

What to Expect after Penile Surgery

When should I call after surgery?

Call anytime if your child has:

- Severe pain lasting more than a few hours
- Temperature higher than 101.5 F (38.5 C) orally
- Bleeding that is more than a few spots in diaper/underwear
- No urine for more than 3-4 hours
- Any other questions or concerns

Call the Urology Call Center at 734-936-7030 during business hours (M-F between 8 am and 4:30 pm) to speak to one of our nurses.

For evenings and weekends, call 734-936-6267 and ask to speak with the pediatric urology doctor-on-call.

What should I expect after surgery?

It is not unusual for children to experience burning with urination after penile surgeries, especially hypospadias repair. If your child goes home after the hypospadias repair without a catheter, he may have burning pain with urination for up to 3-4 days. This is normal.

 If the child goes home with a catheter, they might have occasional bladder spasms, caused by the catheter irritation inside the bladder. Unlike the continuous pain from surgical incisions, bladder spasms occur only occasionally and last for a few minutes. Older children will describe bladder spasms as severe urgency to urinate and/or lower abdominal cramps. Children who go home with a catheter receive a prescription for an oral bladder spasm medication (Ditropan/oxybutynin).

- 2. Continuous pain from surgical incisions goes down gradually over the course of 3 days. Taking oral pain medications, especially during the first 24 to 72 hours, helps to minimize the pain. (See the section on **post-op medications.)**
- 3. A small smudge of blood in the diaper (not soaking like menstrual pads) is normal, especially during the first 2-3 days.
- 4. The penis will look bruised, discolored (especially at the head part), and swollen during the first 2 weeks. These are not necessarily the signs of infection or internal bleeding. If the child is without significant pain after 2 days, has no fever and the urine drains well, then the penile appearance of swelling and bruising is likely normal.

What medications will my child take at home after the surgery?

We will send your prescriptions to our outpatient pharmacy because many outside pharmacies do not carry the medications we will order.

1. **Pain medication.** Tylenol (acetaminophen) – your child should take a dose of Tylenol every 4 hours for the first week.

We will also give your child a prescription for a strong pain medication called oxycodone. Your child will take this medicine in addition to Tylenol.

- We recommend giving the child the first dose of Oxycodone 3 hours after you leave the hospital and then repeat every 4 hours for the first 24 hours (total of 4 consecutive doses). Do not give your child oxycodone if he is very sedated and/or it is difficult to wake him up.
- During the first day, give your child a dose of Oxycodone every 4 hours on a set schedule rather than waiting until the child is in pain. This is called "around-the-clock" dosing and will make the recovery smoother.
- Starting on the second day, you may use the same dose of Oxycodone every 6 hours **as needed** if he looks uncomfortable (but continue giving Tylenol at the same time).
- After 24 hours, you may also start giving Motrin every 6 hours as needed, in addition to Tylenol.

- 2. **Bladder spasm medication.** If the child goes home with a catheter, then he will need to take **Ditropan** (oxybutynin). The bladder spasms are occasional lower belly (abdominal) pain, lasting for a few minutes. If your child has these symptoms he should take Ditropan 3 times a day continuously until the catheter is removed. Some of the side effects of Ditropan include constipation, dry mouth, facial flushing, and irritability.
- 3. Antibiotics. If the child goes home with a catheter, he will need to take a daily dose of antibiotics to prevent infection. We generally use **Bactrim** (trimethoprim-sulfamethoxazole). The child should take the antibiotics **once a day until the catheter is removed.** If the child is allergic to sulfa (contained in Bactrim), we will prescribe a different antibiotic.
- 4. **Ointment.** apply a generous amount of antibiotic ointment (such as **Bacitracin** or Triple antibiotic ointment) all over the penis, especially at the tip of the penis. Your doctor may advise you to use petroleum jelly (Vaseline) instead of antibiotic ointment. The ointment or vaseline should be applied **at least 3 times a day and/or with every diaper change.** Cover the head of the penis like you are frosting a cupcake. While the bandage is still on, focus on the exposed head of the penis. Once the bandage is off, include the neck area of the penis where you see stitches.
- Stool softener. Children can develop constipation after any surgery because of the different medications they received. Give your child Colace (Docusate) or Miralax daily until he is off all his medications.

Will my child have a urinary catheter after the surgery?

Surgeons make a decision to use a catheter during the surgery to maximize the chance of success. The catheter may not be necessary in some hypospadias and penile surgeries. If there is a catheter, in most situations it will be sutured to the head of the penis. In some situations, we may use a balloon catheter (called Foley).

Instructions for children who have a catheter:

• The catheter is placed all the way into the bladder, and you should see the urine dripping constantly. **If you do not see any urine draining** **through the catheter for more than 3 hours, call us immediately**. If the catheter is not working properly, children can become very uncomfortable due to a full bladder and may even urinate around the catheter. This can be dangerous for the repair.

• Because the catheter is an open-ended drainage system, we use double diapering in babies to keep dirty stool away from the open hole of the catheter. If your surgeon would like you to use a double diaper, you will receive instructions on how to make and use double diapers before you leave the hospital. It is important that the hole through which the bandaged penis and catheter come out is in the front, not between the legs. If the children are older and potty trained, we may simply use one diaper or a drainage bag for urine collection.

How do I care for the penile bandage?

Start removing the penile dressing 48 hours after surgery. The dressing may stick and be difficult to remove. Drizzle the bandage with warm tap water and then unwind as much of the dressing as you can without force and trim the excess dressing. Sometimes, a piece of gauze on the penis gets stuck and may not come off easily. In this case, simply trim off the loosened gauze with scissors and try to remove the remaining gauze over the next day or two.

Apply antibiotic ointment to the tip of the penis and dressing. Your doctor may advise you to use petroleum jelly (Vaseline) instead of antibiotic ointment. Continue removing the dressing, a little at a time, with each dressing change until the entire dressing is off.

What activities can my child do after surgery?

1. **Bathing.** Until the catheter is removed, the child should not take either showers or tub baths. Because the catheter is an open-ended two-way street, the bath-water may go into the bladder, increasing the infection risk. Once the catheter is removed, he may shower or bathe normally the following day. If your child goes home without a catheter, then he may

resume normal showers and baths 2 days after the surgery (after removing the penile bandage). While the catheter is in, use wash-cloths and sponges to clean him.

- 2. **Car seats**. It is safe for the child to use car seats immediately after the surgery.
- 3. **Holding the baby.** It is safe to hold the baby normally. He may also sleep on his belly. If the catheter is connected to a drainage bag, be careful not to tug on the catheter or tube.
- 4. **School and Day Care.** If your child goes home with a catheter, they should not return to school or daycare until the catheter is removed. If the child does not have a catheter, they may return to daycare or school 1 week after the surgery if they are comfortable and not taking any pain medication

What are the activities to avoid?

We recommend avoiding strenuous activities such as sports or gym classes for 3 weeks after the surgery. The child should also avoid any straddling type of plays such as baby bouncers and bicycle/tricycle for 3 weeks.

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