

U.S. Department of Health and Human Services
Public Health Service

INFORMATION FOR MEN

Your Sterilization Operation

NOTICE:

Your decision at any time not to be sterilized will not result in the withdrawal or withholding of any benefits provided by programs or projects receiving federal funds.

You will find a consent form at the back of this pamphlet.

This information is available in other forms to people with disabilities by contacting us at (651) 296-8517 (voice) or toll free at (800) 657-3659. TTY/TDD users can call the Minnesota Relay at 711 or (800) 627-3529. For the Speech-to-Speech Relay, call (877) 627-3848.

Why This Pamphlet Is Important to You

Sterilization is an operation that is intended to be permanent. This pamphlet describes the sterilization operation for men-vasectomy-its benefits, discomforts, and risks. Other family planning methods that are not permanent are also described. You should feel free to ask your doctor any questions after you have read the pamphlet completely.

Both men and women can be sterilized. (Ask your doctor or clinic for the pamphlet on sterilization for women.) The man's operation is easier, safer, and

less expensive than the woman's operation.

If the Federal government is to pay for your sterilization, certain conditions must be met. They are listed on page 6. The purpose of these conditions is to ensure that you understand sterilization and that you choose freely to have this operation.

Making Up Your Mind

Sterilization must be considered permanent. Some doctors try to undo a vasectomy with surgery. This is a difficult and expensive operation which

frequently does not work. So it's not a good idea to think your vasectomy can be undone.

Some men have heard about storing their sperm in banks to use later to father children. Men should not count on stored sperm because it rarely achieves pregnancy.

Make sure you do not want to father children under any circumstances before you decide to be sterilized. Are you sure you would not want to father children even if one of your present children died? Or your wife died? Or you got divorced and remarried? Be sure of your decision before you decide to be sterilized. Talk it over with your family or others you trust.

No one can force you to be sterilized! Don't let anyone push you into it. If you do not want to be sterilized, no one can take away any of your Federal

benefits such as welfare, Social Security, or health care-including sterilization at a later date.

To have this operation paid for with Federal funds, you must be at least 21 years old. If you are married, discuss the operation with your wife. However, her consent is not required if Medicaid or any other Federal government program is going to pay for your operation. Your consent to sterilization cannot be obtained if you are under the influence of alcohol or other substances that affect your state of awareness.

You must sign the consent form at least 30 days before you plan to have the operation. This is so you will have at least 30 days to think it over and discuss it with your family and others. You may change your mind any time before the operation and cancel your appointment.

Other Methods of Family Planning

There are many other ways to avoid fathering children. Before you decide to be sterilized, think about other methods of family planning.

Temporary Methods of Family Planning

The following methods of family planning are temporary. This means that when you or your partner do not use them you can father children. Temporary methods of family planning are effective only if you use them correctly. If you think you might want to father children later, you should use a temporary method of family planning instead of sterilization. Ask your doctor or clinic for pamphlets and counseling on any of these temporary methods of family planning.

Condom, Rubber, Prophylactic — A thin sheath of rubber the man places over his penis each time before intercourse. In general use, it is 88 percent effective in preventing pregnancy. There

are no serious side effects. A condom can be used with contraceptive foam, cream or gel, or with a diaphragm for extra protection. Condoms give protection against sexually transmitted diseases including HIV /AIDS.

Birth Control Pill — A pill a woman takes regularly which is 97 percent effective in preventing pregnancy. It is usually safe. In some women the pill causes minor side effects such as darkening of the skin of the face, nausea, spotting, missed periods or tender breasts. More serious complications which occur infrequently include depression, increased tendency for abnormal blood clotting, increased risk of heart attack and stroke (especially in women over age 35 who smoke), and a small increased risk of liver or gall bladder disease.

Intrauterine Device (IUD) — A small piece of plastic is inserted into a woman's uterus (womb) by a doctor or family planning clinician. It is 94

percent effective in preventing pregnancy. IUD use can cause heavier periods and cramps. A serious complication in couples who are not mutually faithful is increased risk of sexually transmitted infection which can cause infertility.

Diaphragm, Cervical Cap, or Contraceptive

Sponge — A rubber cup or sponge a woman places in her vagina over her cervix before intercourse. The diaphragm or cap must be used with contraceptive gel or cream for it to be effective. The diaphragm or cap is 82 percent effective in preventing pregnancy. The sponge contains a contraceptive already. The effectiveness rate of the sponge is 82 percent for women who have not had children and 72 percent for women who have had children. There is little risk of serious complications, but minor side effects such as vaginal and urinary tract infections may occur. Benefits include some protection against sexually transmitted diseases.

Contraceptive Foam, Cream, Gel, Tablet or Film (Spermicide) — Spermicidal preparations a woman places in her vagina each time before intercourse. They are 79 percent effective in preventing pregnancy. They occasionally cause minor side effects such as allergic reactions. Benefits include some protection against sexually transmitted diseases.

Natural Family Planning — A type of family planning in which intercourse is avoided on the days each month when a woman is likely to get pregnant. In general use, it is 80 percent effective in preventing pregnancy. Natural family planning consists of several methods, all of which require instruction. Different methods involve some combination of:

- Charting the menstrual periods
- Charting the woman's body temperature
- Checking the cervical mucus
- Checking the position and texture of the cervix.

Effectiveness requires cooperation between partners. There is no risk of complications. No drugs or devices are necessary. Natural family planning teaches a woman about her own fertility patterns.

Norplant — A set of 6 hormone-containing capsules which are inserted beneath the skin of the inner upper arm and can remain effective for 5 years. It is over 99 percent effective in preventing pregnancy. Its effectiveness is decreased in women who weigh over 150 pounds. Most women using Norplant will have an abnormal bleeding pattern. Other minor side effects may occur, such as headache, nervousness, nausea, dizziness. A health care provider must insert or remove Norplant in a procedure which lasts 15-20 minutes. Norplant does not protect against sexually transmitted diseases including HIV/AIDS.

Sterilization for a Woman

A woman can be sterilized by an operation called a tubal sterilization. This operation is intended to prevent her from bearing children. Tubal sterilization is more complex and more expensive than the sterilization operation for a man. The risks of serious short-term and long-term complications are also much greater. Sterilization does not offer protection against sexually transmitted diseases, including HIV/AIDS. (Ask your doctor or clinic for the pamphlet on sterilization for a woman.)

What About Abortion?

Abortion does not prevent pregnancy. It is an operation to terminate a pregnancy which has already started.

This pamphlet does not address abortion; it only addresses ways to avoid pregnancy.

When Can a Man Have a Sterilization Operation?

A man may choose to have a sterilization operation at any time in his life. It doesn't matter if he is not married or doesn't have children. It is up to him. Sterilizations done at too young an age or before a

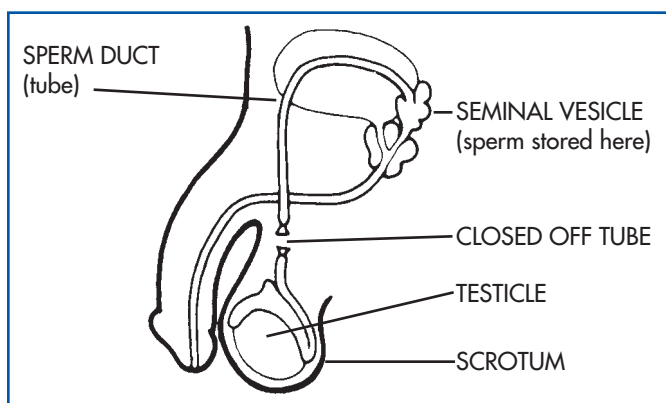
man has any children may result in regret later. Circumstances also can change in your life which might cause you to regret your decision to be sterilized.

Facts About the Operation

The surgical method of family planning for men is called a vasectomy. It is done in the doctor's office or clinic. Under local anesthesia, the doctor closes off the sperm ducts so that sperm cannot get through these ducts into the semen (the fluid ejected at orgasm). (See diagram on next page.) When there are no sperm in the semen, you cannot cause a pregnancy. Only the sperm are blocked, not the liquid part of the semen. You will still ejaculate (eject fluid) as before. Vasectomy will not change your hormones. (NOTE: Vasectomy is not castration. The testicles are not removed.) Sterilization does not offer protection against sexually transmitted diseases, including HIV/AIDS.

How a Vasectomy is Done

First a local anesthetic is injected into your skin on each side of the scrotum to make it



temporarily numb. You will feel mild pain, like a pin prick, for a few seconds.

Once the area is numb, the doctor makes one or two very small (one-half inch) incisions (cuts). Through these, the doctor reaches the sperm ducts, cuts them, and closes them off. The incisions in the skin are then closed with stitches. The scars can hardly be seen after a couple of weeks.

The operation, including anesthesia, usually takes about 15-20 minutes. You can usually go home shortly after the operation.

Is the Operation Guaranteed to Work?

Vasectomy works almost all the time. This means that fewer than 1 out of 100 men who have the operation will still be able to get a woman pregnant. This is usually because the two ends of the ducts have grown back together. Vasectomy is more than 99 percent effective - higher than all other methods of family planning for men.

You are not immediately sterile after your vasectomy. There will still be some sperm in your ducts until you have ejaculated at least 15 times or at least 6 weeks have elapsed since your operation. During this time, you can still cause a pregnancy. So it is important that you and your partner use another method of family planning. The only

certain way of knowing that you are sterile is to have your doctor do a simple test of your semen under a microscope at your follow-up appointment.

Benefits of Vasectomy

The benefits of vasectomy are:

- You don't have to worry about making a woman pregnant.
- You don't have to use a temporary method of family planning again.

Discomforts and Risks

Vasectomy is considered a safe and simple operation, but there is a small chance you will have some medical problems afterwards. You can expect some soreness after the operation. This is not serious and usually goes away after a few days.

Serious medical problems happen rarely. Most of the time they can be treated and cured by the doctor without further surgery; however, an operation may be necessary to correct some of them. Some of the medical problems you could have after a sterilization operation include:

1. You may have swelling around the incision on your skin. This happens right after the operation and is only temporary.
2. You may have bleeding under the skin which causes a bruise. This usually clears up by itself. Ice bags are often recommended to reduce the chance of this bleeding.
3. You may get an infection either on the skin or inside the scrotum. It is important to follow the doctor's recommendation about the care and cleansing of the incision while it is healing.
4. The operation may not make you sterile. The operation cannot be guaranteed 100 percent to make you sterile. Less than 1 out of 100 men who have the operation will still be able to get a woman pregnant.

Go back to your doctor at once if swelling lasts for more than a few days, if you have a fever, or if you have severe pain.

Vasectomy will not alter your sexual drive; your erections and orgasms will be the same. A very few men who have had a vasectomy say they have sexual problems after the operation. There is no medical explanation for these rare symptoms, and they are believed to result from an emotional reaction to the operation. If you are concerned about how a vasectomy would affect you sexually, discuss your questions with the doctor.

Many studies have shown that men who have had vasectomies are just as healthy as other men. The long-term effects of vasectomy have been widely studied; there are no proven long-term health problems which result from having the procedure.

Summary

If you are sure you do not want to father children and you want to become permanently sterile, then vasectomy is a safe, effective option. The operation is done in a doctor's office or clinic, and problems are rare.

If You Have Questions

If there is anything that is not clear to you, or anything you are worried about, it is important that you ask these questions. All of your questions should be answered to your satisfaction before the operation.

REMEMBER

You may change your mind at any time before the operation. Make sure you do not wish to father children under any circumstances before you decide to be sterilized.

RULES FOR STERILIZATION OPERATIONS FUNDED BY THE FEDERAL GOVERNMENT

- You must be at least 21 years old.
- You must wait at least 30 days to have the operation after you sign the consent form.
- You may, if you choose, bring someone with you when you sign the consent form.
- Your consent is effective for 180 days from the date you sign the consent form.
- Your consent to sterilization cannot be obtained while you are under the influence of alcohol or other substances that affect your state of awareness.

Your consent to sterilization must be documented by signing a consent form identical or similar to the sample attached to this pamphlet.

This pamphlet has been prepared by the U.S. Department of Health and Human Services. It describes the sterilization procedures used in current medical practice. The pamphlet contains a sample of the consent form which, unless another form is approved by DHHS, must be used for sterilizations paid for with Federal funds. Both the pamphlet and consent form comply with regulations: 42 CFR 50.201 et seq. and 42 CFR Part 441, Subpart F.
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CONSENT FORM

NOTICE: Your decision at any time not to be sterilized will not result in the withdrawal or withholding of any benefits provided by programs or projects receiving federal funds.

■ Consent to Sterilization ■

I have asked for and received information about sterilization from _____. When I first asked for the information, I was told that the decision to be sterilized is completely up to me. I was told that I could decide not to be sterilized. If I decide not to be sterilized, my decision will not affect my right to future care or treatment. I will not lose any help or benefits from programs receiving Federal funds, such as A.F.D.C. or Medicaid that I am now getting or for which I may become eligible.

I understand that the sterilization must be considered permanent and not reversible. I have decided that I do not want to become pregnant, bear children or father children.

I was told about those temporary methods of birth control that are available and could be provided to me which will allow me to bear or father a child in the future. I have rejected these alternatives and chosen to be sterilized.

I understand that I will be sterilized by an operation known as a _____. The discomforts, risks and benefits associated with the operation have been explained to me. All my questions have been answered to my satisfaction.

I understand that the operation will not be done until at least thirty days after I sign this form. I understand that I can change my mind at any time and that my decision at any time not to be sterilized will not result in the withholding of any benefits or medical services provided by federally funded programs.

I am at least 21 years of age and was born on _____.

I, _____, hereby consent of my own free will to be sterilized by _____ by a method called _____.

My consent expires 180 days from the date of my signature below.

I also consent to the release of this form and other medical records about the operation to:

- Representatives of the Department of Health, Education, and Welfare or
- Employees of programs or projects funded by that Department but only for determining if Federal laws were observed.

I have received a copy of this form.

Signature Date: _____
Month/Day/Year

You are requested to supply the following information, but it is not required:

Race and ethnicity designation (please check)

- American Indian or Alaska Native Black (not of Hispanic origin)
 Asian or Pacific Islander Hispanic
 White (not of Hispanic origin)

■ Interpreter's Statement ■

If an interpreter is provided to assist the individual to be sterilized:

I have translated the information and advice presented orally to the individual to be sterilized by the person obtaining this consent. I have also read him/her the consent form in _____ language and explained its contents to him/her. To the best of my knowledge and belief he/she understood this explanation.

Interpreter Date

■ Statement of Person Obtaining Consent ■

Before _____ signed

the consent form, I explained to him/her the nature of the sterilization operation _____, the fact that it is intended to be a final and irreversible procedure and the discomforts, risks and benefits associated with it.

I counseled the individual to be sterilized that alternative methods of birth control are available which are temporary. I explained that sterilization is different because it is permanent.

I informed the individual to be sterilized that his/her consent can be withdrawn at any time and that he/she will not lose any health services or any benefits provided by Federal funds.

To the best of my knowledge and belief the individual to be sterilized is at least 21 years old and appears mentally competent. He/She knowingly and voluntarily requested to be sterilized and appears to understand the nature and consequence of the procedure.

Signature of person obtaining consent Date

Facility

Address

■ Physician's Statement ■

Shortly before I performed a sterilization operation upon

_____ on _____,

Name of individual to be sterilized Date of sterilization operation

I explained to him/her the nature of the sterilization operation _____, the fact that it is intended

to be a final and irreversible procedure and the discomforts, risks and benefits associated with it.

I counseled the individual to be sterilized that alternative methods of birth control are available which are temporary. I explained that sterilization is different because it is permanent.

I informed the individual to be sterilized that his/her consent can be withdrawn at any time and that he/she will not lose any health services or benefits provided by Federal funds.

To the best of my knowledge and belief the individual to be sterilized is at least 21 years old and appears mentally competent. He/She knowingly and voluntarily requested to be sterilized and appeared to understand the nature and consequences of the procedure.

Instructions for use of alternative final paragraphs: use the first paragraph below except in the case of premature delivery or emergency abdominal surgery where the sterilization is performed less than 30 days after the date of the individual's signature on the consent form. In those cases, the second paragraph below must be used. Cross out the paragraph which is not used.

(1) At least thirty days have passed between the date of the individual's signature on this consent form and the date the sterilization was performed.

(2) This sterilization was performed less than 30 days but more than 72 hours after the date of the individual's signature on this consent form because of the following circumstances (check applicable box and fill in information requested):

Premature delivery
Individual's expected date of delivery: _____

Emergency abdominal surgery
(Describe): _____

Physician Date

1. Patient

2. Physician

3. State Agency, Program or Project