



INSTRUCTIONS FOLLOWING VASECTOMY

1. Spend a quiet evening at home, reclining in bed or on the sofa. Minimize activity. You may sleep on your back, side, or front side.
2. Avoid aspirin for 2 days after the vasectomy. You may take acetaminophen (Tylenol or generic) if you have any discomfort. Ibuprofen (Motrin, Nuprin, Advil or generic) and naproxen (Aleve or generic) are both pain medications and anti-inflammatory drugs. For the first few days after a procedure, inflammation may be a normal component of the healing process, and we prefer not to stifle it, so Tylenol is preferred. If you feel no discomfort for 2 days, then have some pain on days 3-5, don't worry. Your body goes through a series of steps in adjusting to the new arrangement, and sometimes the later steps are more noticeable than the earlier steps. See #10 below.
3. No need for ice packs, but you may try one if you have discomfort that responds only partially to acetaminophen.
4. You may remove the scrotal support and take a daily shower starting the morning after the procedure. Wear the scrotal support or at least a tight pair of undershorts whenever you are up and around for the next 2 days, during sports for the next 7 days.
5. On the day after the procedure, you may walk and drive as much as you like, but no sports, yard work, swimming, or heavy lifting. If your job is sedentary (office work or supervisor), you may return to work.
6. Two days after the procedure, you may return to more strenuous work and regular activities, including swimming, wearing your scrotal support. When pain is gone and tenderness is minimal, you may return to the gym or to running or to cycling, but on the first day back, do 1/2 of your usual workout: half the weight, half the reps, half the speed, half the distance, etc. If pain does not return, you may do your regular workout the next day. While we have no data, it makes sense intuitively not to engage in activities that involve direct pressure to the testicles for about a week: riding a horse or rodeo bull, riding a sport bike (crotch rocket), or racing motocross.
7. When you no longer have any pain and only minimal tenderness, you may ejaculate. I recommend waiting at least 2 days, but the American Urological Association Vasectomy Guidelines recommend that men wait a week. Blood in the semen for the first few ejaculations, or even a month after vasectomy, is not common, but is also no reason for concern. Use other forms of contraception until you are told by my staff that your semen is sperm-free.
8. Since no sutures are used to close the small skin opening, a follow-up visit is not required. But if you have undue discomfort or any concerns, please call us. About 10% of men will still have some discomfort at 1 week, 3% at one month, and fewer than 1% at 6 months.
9. It is normal to have some discoloration of the skin around the puncture site. Some men will develop considerable discoloration of the scrotum about 4 days after the vasectomy. Blood from the deep vasectomy site comes to the surface as a purplish-blue mark, gets darker and spreads out like an oil slick, then gradually dissipates.
10. Some men (about 1 in 20) will develop swelling and discomfort on one or both sides, starting 3 days to 3 months following vasectomy. This usually represents an exaggerated form of the normal inflammatory response necessary for sperm absorption and recycling. It is best managed with a 5-7-day course of ibuprofen 600 mg 3 times per day.
11. At least 12 weeks AND 20 ejaculations after your vasectomy, collect a semen sample for post-vasectomy semen analysis (PVSA) in the sample pot with the requisition provided and drop it off to a lab. Please do not bring the sample in a condom or baggie as it will be inadequate for analysis and you will be asked to return with another sample in a container with a lid. The sample should be produced on the day of the examination but can be 3-4 hours old. If sperm are seen you will be asked to continue other means of birth control and return with a second specimen in 2-3 weeks.