## WHAT CAN I EXPECT IN TERMS OF PLANNING AND RECOVERY FROM A VASECTOMY REVERSAL PROCEDURE?

Dr. Turek likes to meet and examine every patient who is considering a vasectomy reversal with him. This visit can be the day before the procedure if need be, but is important to learn as much as possible about the current fertility potential of the man planning a vasectomy reversal. The following is an outline of the what to expect and do before and after the procedure:

#### The Consultation Visit

This visit is important for you to mee and feel comfortable with Dr. Turek, to figure out whether you are a good candidate for a vasectomy reversal, and to assess if the procedure is right for you. At this visit:

- Dr. Turek will ask you questions about past pregnancies that you have been associated with, your medical and surgical history, and your sense of how well your vasectomy went—including any symptoms of pain or swelling since it was done.
- Dr. Turek will also ask questions about the female partner and is particularly interested in her age, her past pregnancy history, her medical health and her menstrual cycle history. If she is over 35 years old, he might also recommend that she have a blood test on day 3 of her cycle (day1 is the first day of her period) for FSH and estradiol levels, and will inquire whether she has ever had a dye study of her uterus called a hysterosalpingogram (HSG) to look for blockage, fibroids and other anatomical issues. This information may ultimately be helpful for the couple as they consider their family building options.
- Dr. Turek will perform a limited and brief physical examination on you to ensure that you are a good candidate for the procedure.
- Dr. Turek will then discuss the vasectomy reversal procedure, its benefits and

risks, so that you have a good idea of what it involves, the recovery afterward, when you can resume your normal activities, and the published success rates that he has achieved.

- At the end of the visit, Dr. Turek will provide you with an information packet that provides additional detailed information, including his publications (if you like) and consents for you to review. If, after the visit with Dr Turek, more questions arise about the procedure, alternatives, or any other issues, he will handle them with you over the phone.
- If you desire to freeze sperm at the time of vasectomy reversal, please notify us on the day of the consultation visit or at another time before the procedure. We will ask you to sign a sperm banking consent form, and you will need to have blood tests for 5 communicable diseases (by State Law: HIV, HTLV I, II, RPR, Hepatitis B surface antigen, & Hepatitis C antibody) and make a payment to make this happen.
- We would like you to ask questions at this visit or afterwards to ensure that you are completely comfortable with the vasectomy reversal procedure.

#### Pre-Procedure Checklist

- 1. Eat normally the night before surgery, but follow the directions that anesthesia recommends for the morning of surgery. If no specific directions are given, withhold all food and drink after midnight and on the morning of surgery.
- 2. Do not take any aspirin, or any medications containing ibuprofen (Advil, Motrin, Aleve) at least 10 days prior to the procedure, as these medications have a side effect that can reducing platelet function and therefore lower blood clotting ability.
- 3. Someone will need to drive you home or to your hotel after the procedure, following your recovery from sedation. Buy some frozen peas or mixed vegetable bags from the grocery to use as a cold "sandbag" to the area after the procedure,

#### Post-Procedure Checklist

- 1. Remove all dressings from inside the athletic supporter in 48 hours; continue with the scrotal support for 1 week. You can shower once the dressings are removed. You can take a bath in 1 week. Remember, however, that hot baths are not good for fertility!
- 2. Apply frequent ice packs (or frozen peas, any brand) to the scrotum the evening after the surgery and the day after that. After 24 hours, discontinue the ice.
- 3. Prescribed pain medication can be taken as directed. Two to three days after surgery, Extra-Strength Tylenol or Ibuprofen (Advil, Motrin) may be sufficient for pain relief. These are over-the-counter medications. Do not drive a vehicle while taking the prescribed pain medication as the medication may cloud your judgment.
- 4. The wounds are closed with absorbable sutures. They do not need to be removed. It may take up to 3-4 weeks for the sutures to dissolve completely. In the meantime, the skin in the area will feel swollen.
- 5. Resume a normal, well-balanced det when you return home or to the notel. Be sure to drinks lots of fluids.
- 6. Normal, **non-vigorous** activity can be restarted after 48 hours or when you feel better. Activities that cause discomfort should be stopped for the time being. Heavy activities such as jogging and weight lifting can be resumed in 2 or 3 weeks depending on your particular procedure. Dr. Turek will inform you exactly what your limitations are after the procedure. You may return to work in 3 to 4 days, if your work does not involve heavy physical activity (quarterbacks!)
- 7. Refrain from sexual intercourse for 2 weeks or 3 weeks depending on your procedure. Dr. Turek will let you know the exact limitations after the procedure.
- 8. If you are in San Francisco, please return to the office in 7-10 days for a wound check. Please call **415-392-3200**. for an appointment time. Dr. Turek would like to check the semen for sperm at 6 weeks, and this can be scheduled at the first visit or over the phone. In general, monthly semen analyses are then obtained for about 4-6 months or until the semen analysis stabilizes. Remember, it is important to abstain from intercourse for 2-3 days prior to providing a semen sample.

- 9. You may experience discomfort after the procedure. Common symptoms include the following and do not require a doctor's attention:
  - A) Bruising and discoloration of the scrotal skin and base of penis. It might become black and blue and this is normal after surgery. This will take one week to go away.
  - B) Some scrotal swelling. A grapefruit is too large.
  - C) A small amount of thin, clear, pinkish fluid may drain from the incision for a few days after surgery. Keep the area clean and dry and it will stop.
  - D) If you received general anesthesia, a sore throat, nausea, constipation, and general "body ache" may occur. These problems should resolve within 48 hours.
- 10. Postoperative complications are rare. If either of the following occurs, you should seek prompt medical attention by calling Dr. Turek at **415-392-3200.** 
  - A) **Wound Infection.** This usually means a fever, a warm swollen red and painful incision area, with pus draining from the site Antibiotics are necessary to treat this.
  - B) **Scrotal Hematoma.** Extreme discoration (black and blue) of the skin and continuing scrotal enlargement occurs from bleeding underneath and can cause throbbing pain and a bulging of the wound. If the scrotum hurts more and continues to enlarge after 72 hours, then it may need to be drained.

Other Instructions:							

PATIENT SIGNATURE	PROVIDER SIGNATURE
FULL NAME (PLEASE PRINT)	PROVIDER NAME
DATE	DATE

# TUREK

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