

**Patient Information Post-Vasectomy (3 months after surgery)**

Welcome to **Mottagning ANOVA** at Norra Stationsgatan 69, 4tr, in Stockholm (se map next page). You have been referred for follow-up of your vasectomy. You must **make your own appointment** in either of two ways:

- Book on the **web**: 1177.se (in Swedish), Click "Hitta Vård", write ANOVA for "VILKEN MOTTAGNING DU SÖKER" and chose "**Mottagning ANOVA, Karolinska Universitetssjukhuset**" and log in with e.g. Mobile BankID (more information in Swedish at [www.anova.se](http://www.anova.se), click on "Laboratorium" in the upper menu). In 1177.se chose "**Spermprov utan läkarbesök**" to book an appointment.
- You can also call our answering machine ☎ **08-5177 3200** and chose alternative 2 and we will call back as soon as possible.

**Before you visit:** You must wait until 3 months after your surgery. For an adequate assessment of the semen sample you should abstain from ejaculation for 2–4 days (at least 2 days and at most 4 days of abstention). Best results are obtained if the sample (ejaculate) is collected by masturbation in a room at the laboratory. Any use of lubricants should be avoided since that could give erroneous results.

**Fee:** 100 kr. Högkostnadsskydd is valid – bring your Frikort. Only payment by card or invoice is possible. Bring your ID and the referral from your doctor if you have it. If you fail to appear at an appointment or cancel less than 24 hours in advance the fee is 400 kr according to present patient fees by Region Stockholm. Högkostnadsskydd is not applicable for failure to appear or late cancelling.

**Please, prepare so that the questionnaire below can be handed in together with the sample**

Normally parts of the ejaculate are saved with information of patient care data, for you care, laboratory method development, training of staff, and quality, development and research purposes. No part of the sample will be used for infertility treatment of other couples. *According to the Swedish Law on Biobanks we ask you to certify that you have been given this information:*

I have been informed that parts of the sample can be saved  (signature)

**Information about sample collection:**

Personald ID number

First name  Last name

Height (cm)  Date for most recent ejaculation before today  202 - -

Weight (kg)  Today's sample collected at  :

Collection by: Masturbation  Other:

Complete collection? Yes  No: missed in beginning:   
 missed in middle   
 missed at the end

Infections, dental problems, high fever, vaccinations, surgery, pharmaceutical or naturopathic preparations the last 6 months.

ID checked:  (Signed by laboratory staff member)

## Patient Information Post-Vasectomy

Up to 100 million sperm is formed in the testicles every day. Spermatozoa are stored in the epididymides until ejaculated. Then spermatozoa are transported through the vasa deferentia to the urethra where they are mixed with prostatic secretion and expelled in the first parts of the ejaculate. After that the secretion from the seminal vesicles is emptied.

Seminal fluid is dominated by seminal vesicular fluid (2/3) and prostatic fluid (1/3). Spermatozoa makes less than 1% of the total volume. When the vasa deferentia are cut, the passage from the epididymides and the urethra is blocked. A successful vasectomy therefore means that there are no spermatozoa and only low values for the compound that mainly comes from the epididymides (). The laboratory checks that the semen sample is representative by examining the content of prostatic fluid and  $\alpha$ -Glucosidase.

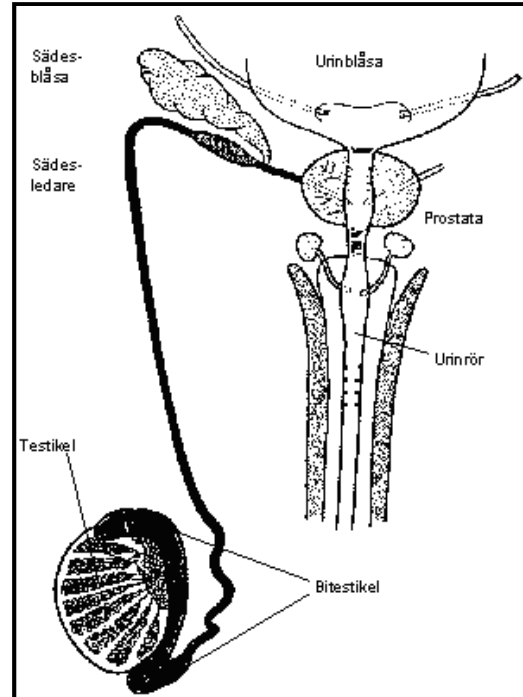
### Final result means 99.9 certainty

Lack of motile spermatozoa and low values for  $\alpha$ -Glucosidase speaks in favour that the vasectomy has been successful. It is common that an ejaculate can contain a few immotile spermatozoa. Nature sometimes reveals a high degree of "healing" capacity. It can then happen that a man can contribute to a pregnancy in spite of that no spermatozoa were detected in

the laboratory. The risk for a pregnancy when the laboratory has found not sperm is less than 1/1000.

### Motile spermatozoa

If motile spermatozoa are detected fertilizing capacity may still exist. You will be informed in a letter



### ANOVA at Norra Stationsgatan 69

You will reach us by:

#### Pendeltåg

- Station *Stockholm Odenplan* – exit Vanadisvägen / Dalagatan

#### Bus 3, 6, 77, 507

- Stop *Torsplan*

#### Tunnelbana

- *St:Eriksplan* or *Odenplan*

#### Parking

- Karolinska University Hospital in Solna (fee) – ca 15 minutes walk from ANOVA
- General, subject to fee, parking garage under Torsplan, entrance from Norra Stationsgatan

