Mokena Urology Robert A. Bonzani, M.D. 19401 Wolf Road Mokena, Illinois 60448 708-995-1917

I, the undersigned, consent to the surgical procedure called <u>vasectomy</u>, which I understand to be a *sterilization* procedure. I acknowledge that this is a method of achieving <u>permanent</u> birth control, and that I will no longer be able to have any more children by natural means. While I understand that no method of birth control is 100% effective, I acknowledge that vasectomy affords the highest success rate of

achieving permanent birth control – approximately 99.5%.

I further affirm that I have made this decision to proceed with vasectomy at least 24 hours prior to my procedure.

Signed: _____

Dated: