

# Hypospadias

## *Discharge Instructions for Home*

Hypospadias repair is a surgery that lengthens the tube (urethra) from the bladder so that it can come out of the tip of the penis. If the penis also has a bend (chordee), this will also be straightened during surgery.

### **When will my child be able to go home?**

Most children go home the day of surgery. If your child has another medical condition, they may need to stay overnight.

### **When may my child eat?**

- When fully awake, your child may have clear liquids, like 7UP, Jell-O, Popsicles and apple juice.
- Nausea and throwing up (vomiting) are common after surgery. If this happens, give your child a small amount of clear liquids at a time.
- If your child is not sick to his or her stomach or throwing up and is fully awake, your child may then start his regular diet.
- If your child has persistent nausea or vomiting that lasts more than 24 hours after surgery, you should call our office.

### **How do I take care of my child after anesthesia?**

- An adult should stay with your child at all times until his or her behavior returns to normal.
- Do not allow activities that require strength and coordination such as driving, swimming, biking or climbing stairs alone for 24 hours.

### **What will the penis look like after surgery?**

- The penis may appear red and swollen. Some bruising may appear as well.
- Often, a white coating or yellow discharge may appear around the area. This is part of the normal healing process.
- You may see some spotting of blood on the diaper or underwear. This is normal. If you see more than a quarter size of blood or if continuous bleeding is noted, apply firm pressure (without peeking) for 15 minutes and notify the doctor by calling the office.
- There will be stitches along the penis that will dissolve on their own. The stitch on the tip of the penis will be removed in clinic at the follow up appointment.

### **How do I take care of the surgery site?**

- Apply ointment (like petroleum jelly or antibiotic ointment) to the tip of the penis. This should be done over the dressing starting the same day as surgery. Apply ointment with each diaper change, or after your child uses the toilet, for **10 days**.
- Your child may take a shower or quick bath after **3 days**. After **10 days**, he may take a long tub bath, swim in the pool or swim at the beach.

### **How do I take care of the dressing?**

Different types of dressing (bandage) may be used, or no dressing at all. Check with your doctor if you do not see instructions for the type of dressing your child has.

- Non-stick gauze: Your child may have a non-stick gauze dressing around the penis. This dressing can be removed at any time. It should be removed in 24 hours if it has not fallen off.
- Clear plastic dressing: Your child may have a clear plastic dressing around his penis. If he does, this is how to take care of it:
  - The dressing is made of breathable clear tape with white tape or gauze underneath.
  - If this dressing falls off on its own, do not replace it. Just keep using the ointment.
  - If the dressing becomes dirty with stool (poop) after a bowel movement, it should be take off right away so the stool can be rinsed off the penis. You do not need to reapply the dressing.
  - If the dressing has not come off by **3 days** after surgery, you should take it off.

- Tips to remove the dressing: if the dressing is not loose, you can have your child sit in a warm bath for 10 minutes. If the dressing is still not loose, they can sit in a warm bath for an additional 10 minutes. At this point if you are unable to remove dressing, please contact urology.

#### **How do I care for the catheter?**

- The catheter is held in place by a stitch at the tip of the penis. This will be removed in clinic at your follow up visit.
- Pee (urine) will continuously drip out of the catheter into the double diaper.
- If instructed to do so, cap the end of the catheter while bathing your child.
- If urine is not draining and your child's diaper is dry for 4 hours, please ensure that catheter is not kinked. If urine still does not drain, call urology.
- The urine may be light pink and there may be small spots of blood in diaper. This is normal.

#### **How to double diaper (provider will clarify which way they prefer):**

##### **For double diaper with hole**

- Your child will wear a normal size diaper on the inside. You will cut a hole in this diaper and feed the catheter through.
- The second diaper will be 1 size larger and go over the first diaper.
- This prevents the catheter from getting dirty with bowel movements.

##### **For double diaper without hole**

- Your child will wear a normal size diaper on the inside. You will place the catheter over the top of this diaper
- The second diaper will be 1 size larger and go over the first diaper
- The catheter will drain into the second diaper. This prevents the catheter from getting dirty with bowel movement.

#### **How much activity can my child do after surgery?**

- Your child should rest the day of surgery
- No gym class, recess, heavy lifting, contact sports or swimming for **10 days**.
- No straddle activities (exersaucer, jumper, riding toys, bikes, horseback riding, etc.) for **10 days**.
- Please continue using your car seat, seatbelt, and high chair according to the manufacturer's instructions.

#### **When can my child return to daycare?**

- Your child may return to daycare when no longer requiring narcotic pain medications or frequent daytime over-the-counter pain medications. Please contact your daycare about their ability to comply with the recommended activity restrictions or over-the-counter medication administration.

#### **What medications could my child be on?**

- Antibiotic-Your doctor may prescribe an antibiotic while the catheter is in place. The provider will discuss this with you if this is their plan.
- Oxybutynin (Ditropan)- Your doctor may prescribe this to prevent bladder spasms. Bladder spasms are muscle cramps in the bladder which can be caused by the catheter. Signs of this could be crying, pulling legs to chest, or urine leaking out around the catheter. Do not give this medication the day of the follow up appointment.
- Pain medication as described below

#### **Will my child have pain?**

- After surgery, your child will have postoperative discomfort. This is normal. Over time, the body will heal itself and the pain will go away.
- Effective pain control will help your child feel better and heal faster. We encourage you to take an active part in your child's recovery. You know your child best.

#### **What medicines can help relieve my child's pain?**

- Acetaminophen and Ibuprofen are common medications to treat pain. Though these are over-the-counter medications you can purchase at your pharmacy, do not underestimate their value.
- Opioid medications are stronger medications for pain. They include medications like oxycodone or hydrocodone. Your child may need an opioid medication during the first 1-2 days, which is when the pain is worst.
- If your child is taking opioids, we want them to get the least amount needed to keep them comfortable. To do this, it is good to use non-opioid medicine at the same time.

### What medicines should my child take for pain?

- Your child's health care prescriber recommends these medications:
  - Acetaminophen
  - Ibuprofen
  - Oxycodone
  - Hydrocodone / Acetaminophen
  - Other: \_\_\_\_\_

### When should I start giving my child medication?

- Your child will receive pain medication while in the hospital. This medicine can be through an IV, by mouth or as direct nerve block. Generally these medicines will wear off after about 4-6 hours. Your nurse will help you make a plan to start giving medicine at home.

### How do I give Acetaminophen (Tylenol)?

- Acetaminophen may be given by mouth to your child for pain or fever, as needed every 4 to 6 hours.
- Acetaminophen is "over the counter" or purchased from a pharmacy without a prescription.
- Liquid supplied is usually 160 mg per 5 ml. Check your child's medicine concentration carefully.
- It is best to give your child the dose based on his or her weight, but if you do not know the weight, use the age to figure out the dose:
  - 6-11 lbs (0-3 months): 40 mg or 1.25 ml
  - 12-17 lbs (4-11 months): 80 mg or 2.5 ml
  - 18-23 lbs (1-2 years): 120 mg or 3.75 ml
  - 24-35 lbs (2-3 years): 160 mg or 5 ml
  - 36-47 lbs (4-5 years): 240 mg or 7.5 ml
  - 48-59 lbs (6-8 years): 320 mg or 10 ml
  - 60-71 lbs (9-10 years): 400 mg or 12.5 ml
  - 72-95 lbs (11 years): 480 mg or 15 ml
  - Over 95 lbs (Over 11 years): 640 mg or 20ml

### How do I give Ibuprofen (Motrin, Advil)?

- If your child is older than 6 months of age, ibuprofen may be given by mouth to your child for pain or fever, as needed every 6 hours.
- Ibuprofen is "over the counter" or purchased from a pharmacy without a prescription.
- Liquid supplied is usually 100 mg per 5 ml. Check your child's medicine concentration carefully. The volumes below do not apply to the concentrated infant formula.
- It is best to give your child the dose based on his or her weight, but if you do not know the weight, use the age to figure out the dose. Do not give ibuprofen to babies under 6 months.
  - 12-17 lbs (6-11 months): 50 mg or 2.5 ml
  - 18-23 lbs (12-23 months): 75 mg or 3.75 ml
  - 24-35 lbs (2-3 years): 100 mg or 5 ml
  - 36-47 lbs (4-5 years): 150 mg or 7.5 ml
  - 48-59 lbs (6-8 years): 200 mg or 10 ml
  - 60-71 lbs (9-10 years): 250 mg or 12.5 ml
  - 72-95 lbs (11 years): 300 mg or 15 ml
  - Over 95 lbs (Over 11 years): 400 mg or 20 ml

### How do I give opioid medication (Oxycodone, Hydrocodone)?

- If your child is expected to have strong pain, opioid medication may be given by mouth.
- Opioid medications are by prescription only.
- Dose is dependent on your child's weight and will be printed on the bottle.
- Opioid medication may cause stomach pain or nausea. It should be given with some food.

### What other techniques can I use to help my child's pain?

- In addition to medication, there are other important ways to relieve pain.
- *Distraction*: Take attention away from the pain by guiding your child's imagination through storytelling or by watching TV or movies, blowing bubbles, and/or reading a favorite book.
- *Comforting touch*: Comfort your child in ways that work best for them. Hold, cuddle, swaddle, massage, or rock your child.
- *Ice or heat*: Using ice wrapped in a cloth may ease some pain. Heat is useful for muscle pain and general relaxation. Use a warm heated microwave beanbag, hot water bottle or warm bath once allowed to bath.
- *Positioning*: Allow your child to remain in a position that is comfortable for them.
  - Cradle your baby.
  - Let your older child choose the position.
- *Preparation*: Use honest language and do not tell your child "it won't hurt."

**When should I follow up?**

- A follow up appointment will be scheduled for about 1 week after surgery.
- If your follow up has not been scheduled or you do not know the time, please call our office at **860-545-9395**.

**When should I call a doctor?**

If your child is having any problems during the day (8:30am-4:30pm Monday – Friday), call our office at **860-545-9395** and ask for the nurse. After hours, call **860-545-9000** and ask the operator for Urology. Call us if your child has any of these warning signs:

- Signs of infection: spreading redness or discharge from the incision, bleeding, or fever greater than 101.5°F.
- Significant bleeding: rapid swelling or bleeding at the surgery site
- Uncontrolled pain
- Problems after anesthesia: nausea or vomiting that will not stop, noisy breathing, refusing to drink more than 8 hours after leaving the hospital.
- Any other questions or any other medical concerns.

**Urology Clinic: 860-545-9395**  
**Urology Surgery Scheduler: 860-545-9674**  
**Main Hospital Number: 860-545-9000**