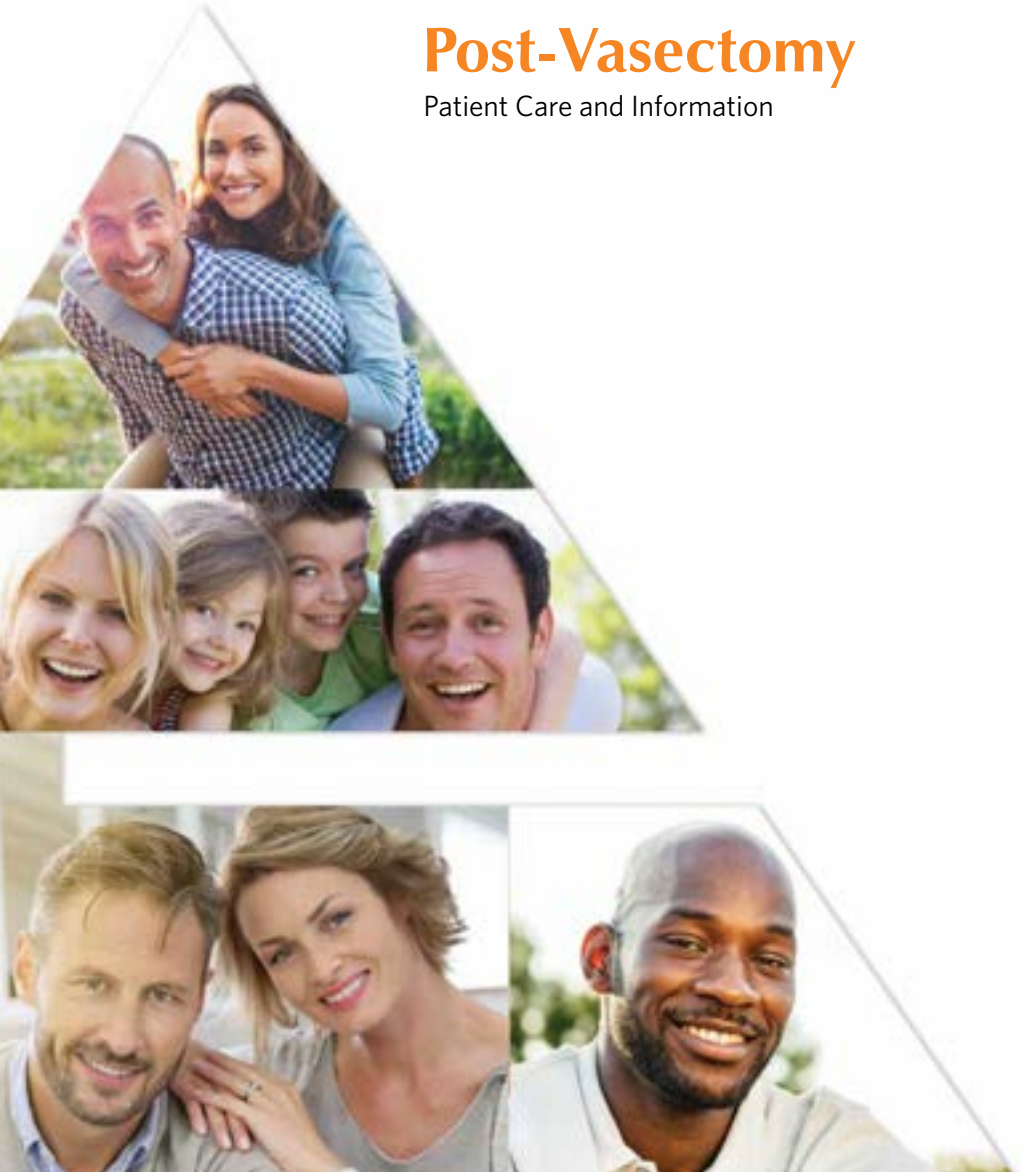




Post-Vasectomy

Patient Care and Information



Post-Vasectomy Information

Wound Care

The stitch or stitches (if stitches were used) to close the skin will dissolve by themselves in a time frame of 5-10 days. Occasionally, they will fall out sooner and the edges of the skin will open up. If this occurs, the sutures do not need to be replaced as the surgical site will heal on its own.

Wash the area gently in the shower only with mild soap to remove any dried blood around the wound. You should not take a bath, swim or use the jacuzzi for 5 days.

Appearance of the Wound

It is normal to experience some redness, swelling and bruising to the surgical area. This usually will last only for a few days. There may be a small amount of drainage around the wound edges which may stain your clothing until a scab is formed. You may place a gauze pad over the wounds to protect your clothing. This can be purchased from a pharmacy. If the gauze pad "sticks" to the wound, you may soak it off in the tub or shower.

Post-Operative Discomfort

It is common to have some discomfort to the surgical areas for a few days after the surgery. Placing an ice pack on and off the surgical area for the first 48 hours or wearing a scrotal supporter (jock strap, briefs, or boxer briefs) may be attempted.

You will be given a prescription for pain medication after your surgery. If your discomfort is mild, using an over-the-counter pain medication such as Tylenol, Advil or Ibuprofen is acceptable, following the package information.



Post-Operative Activity

It is recommended to avoid strenuous activity for 48 hours after the procedure. After 48 hours, you may begin to increase your activity with adjustment to your activity if discomfort increases.



Sexual Activity

You may resume sexual activity after 48 hours when you are comfortable. You need to maintain contraceptive precautions until your semen samples have been checked and are free of sperm. It usually takes 15-20 ejaculations - or 2 months - for this to occur, but it may be longer. You must have two consecutively negative semen analysis before you can discontinue using any devices or contraceptives.

When to Call Your Doctor

Contact your doctor if you are experiencing:

- Fever
- Persistent Pain
- Marked Swelling of Scrotum
- Continuous Bleeding/Drainage from Wound

Semen Analysis

Patients have two options for semen analysis:

- Laboratory Semen Analysis
- SpermCheck® Vasectomy Home Monitoring Program

Laboratory Reference for Semen Analysis

Enclosed is a listing of local laboratories for post-vasectomy semen analysis testing. Prior to submitting the specimen for testing and therefore billing, you should consult your insurance company to determine if your health-care plan is contracted with any specific laboratories for services.

Laboratory Requirements

Each lab has its own requirements for semen analysis testing. It is important to follow these requirements for each lab to ensure proper test results.





Presence Saint Joseph Medical Center

Specimen must be within one hour of ejaculation.

Registration (walk-in) is required prior to specimen receipt at the facility - inform registration of time sensitive specimen.

Container must be labeled with patient name/date/time of ejaculation.

Physician order must be with the specimen at the time of specimen drop-off.

333 N. Madison St.
Joliet, IL 60435

ph: 815.725.7133

Hours: M-TH 12:30PM - 8:00PM

[Appointment Required](#)



Silver Cross Hospital

Contact central scheduling at 815.740.1100 ext. 7076 to set appointment for specimen drop-off.

Specimen must be within one hour of ejaculation.

Container must be labeled with patient name/date/time of ejaculation.

1900 Silver Cross Blvd
New Lenox, IL 60451

ph: 815.300.1100

Hours: M-F

[Appointment Required](#)



Morris Hospital

Specimen must be brought in the same day of ejaculation in the container provided to you.

Container must be labeled with name/date.

Physician order must be with the specimen at the time of drop-off at the lab.

150 W. High Street
Morris, IL 60450

ph: 815.942.2932 ext. 4105

Semen Analysis

SpermCheck® Vasectomy Home Monitoring Program



SpermCheck® Vasectomy is the only test on the market cleared by the FDA for home use that provides evidence of a vasectomy's success or failure. It is accurate, fast, and easy to use. Detailed instructions are included with each test kit (click here for SpermCheck® Vasectomy instructions). To ensure accurate test results, please read the test instructions thoroughly before performing the test.

Results in Less than 10 Steps

- Collect semen sample.
- Allow sample to stand for 20 minutes.
- Using transfer device, collect enough sample to fill to line on device.
- Add sample from transfer device to solution bottle.
- Gently mix solution and sample.
- Wait 2 minutes.
- Add 5 drops from solution bottle to sample well on test cassette.
- Wait 7 minutes.
- Read results.

Patient Process

1. Fill out form to the right and fax completed form to **800-506-5461**.
2. Once this form is received, a representative from SpermCheck® will contact the patient to order the required tests as outlined in the protocol. The patient may also order online at **www.SpermCheck.com**.
3. The patient will perform test on dates corresponding to protocol. SpermCheck® will provide reminders to patients of test dates.
4. Patient will report results to SpermCheck® at **866.635.2309**.
5. SpermCheck® will send patient test result report to clinic.

Patient Referral Form



Date: _____

TO BE COMPLETED BY CLINIC

Clinic: _____ Phone: _____

Urologist: Dr. _____

PHYSICIAN TESTING PROTOCOL - TO BE COMPLETED BY CLINIC (Please check box)

Validation #1: 45 Days (6 weeks) 60 Days (8 weeks) 90 Days (12 weeks) _____

Validation #2: 90 Days (12 weeks) 120 Days (16 weeks) _____

Special Instructions:

PATIENT INFORMATION - TO BE COMPLETED BY PATIENT

First Name: _____ Last Name: _____

Date of Birth: _____ Vasectomy Date: _____

Patient Phone: _____ Alt. Phone: _____

Patient Email: _____ Patient City: _____

Patient Zip Code: _____ Spanish Only

Other: _____

PLEASE REPORT YOUR TEST RESULTS Patient Authorization - To be completed by the patient

By signing, you give your physician permission to release your information to SpermCheck so a program consultant may contact you about ordering your SpermCheck Vasectomy tests as well as reporting your results. I agree to report my test results according to the protocol indicated below and understand that SpermCheck will provide me with reminders prior to the scheduled test date.

Patient Signature: _____ Date: _____



Morris Location

Tel: 815.941.2990

Fax: 815.941.2961

1401 Lakewood Dr. Unit 3
Morris, IL 60450

Silver Cross Location

Tel: 815.726.3110

Fax: 815.726.7502

1890 Silver Cross Blvd.
Pavilion A, Ste. 430
New Lenox, IL 60451

Joliet Location

Tel: 815.409.4930

Fax: 815.741.3263

1541 Riverboat Center Drive
Joliet, IL 60431

www.AdvUro.com