



# **Circumcision (for Paediatric)**

## **Procedure Information Sheet**

#### Introduction

Circumcision is the surgical removal of the foreskin from the head (tip) of the penis. The loose fold of skin that partially or completely covers the glands of the penis is known as the foreskin or prepuce. Phimosis describes the condition where the foreskin is too long or too tight to be retracted, it is very common in children, and carries no urgency for management unless accompanied by other complications. Although circumcision in children is a minor procedure, general anaesthesia is required in order to prevent struggling during the procedure.

#### Indication

- Balanitis: Glans is covered beneath the foreskin, which makes effective cleaning difficult. Infection, redness, swelling indicated by pain or pus formation may result.
- Difficulty in passing urine: when the opening of the foreskin is too tight, difficulty in urination may be experienced. This may lead to haematuria or urinary tract infection.
- When the tight foreskin is retracted and cannot be reduced, blood circulation of the penis will be affected.
- Urinary tract anomalies that predispose to urinary tract infection.

### The Operation / Procedure

Excess foreskin is removed and absorbable sutures are used to close the wound.

#### **Before the Operation / Procedure**

- The surgeon will explain the operation procedure and potential complications to the patient and their parents. And the anaesthetic process and its associated complications will be explained by the anaesthetist.
- 2. Before operation, written consent is required.
- 3. Please inform the doctor if your child has a history of drug allergy.
- 4. Patients will be instructed to keep nothing by mouth, usually for 6-8 hours before operation.
- 5. Skin preparation is required to reduce the chance of infection.

#### After the Operation / Procedure

Base on doctors have different approach, please follow the instructions from your doctor-in charge, the most common wound care, such as the following:

- Use normal saline / disinfectant / tap water / distilled water or cool boiled water to rinse the wound after passing urine, or use cotton ball soaked with disinfectant then apply to the wound for 5 minutes.
- 2. Wear a gown but not underpants.
- Use a bottomless paper cup to protect the wound from friction and to minimize stress to the wound.
- In case of minor oozing, apply direct pressure over the site of bleeding. Inform medical staff when excessive bleeding from the wound occurs.
- 5. Do not attempt to remove the scab over the wound. The scab will detach spontaneously when the wound has healed.
- 6. Bath daily to promote good personal hygiene. However, do not apply soap directly onto the wound.

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## **Risk and Complications**

- Active bleeding from wound
- 2.
- Persistent redness and swelling of wound 3.
- 4. Foul odour or purulent discharge from wound
- 5. Dysuria or difficulty in voiding

#### **Disclaimer**

This leaflet only provides general information pertaining to this operation / procedure. While common risks and complications are described, the list is not exhaustive, and the degree of risk could also vary between patients. Please contact your doctor for detailed information and specific enquiry.

### Reference

Smart patient website by Hospital Authority: Circumcision (7/2021)

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| Signature of Parents / Guardian: | Date: |                 |   |
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