



CIRCUMCISION PROCEDURE INFORMATION

Circumcision is the surgical removal of the foreskin (skin covering the glans (tip) of the penis). It is usually performed for one or more of the following reasons:

- A tight, non-retractile foreskin - known as phimosis
- Recurrent infections under the foreskin – known as balanitis
- Skin disease on the foreskin and glans (head of penis) - such as chronic inflammation
- Large warty lesions of the foreskin
- Cancerous/precancerous lesions of the foreskin.

Why do I need treatments other than medications?

- Topical creams and washes (including short-term use of steroid cream) – for phimosis, these may decrease inflammation and relieve some tightness but symptoms often return once the treatment is stopped. This may not be appropriate or effective treatment depending on case to case basis. Circumcision is usually necessary if topical agents fail.
- Dorsal slit of the foreskin – this involves incising (cutting) the tip of your foreskin to relieve the tightness which is preventing retraction.
- Frenuloplasty - a surgical procedure used when the frenulum is tight, causing pain and may tear during intercourse
- Preputioplasty – a surgical procedure used to widen the foreskin at its point of maximum tightness.

WHAT TO EXPECT DURING THE PROCEDURE:

Adult circumcision is typically performed under general anesthesia. In surgery, your doctor will make an incision to remove the foreskin. Bleeding is stopped by electrocautery which uses heat to seal any areas that are bleeding. The incision is closed using a small needle and stitches that are absorbed by your body. A bandage is placed tightly around the area to keep it clean and to reduce swelling. Your doctor will tell you how long to leave this bandage in place, typically no longer than 24 hours.

RISKS OF PROCEDURE:

- Bleeding
- Infection
- Anesthesia reactions
- Foreskin issues
- Pain
- Cosmetic results
- Sensation changes

PRIOR TO YOUR PROCEDURE:

You will be scheduled in office two weeks before your procedure date for a pre-operative appointment to answer any questions. You will have prescriptions needed for the procedure sent to your pharmacy at this time.

Know the arrival time and date of your procedure.

If your procedure is canceled or must be rescheduled we will notify you as soon as possible and discuss potential dates for rescheduling surgery.

Please fill all prescriptions that we give you and read the instructions on the bottle. These prescriptions will have been given to you at your preoperative appointment or when we call prior to your procedure.

Please note: Any narcotic medication (Tylenol with Codeine, Hydrocodone, Vicodin, Norco, Oxycodone, and Percocet) can cause constipation. It is recommended to get over the counter Miralax and a stool softener to help prevent constipation if you choose to use these Medications.

You must notify your provider if you are taking any **SGLT2 inhibitors** such as

- Brenzavvy (bexaglifloxin)
- Inovokana (canagliflozin)
- Farziga (dapagliflozin)
- Jardiance (empagliflozin)
- Steglatro (ertugliflozin)

OR any **GLP-1 receptor agonists** such as

- Ozempic (semaglutide subcutaneous)
- Trulicity (dulaglutide)
- Bytetta (exenatide)
- Bydureon Bcise
- Victoza (liraglutide)
- Adlyxin (lixisenatide)

If you take any **blood thinners** on the following list, this will need to be discussed with your provider. Do not stop these medications on your own. According to the schedule below, unless otherwise noted by your cardiologist or Dr. Trotter/Dr. McClintock.

- o Plavix (Clopidrogel)
- o Pradaxa (Dabigatran)
- o Xarelto (Rivaroxaban)
- o Elquis (Aphixaban)
- o Effient (Prasugel)
- o Brillinta (Ticagrelor)
- o Aspirin or Baby Aspirin
- o Fish Oil
- o Meloxicam

Medications Prescribed For Your Procedure: Please read the instructions below and ON THE MEDICATION BOTTLES for when, why and how to take them.

1. Keflex (cephalexin), Bactrim (trimethoprim /sulfamethoxazole) or Doxycycline. These are antibiotics. You are to start the antibiotic the day before the procedure and complete the course as prescribed. It may cause GI upset.
2. Tylenol with Codeine. These are optional narcotic pain medications. They are to be taken if needed for SEVERE pain after the procedure. Please note: Any narcotic medication (Tylenol with Codeine, Hydrocodone, Vicodin, Norco, Oxycodone, and Percocet) can cause constipation and drowsiness. It is recommended to get over the counter Miralax and a stool softener to help prevent constipation if you choose to use these medications.

WHAT TO EXPECT AFTER THE PROCEDURE:

You will be responsible for the care of the absorbable sutures that will dissolve within the first two weeks.

You may shower 48 hours after surgery.

Keep the area clean and dry. Do not soak/submerge sutured areas in water for the first 4 weeks.

Your penis may be swollen and bruised for 1-2 weeks post-surgery.

You should limit physical activity for the first 72 hours following surgery. You may stretch your legs and walk.

You may indirectly apply ice packs (frozen pea packs) wrapped in a towel for 15 minute intervals per hour to the affected area for the first 48-72 hours.

After the first 72 hours you may resume light physical activity, but avoid strenuous physical activity for the next 6 weeks.

Erections should be avoided in this healing period. An erection may cause premature rupture of the sutures and delay healing.

Refrain from any sexual activity for four to six weeks after surgery or until cleared by your provider.

CONTACT OFFICE WITH ANY CONCERNING SYMPTOMS INCLUDING:

- Fever or 101 F degrees Fahrenheit or higher.
- Painful swelling under the skin incision or involving the scrotum.
- Redness of the genital area that appears to be spreading.
- Uncontrolled vomiting

Important Contact Information

Midtown Urology
911 W. 38th Street, Suite 200
(512) 451-7935 phone
(512) 451-7965 fax

If you need to reach the doctor after hours for an urgent matter, please call our office at 512-451-7935 and follow the prompts to be connected with the on-call provider.

You may also go to Seton Main Emergency Room on 38th and N. Lamar. Please only go to this hospital as our physicians have privileges there.

Hospital for Emergencies

Seton Main Medical Center
1201 W 38th St, Austin, TX 78705