

Hypospadias Repair

Care After Surgery

How to care for your child after a hypospadias repair surgery

What is hypospadias repair? Hypospadias repair is a surgery that lengthens the tube (urethra) from the bladder so that it comes out at the penis tip. If there is a bend in the penis (chordee), it will be straightened during the repair.

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 having a stomachache or throwing up and is fully awake, your child may then start a regular diet.

How do I care for the surgery site?

- After the surgery, your child may have a dressing (bandage) on the penis.
- There will be a small, soft tube (catheter) in the penis, which will drain all of the urine.
- The area around the incision will be swollen and red. You may also notice some bruising, yellow crusting or scabbing. This will get better with time.
- Some oozing of blood is expected. If the dressing is soaked or the penis is bleeding, apply constant, gentle pressure for 5 minutes. If bleeding continues, see the When should I call a doctor section at the end of this handout.
- Before and after the dressing is removed, put a moderate to large amount of petroleum jelly (Vaseline) all over your child's penis with each diaper change (about 5 times per day) for at least 2 weeks.

How do I care for the dressing?

- This dressing helps to reduce the risk of bleeding and swelling after surgery.
- Sponge-bathe your child for the first 2 to 3 days after surgery. Then, your child can go back to normal bathing.
- If poop gets under the dressing after a bowel movement, the dressing should be removed. If poop is only on the outside of the dressing, gently wipe the poop away.
- You may be asked to remove the dressing at home 2 to 3 days after surgery. Your surgeon will tell you when and how to do this.
- If the dressing gets dirty from stool or falls off early, do not replace it.

To Learn More

- Urology
206-987-2509
- Ask your child's healthcare provider
- seattlechildrens.org

Free Interpreter Services

- In the hospital, ask your nurse.
- From outside the hospital, call the toll-free Family Interpreting Line, 1-866-583-1527. Tell the interpreter the name or extension you need.



Tips for dressing removal

- Let your child sit in a warm bath for about 10 minutes. This can help loosen the dressing and make it easier to remove. If the bandage is not loosening, have your child sit in the bath for another 10 to 20 minutes.
- If the dressing is still not coming off easily or seems to be stuck, apply ½ a cup of oil (corn, vegetable, olive or baby oil) directly on the penis. Allow this to soak in for 20 minutes and then remove the dressing.
- If the dressing is still not coming off, call the urology office.

How do I care for the catheter?

- The catheter is held in place by a stitch at the tip of the penis. We will remove this in the urology clinic in 2 to 10 days.
- Pee (urine) will drip continuously from the catheter into a double diaper. We will show you how to double diaper before you go home.
- The catheter may have a cap on the end. Please make sure the cap is off and the catheter is draining into the diaper.
- If urine is not draining and your child's diaper is dry for 4 hours, make sure the catheter is not bent (kinked). If urine is still not draining call the urology clinic.
- The urine may be light pink, and you may see spots of blood in the diaper.

If we ask you to double diaper your child:

- Your child will wear a normal sized diaper on the inside.
- On the outside, your child will wear a diaper 1 size larger.
- The catheter will drain into the outer diaper, so the catheter does not get dirty if your child has a bowel movement.

How much activity can my child do?

- Your child should rest the day of surgery.
- Your child should avoid rough play, climbing, contact sports and straddle toys (bicycles, jumpers, etc.). A good rule for activity is to keep both feet on the ground at the same time for 2 to 3 weeks after surgery.

Bowel movements

- It is important for your child to have regular bowel movements after surgery.
- Some of the medicines your child may be taking (such as oxybutynin) can cause constipation.
- If your child is straining or has not had a bowel movement for 2 to 3 days after surgery, give plenty of water, juices, fruits or vegetables.
- If your child has not had a bowel movement for 3 days, call the urology office. We may prescribe a stool softener.
- If your child has a bowel movement that gets on the incision, wash it off with water (do not use soap).

Will my child have pain?

- After a surgery your child will likely feel pain. We partner with you and your child to relieve pain as completely as possible. You know your child best. We encourage you to take an active part in your child's recovery by talking with your care team about options for your child. No matter the level of your child's pain, we join you to assess and respond right away.
- We may prescribe acetaminophen (Tylenol), ibuprofen (Advil or Motrin) for pain. We will give you instructions on dosing and timing when you are getting ready to go home. See our handout "Acute Pain". seattlechildrens.org/pdf/PE503.pdf
- In addition to medicine prescribed for pain, we will work with you to create a plan that encourages coping activities to treat pain like music, games, TV or videos and provide support.
- Help your child get better, faster with good pain treatment.
- See our handout "Soothing Your Baby: In the Hospital and at Home". seattlechildrens.org/pdf/PE593.pdf

What other medicines might my child need?

- **Antibiotic:** Your doctor may prescribe this to help prevent infection while the catheter is in place. This is stopped after the catheter is removed.
- **Oxybutynin (Ditropan):** Your doctor may prescribe this to prevent bladder spasms. Bladder spasms are muscle cramps in the bladder caused by irritation from the catheter. Signs that your child may be having a bladder spasm are crying, pulling knees to the chest or urine leaking around the catheter. Do not give oxybutynin the day of the catheter removal.
Note: read the medicine prescriptions carefully so you do not confuse the oxycodone for pain and oxybutynin for bladder spasms.
- **Stool softener:** Your doctor may prescribe a stool softener to prevent or help with constipation.

When should I call a doctor?

Monday to Friday, call the Urology clinic at 206-987-2509 for questions or any of the concerns listed below. Send MyChart messages for non-urgent questions.

Nights, weekends and holidays, call 206-987-2000 and ask for the urology resident on call for urgent concerns from the following list:

- Fever higher than 101.5° F (38.6° C)
- Redness or swelling that spreads up into the stomach area
- A lot of bleeding that doesn't stop after you apply pressure for 5 minutes
- Your child has pain not controlled by the medicine prescribed
- Cannot pee in 8 to 12 hours after surgery or urine is not draining from the catheter for more than 4 hours
- Throwing up (vomiting)
- The catheter comes out