



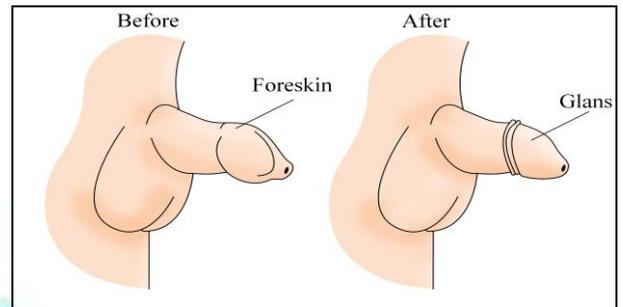
## Operation Information

### Circumcision

#### Introduction

The foreskin is a fold of skin that covers the glans of the penis. Circumcision is the surgical procedure that removes the redundant and constricting foreskin.

Indications for this procedure include: Phimosis (foreskin is too long or tight), chronic balanitis (inflammation of glans of penis), urethral obstruction and formation of preputial pouch during urination.



#### Outcomes

This operation is a surgical procedure to remove the redundant and constricting foreskin of the penis. The expected outcome of this operation is determined in different type of indications.

#### Procedures

1. The operation can be performed under local or general anaesthesia.
2. The foreskin is removed and bleeding is controlled.
3. Absorbable sutures are used to close the wound.
4. A dressing is applied loosely around the tip of the penis.

#### Possible Risks and Complications

1. Wound bleeding
2. Wound infection
3. Scarring
4. Damage to nearby organs (including glans of penis or urethra)
5. Excessive removal of foreskin
6. Narrowing of meatus
7. Urinary tract infection
8. Painful erection

\*\* The risks listed above are in general terms and the possibility of complications is not exhaustive. Please understand that even though all procedures are carried out with utmost professionalism and care, this does not rule out the possibility of complications arising. In the event of peripheral organ damage or post-operative haemorrhage or leakage, further operation may be necessary.

## **Pre-operative Preparations**

1. Good hygiene can prevent surgical wound infection.
2. The procedure and possible complications will be explained by the doctor and a consent form must be signed by the patient, parent or legal guardian prior to the operation.
3. Please inform the doctor and nurse all your past medical history, previous surgical operations, current medication and any complication with drug or anaesthesia. Please inform doctor if you are taking medications that affect blood coagulation such as Aspirin, Warfarin, Xarelto or Pradaxa, nonsteroidal anti-inflammatory drug (NSAID) such as Ibuprofen, Naproxen and Chinese medication.
4. You are required to have a shower the night before the operation. The penis should be kept clean.
5. No food or drink six hours before operation (For general anaesthesia only).
6. Please change into surgical gown after removing all belongings including undergarments, dentures, jewellery and contact lenses.
7. Please empty your bladder before the operation.

## **Post-operative Instructions**

### General

1. After general anaesthesia, you may:
  - experience discomfort in the throat after tracheal intubation.
  - experience side effects of anaesthesia including feel tired, drowsy, nausea or vomiting. Inform the nurse if symptoms persist or worsen.
2. Please inform the nurse of wound pain. Proper pain relief treatment by injection or oral medication may be prescribed by the doctor.
3. You are usually discharged on the same day after the operation depending on your condition.

### Wound Care

1. Light dressing with sterile gauze is applied. Please keep the wound clean and dry. Do not apply dressing too tightly to avoid interfering penis blood supply.
2. Passing urine will be painless and not affected by the operation and mop dry.
3. Please use normal saline, distilled water or cooled boiled water to rinse the wound after urination.
4. Sutures will be dissolved and absorbed on its own in 2-4 weeks after operation. Removal of stitches is not necessary.
5. Reddish or yellowish discharge around the glans of penis is normal shortly after the operation.
6. The wound and the nearby tissue may become swollen but it will normally subside within 1-2 weeks.
7. Wear loose and light clothing to prevent the penis from sticking to your underclothes on the affected area. You may use a bottomless paper cup to protect the wound if necessary.
8. Shower is allowed from the next day following the operation.

### Diet

A normal diet may be resumed as instructed after recovery from anaesthesia (For general anaesthesia only).

## **Advice on Discharge**

1. Prescribed pain medication may be taken as needed.
2. You may seek advice from the doctor on when to resume normal sexual activity.
3. The mild bleeding can be controlled by applying direct pressure to the bleeding site.
4. Immediately consult your doctor or return to hospital for professional attention in the event of severe wound pain and redness, tenderness, pus or blood oozing, dysuria, shivering, high fever over 38°C or 100.4°F, or any other unusual symptoms etc.
5. Any follow-up consultations should be attended as scheduled.

Should there be any enquiries or concerns, please consult the attending doctor.

Under the professional care of the doctor, you will gradually recover. We wish you all the best during your treatment and recovery.

If you have any questions after reading the entire leaflet, please write them down in the spaces provided in order for the doctor to further follow-up.

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Compiled by Union Hospital Operating Theatre (OT) Governance Committee

The above information is for reference only, please enquire your physician for details  
Our Hospital reserves the RIGHT to amend any information in this leaflet without prior notification

