

## **A newbie's first year of vasectomies** (a letter written by Devon Turner to the Vasectomy Network Google Group on April 26, 2024)

Hello Everyone,

I am writing to introduce myself, share a bit of my experience and thank you all for this excellent group and resource. This is a long message so read it only if you're curious and looking to relax :).

I am a family physician of 11 years in Barrie, Ontario, Canada. Last year I completed training with Michel and then with Doug and started doing vasectomies in my office alongside my family practice. I did my first vasectomy just over a year ago. This group and its repository of discussions helped me tremendously over the past year and continues to do so. If any of my experience is helpful to newbies or teachers, then I will have felt that I have somewhat repaid the favour.

I did training with Michel in January 2023, bought my supplies, and then did my training with Doug at the end of March 2023. I had the support of my local urologists, which was helpful too, who took me into the OR so I could see some of the surrounding anatomy in real life. I knew I had to get one under my belt real quick so I had mostly everything ready to go before my training with Doug, and in early April did my first solo. My first vasectomy was on a family practice patient of mine. If you can believe it, he knew I was doing the training and was waiting until I had finished and was ready to go. Brave fellow. I initially started using a MadaJet but because I was only booking one per day initially, it became onerous to set up the device for just one case. Eventually I moved to 30g needles and that has worked well (more on that below).

I have done just under 150 vasectomies over the past year but am on track to do about 250 this year based on the pace of referrals. Because I am doing these solo from start to finish with no nursing support, I am still booking an hour for them though I could get down to 45 minutes or so in the near future I think. I eventually hope to get to about 10 per week but have learned that will take time.

I have done about 225 consults to get those 150 vasectomies. Some guys are tire-kickers, some guys were reluctant to proceed with a newbie, and some are still thinking. But those consults provided a valuable opportunity to refine my examination skills and, in my jurisdiction, also provide an important part of the income as the procedure itself pays poorly. At this point I don't have plans to do the consult and procedure in one visit - separating them works best for me at the moment.

About 60% of the people who have done vasectomies more than three months ago have done their PVSA, and I have one confirmed failure that is booked for a re-do next week. His was real tough due to a very scarred vas from a previous injury, so I didn't achieve good end separation. I offered a referral to an expert for number 2 but he has booked back with me because I'm the only game in town so it will be a good experience doing the repeat. As for complications, so far, no infections or hematomas. One sperm granuloma that I know of, and a few people with some persistent aching for a few weeks that seemed outside the normal healing so I'm calling those mild PVPS, but they have resolved well with NSAIDs.

I think elsewhere Michel had mentioned that most vasectomists can handle about 80-90% of cases they see in their first 100, and I would say that my experience is consistent with this. I referred about 10 of the first 100 to other people after the consult and ended up abandoning the procedure in another 10 or so after their scrotum was too tight for me to work on when they came for the procedure. I have noticed that with the volume of consults I have done, my skills at securing the vas have improved considerably and the likelihood that I will assess a scrotum as a "Grade 3" (which for me is a no-go because I can't find one or both vas) is much less. I don't think I have labelled one as

such in the last 75 consults I have done. My other grades are Grade 1 (easy and loose) and Grade 2 (palpable vas but with some kind of challenge I have to think about, either tight scrotum, or maybe a varicocele, or retractile testes, or just something other than easy and loose, etc).

A great piece of advice I got from Doug was that I can have any tools I want on the tray. I have learned that having two ring forceps is really helpful for me. I now use a second ring forcep to scoop the vas out after opening the skin and dissecting the tissue rather than using the single blade of the sharp hemostat which I find to be a tenuous grasp. For me it means I never lose hold of the vas, but more importantly it gives me the confidence that comes along with knowing I will never lose hold of the vas, and I have learned that the confidence part is really important in making the first 150 procedures tolerable. The other customization I do for myself is that I have both a 1/2-inch 30g needle and a 1-inch 25g needle on my tray. For some guys with thick scrotal skin, the 25g needle is needed because the 30g 1-inch is too flimsy in my hand to make it through their skin. But the 30g needle is so tiny that guys barely notice it, so I use that for the skin and some of the vas and then do another poke with the bigger needle which they then don't feel. It's worked well but importantly for me gives me the confidence again that I will get them frozen. I do the left side freezing, left side vasectomy, right side freezing, right side vasectomy. I had to see a massage therapist to release my forearm muscles on my left hand because I have been gripping the vasa like there is no tomorrow!

On about five distinct occasions over the past year, I had doubts that I could make this a reality because things just felt like they were harder than they should be. I would say it took me until about 110 procedures before I felt like was really getting the hang of it and was enjoying it. It took a few procedures that presented unanticipated challenges for me to learn that I had the ability to navigate some uncertainty such that I became less afraid of these kinds of things happening. The resources in this network have been incredibly valuable and have gotten me through those hiccups.

I will echo the comments of others this week that it is nice to have some time to just chat with patients. Especially when I am in the room with them for about 45 minutes, I get into some great chats. It is definitely a skill though, being both the vasectomist and the entertainment! Everyone gets my phone number at the end of the procedure so they can message me if they have concerns, which has really helped me sleep better during the startup stage because I know that if they had concerns, they would reach out. I've only had a handful of people reach out to me directly. I call everyone the day after to see how they are feeling and that makes both of us feel better. Overall, one year in, this has been the most challenging thing I've done since residency but has been extremely rewarding.

Thanks again for everyone in this group and for the helpful discussions it has generated. Congrats to those recently retired or retiring soon.

I'll update again at 500!

Devon