

Counseling Your Clients About Sterilization

As a person's life changes, so do their birth control needs. At some point, your client may want to consider permanent contraception. It's important for you to provide full informed consent about their options. Informed consent will ensure that your client makes their decision based upon all necessary information. This can minimize any regret the client might have about choosing a sterilization procedure. Informed consent counseling is included as a Family PACT service to ensure that your client fully understands the permanent nature of sterilization.

Currently, three sterilization procedures are benefits of the Family PACT Program:

- Tubal ligation
- Hysteroscopic Sterilization (Essure®)
- Vasectomy

It is appropriate to explore permanent contraception when your client tells you that she or he is 21 years of age or older and:

- Does not want to have children (or more children) in the future.
- Is finished with childbearing and has decided that her or his family is complete.
- Uses a long-term birth control method but is thinking about something permanent.
- Is contraindicated for pregnancy.
- Wishes to avoid passing on hereditary conditions.

Let them know their options

There are three options available to clients who are seeking long-term or permanent contraception. You should discuss each of these options with your client.

- They might choose a highly effective temporary or reversible long acting contraceptive method (intrauterine contraception, contraceptive injection, contraceptive implant); or
- Their partner may be responsible for contraception, choosing either a temporary or permanent method; or
- They might choose a permanent method (tubal ligation, hysteroscopic sterilization or vasectomy).

As you discuss options with your client, let them know that the final decision is entirely up to them and that they can change their mind at any point before the procedure. Remember to point out that none of these methods will protect them from sexually transmitted infections (STIs) and that they should use condoms if they are at risk of getting an STI.

Explore the sterilization decision and the risk of regret

You can help your client make the best decision if you spend time exploring if sterilization is the right decision for them at this point in their life. During your counseling session, guide clients through a process that helps them consider the situations in which people tend to have the most regret post-sterilization. Ask them to consider if they might want children if:

- They are in a new relationship after a break-up, divorce, or death of a spouse;
- Their child(ren) were to die;
- Their financial circumstances changed for the better; or
- There is a chance they will want children later in life. This is especially important for young clients to consider.

These issues are not always easy to discuss. However, the role of a sterilization counselor is to explore the ‘what ifs’ with a client to help them identify how he/she feels in order to avoid future regret. Your client is less likely to regret their decision if they have considered these issues (or others) and are still clear that sterilization is their method of choice. Effective counseling can make the difference.

Describe the advantages, disadvantages, outcomes and complications of the sterilization procedures

Once your client has decided that they want to be sterilized and are sure they never want to have any children in the future, inform them about the sterilization procedure(s) available so they can choose the method most appealing to them. Women may choose between tubal ligation and hysteroscopic sterilization (Essure®). Vasectomy is the only sterilization procedure for men.

At this point in the informed consent process, advise them of the advantages, disadvantages, outcomes and complications of their chosen procedure. Make sure they understand how the procedure will be completed and what they can expect to feel. Family PACT has provided a chart comparing the sterilization procedures to assist you in your explanation.

Completing the informed consent process

Once you have discussed everything described above and your client is comfortable with their decision to obtain sterilization, have them sign the Sterilization Consent Form (PM 330). With their signature, they are indicating that you have told them:

- ✓ The decision to be sterilized is up to them alone and they can change their mind at any time before the procedure;
- ✓ Sterilization must be considered permanent and irreversible;
- ✓ There are other long-acting family planning methods that are reversible and highly effective; and
- ✓ The complications, risks, benefits and outcomes associated with the procedure.

Make sure to let your client know that there is a 30-day mandatory waiting period from the signing of the PM330 consent to the procedure. Let them know that this waiting period is to give them time to consider the full impact of their decision. Schedule their sterilization procedure at least 30 days from the date they sign the PM330 consent form.



OFFICE OF FAMILY PLANNING
CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

Sterilization Counseling Resources

Family PACT Website (www.familypact.org)

Clinical Practice Alert: Contraceptive Sterilization Nov 2009

http://familypact.org/Files/Provider/Clinical%20Practice%20Alerts/CPA_ContraceptiveSterilization_508_20091214.pdf

Family PACT Newsletter: Essure®: An Important Option for Family PACT Clients

http://familypact.org/Files/Provider/Newsletter/Essure_FamPACTNewsletter_Web20100216.pdf

On-line Educational Module: Sterilization Consent: Tutorial on Completing the PM 330

<http://familypact.org/en/Providers/provider-training/FamilyPACTOnlineModules2/SterilizationConsentPM330.aspx>

Sterilization Booklets for Women and Men

<http://www.dhcs.ca.gov/Pages/PermanentBirthControl.aspx>

Ordering the Sterilization Consent Form (PM330)

Copies of the sterilization Consent Form (PM 330) can be downloaded (in English and Spanish) from the *Forms* page of the Medi-Cal website at (<http://files.medi-cal.ca.gov/pubsdoco/forms.asp>) or can be ordered by calling the Telephone Service Center (TSC) at 1-800-541-5555.

**For more Family PACT program information,
please contact:**

Office of Family Planning

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Sterilization Counseling – Procedure Comparison

	Tubal Ligation	Hysteroscopic Sterilization Essure®	Vasectomy
Procedure description	A surgical procedure to cut or block the fallopian tubes stopping the sperm's access to the egg.	Micro-coils are inserted in the fallopian tubes through the uterus with an instrument called a hysteroscope. The body creates a barrier around the coils to block the tubes and prevent sperm from reaching the egg.	Surgical procedure to cut and tie off the vas deferens, preventing sperm from leaving the body.
Place of procedure	Outpatient or hospital surgery	Doctor's office or outpatient surgery	Doctor's office
Incisions	1-2	None	2 (1 on each side)
Anesthesia	General	Local	Local
Resumption of normal activities	1-3 days	1-2 days (or less)	1-2 days (or less)
Possible complications	<ul style="list-style-type: none"> ○ Internal bleeding ○ Injury to internal organs ○ Internal infection ○ Complications from anesthesia 	<ul style="list-style-type: none"> ○ Mild to moderate discomfort, cramping or pain ○ Bleeding or spotting after the procedure ○ Nausea or vomiting 	<ul style="list-style-type: none"> ○ Bruising or minor bleeding under skin ○ Swelling of scrotum ○ Testicular pain or discomfort
Effectiveness	99.45%	99.95%	99.26%
Immediately effective?	Yes	No. Confirmatory tests are done after 3 months	No. Confirmatory tests are done after 3 months
Advantages	<ul style="list-style-type: none"> ○ Safe and simple procedure ○ No repeated clinic visits necessary ○ No known long-term side effects ○ Helps protect against ovarian cancer 	<ul style="list-style-type: none"> ○ General anesthesia is unnecessary ○ No cutting, burning or scarring ○ Short procedure time (less than 10 minutes for the procedure itself) ○ Convenient, rapid recovery 	<ul style="list-style-type: none"> ○ Simple and safe procedure ○ Less expensive than other sterilization procedures ○ Lack of long-term side effects ○ Removal of contraceptive burden on partner
Disadvantages	Reversal is expensive	Not all women will achieve successful placement of both inserts	Reversal is expensive
Outcomes	Considered permanent	Permanent and irreversible after confirmatory test	Considered permanent after confirmatory test

Hatcher, R.A., Rinehart, W., Blackburn, R., Geller, J.S., and Shelton, J.D. *The Essentials of Contraceptive Technology*. Baltimore, John Hopkins Bloomberg School of Public Health, Population Information Program, 1997, Fourth Printing, 2003.

Family PACT Clinical Practice Alert: Contraceptive Sterilization Nov. 2009 at http://www.familypact.org/Files/Provider/Clinical%20Practice%20Alerts/CPA_ContraceptiveSterilization_508_20091214.pdf

Peterson HB. Sterilization. *Obstetrics & Gynecology*. Jan 2008;111(1):189-203