

Lysis of Penile Adhesions

Discharge Instructions for Home

Lysis of penile adhesions is a surgery to remove a skin connection to the head of the penis.

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 end of the penis may appear pink, red, purple, or raw. It may also appear swollen and bruised after surgery. This is normal and will get better slowly.
- 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.
- If stitches are used, they will dissolve on their own over the first several weeks after surgery. You may notice some redness where the surgery was done. This is normal. If the redness is spreading up onto the belly or testicles, you should call our office right away.

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 any dressing or glue if used starting the same day as surgery. Apply ointment with each diaper change, or after your child uses the toilet, for **10 days**.
- Beginning 2 days after surgery, gently push back the skin around the base of the penis with every diaper change to expose the head of the penis. Continue to do this until we see you back in clinic.
 - 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 with just skin glue. 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 hanging over 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.
- If the dressing has not come off by **3 days** after surgery, you should take it off. To remove the dressing, soak your child in a bathtub for 10-15 minutes to loosen the dressing. Then peel the sticky plastic off the skin and slide the dressing over the glans (head) of the penis. Remember to keep using the ointment after the dressing comes off.
- Skin glue: Your child may have skin glue on his penis. This will fall off on its own 3-7 days after surgery.

How much activity can my child do after 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 school?

- Your child may return to school when no longer requiring narcotic pain medications or frequent daytime over-the-counter pain medications.

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.

What medicines should my child take?

- Your child's health care prescriber recommends these medications:
 - Acetaminophen
 - Ibuprofen

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 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)?

- Ibuprofen may be given by mouth to your child over the age of 6 months 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

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 2-4 weeks 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