Troublesome chronic testicular pain which can be severe enough to affect day-to-day activities	Up to 1 in 20 patients
Significant bruising and scrotal swelling requiring surgical drainage	Between 1 in 10 & 1 in 50 patients
Epididymo-orchitis (infection or inflammation of your testicle)	Between 1 in 10 & 1 in 50 patients
Early failure (post-operative semen analysis shows persistent motile sperms) so that you are not sterile	1 in 250 patients
Late failure (re-joining of the ends of the tubes after initial negative sperm counts) resulting in fertility & pregnancy at a later stage	1 in 2000 patients

British Association of Urological Surgeons (BAUS) Limited

Post Vasectomy

Instructions for collecting semen samples

You will need to provide a sample of your semen (sperm) at 16 weeks commencing

Regular intercourse or masturbation is essential to deplete remaining sperm reserves, giving quicker results on semen analysis.

Do not have intercourse for at least 48 hours prior to your sample.

Please note for accurate results the sample must reach the lab within 2 hours of being produced. This must be produced by masturbation.

Put a complete sample of semen (not urine) into the clean container.

Do not open the container until you are ready to produce the sample.

Seal the container **immediately** afterwards.

Write your **name**, **date of birth**, **date and time** of production of the sample on the label of the container.

Keep the sample warm by carrying it under your clothing near to your body. The specimen in the container provided must be handed into the Pathology Lab at the Visitors Reception, Pathology Laboratory, Nightingale House at Whiston Hospital.

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All patients will require an appointment for post vasectomy semen analysis.

Please telephone the laboratory on **0151 430 1831** or **0151 430 1837** to arrange an appointment. The appointment booking service will be open from Monday to Sunday from 8am to 7pm.

Post Operative Information

- You may have been given a scrotal support ("jock strap") to make the post-operative period more comfortable. If you find this difficult to wear, you can use tight, supportive underwear or cycling shorts.
- Wear loose fitting trousers or jogging pants until you are comfortable.
- Keep the area dry for the next 48 hours then shower or wash only.
- The local anaesthetic will wear off after four to six hours.
- There may also be some scrotal swelling and bruising with a small risk of bleeding and infection.
- It is advisable to take simple painkillers such as paracetamol, before the local anaesthetic wears off, to help keep discomfort at bay.
- You may resume normal activities such as work, exercise and sexual intimacy when you feel comfortable and able to do so. If you have a job that involves heavy lifting or strenuous activity, then you may need to avoid it for a week or so. Please check with your surgeon, as you may need a sick note.

- Your skin sutures will dissolve within a few weeks and do not require removal. Avoid soaking in the bath as that could cause the sutures to break down too soon
- If your bruising, swelling or pain is getting progressively worse, day by-day, you should contact your surgical team for advice.
- If you develop a high temperature, increased redness, throbbing or wound discharge, please contact your GP.
- You may find ice packs helpful to reduce pain and swelling in the first few days after surgery (but do not apply them directly to your skin).

The possible after-effects and your risk of getting them are shown below.

Some are self-limiting or reversible, but others are not.

We have listed some important but very rare after-effects (occurring in less than 1 in 250 patients) individually.

The impact of these after-effects can vary a lot from patient to patient; you should ask your surgeon's advice about the risks and their impact on you as an individual:

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