

Patient Information Post-Vasectomy (3 months after surgery)

Welcome to **Mottagning ANOVA** at Norra Stationsgatan 69, 4tr, in Stockholm. ANOVA is **NOT** at the Karolinska University Hospital area in Solna, but within walking distance from there (see map below).

You have been referred for follow-up your vasectomy. **You must make your own appointment** in one of two ways:

- Follow instructions in the application ("app") **Alltid Öppet** (in Swedish) and choose an appointment that suits you. If there is no available time in Alltid Öppet, try searching ANOVA in **1177.se**. See also <http://www.anova.se>
- You can also call our answering machine ☎ **08-1237 3200** and choose alternative 3 and we will call back as soon as possible.

Fee: 275 kr. Högkostnadsskydd is valid. 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.

Before your visit: For an adequate assessment of the semen sample, you should abstain from ejaculation for at least 2 days and at most 4 days. 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.

NOTE! Childcare is not available at the ANOVA. Individuals under the age of 18 years are not allowed in the room while collecting the sample.

Please, read the questions below. We need this information for best interpretation of results.

Normally parts of the ejaculate are saved with information of patient care data, for your own treatment, laboratory method and quality development, training of staff 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: Personal ID number

First name Last name

Date for most recent ejaculation before today 202 - - Today's sample collected at :

Collection by: Masturbation ☐ Other:

Complete collection?	Yes <input type="checkbox"/>	No:	missed in beginning <input type="checkbox"/>
			missed in middle <input type="checkbox"/>
			missed at the end <input type="checkbox"/>

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

ID checked: (Signed by laboratory staff member)

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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 (α -Glucosidase). The laboratory checks that the semen sample is representative by examining the content of prostatic fluid and α -Glucosidase.

Final result means 99.9% certainty

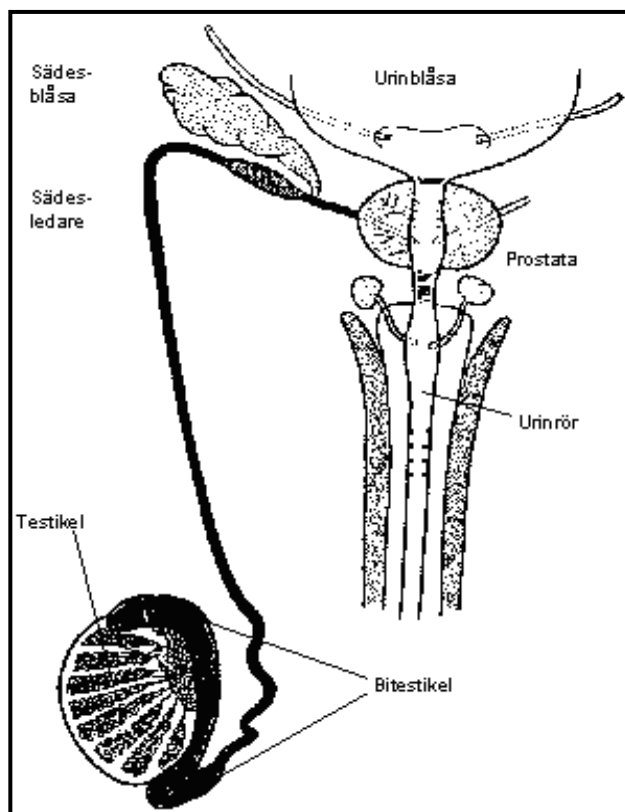
Lack of motile spermatozoa and low values for α -Glucosidase speaks in favour that the vasectomy has been successful. It is common that an ejaculate can contain a few immotile spermatozoa. Nature sometimes reveals a high degree of "healing" capacity. It can then happen that a man can contribute to a 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.

Result report: You will be informed in a message in Alltid Öppet within three weeks.

You will reach us with:

- **Pendeltåg.** Station **Stockholm Odenplan** – Exit: Vanadisvägen/Dalagatan
- **Tunnelbana:** Station **St Eriksplan / Odenplan**.
- **Buss:** **3, 6, 77, 507**. Stop: **Torsplan**
- **Parking:**
 - Karolinska University Hospital – visitor parking (30 SEK per hour) 10-15 minutes' walk to ANOVA
 - Subject to higher fee, parking garage under **Torsplan**, entrance from Norra Stationsgatan



Comments/complaints:

Comments/complaints are to be submitted to 1177 Vårdguiden's e-services or [Synpunkter och klagomål](#) and are handled according to our guidelines.

