

尿道下裂修复

术后护理

你的孩子在接受尿道下裂修复手术后如何进行护理

什么是尿道下裂修复？ 尿道下裂修复是一种延长膀胱管（尿道），使其从阴茎顶端出来的手术。如果阴茎有弯曲（阴茎下弯），则在修复过程中将其矫直。

我的孩子什么时候可以吃饭？

- 完全清醒后，你的孩子就可以喝些澄清液体，如 7UP、Jell-O、Popsicles 和苹果汁。
- 手术后，恶心和呕吐很常见。如果发生这种情况，每次给孩子喝些少量澄清液体。
- 如果孩子没有胃痛或呕吐，并且完全清醒，就可以开始有规律地饮食。

我该如何护理手术部位？

- 手术后，孩子的阴茎会包扎起来（绷带）。
- 阴茎内会有一根小软管（导尿管），它会排出所有尿液。
- 切口周围的区域将会红肿。你可能还会注意到一些瘀伤、黄色的硬皮或结疤。随着时间的推移，这种情况会有所改善。
- 预计会有一些血渗出。如果敷料浸透或阴茎出血，请持续轻柔地按压 5 分钟。如果出血持续，请参阅本手册末尾的“我应该何时致电医生”部分。
- 在取下敷料之前和之后，每次换尿布（每天约 5 次）时，都要在孩子的阴茎上涂上适量的凡士林，持续至少 2 周。

我该如何处理敷料？

- 这种敷料有助于降低术后出血和肿胀的风险。
- 术后的头 2 到 3 天用海绵给孩子洗澡。之后，你的孩子可以恢复正常洗澡。
- 如果排便后大便进入敷料下，则应将敷料取下。如果大便只在敷料的外侧，则轻轻地将大便擦除。
- 你可能需要在术后 2 到 3 天在家取下敷料。你的外科医生会告诉你何时以及如何取下辅料。
- 如果敷料被大便弄脏或过早脱落，请勿将其包扎回去。

去除敷料的技巧

- 让孩子在温水浴中坐大约 10 分钟。这样可以使敷料松动，更容易去除。如果绷带没有松动，让孩子再坐浴 10 到 20 分钟。
- 如果敷料仍然不容易脱落或有卡住迹象，则直接在阴茎上涂抹 ½ 杯油（玉米油、蔬菜油、橄榄油或宝宝润肤油）。等待浸润 20 分钟，然后去除敷料。
- 如果敷料仍未脱落，请致电泌尿科。

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了解更多信息

- 泌尿科
206-987-2509
- 询问你孩子的医务人员
- seattlechildrens.org

免费口译服务

- 在医院里，请咨询你的护士。
- 从医院外拨打免费家庭口译热线：
1-866-583-1527。告诉口译员你需要呼叫的姓名或分机号码。

我该如何处理导尿管？

- 导尿管在阴茎顶端通过缝线固定。我们会在 2 到 10 天内泌尿科将其取出。
- 小便（尿液）会从该导尿管连续滴入双层尿布中。在你回家之前，我们会教你如何穿上双层尿布。
- 导尿管末端会有一个帽子。请确保帽子已打开，导尿管正在引流到尿布中。
- 如果尿液没有排出，而且孩子的尿布已干燥 4 小时，请确保导尿管没有弯曲（扭结）。如果尿液仍未排出，则致电泌尿科。
- 尿液可能呈浅粉色，你可能会在尿布中看到血点。

如果我们要求给孩子穿上双层尿布：

- 孩子将在里面穿一个正常尺寸的尿布。
- 在外面，孩子将穿大一号的尿布。
- 导尿管将引流到外层尿布，这样，当孩子大便时，导尿管就不会弄脏。

我的孩子可以进行多少活动？

- 孩子应在手术当天休息。
- 孩子应避免粗暴玩耍、攀爬、接触性运动和跨骑玩具（自行车、滑步平衡车等）。一个好的活动规则是在术后 2 到 3 周内保持双脚同时着地。

排便

- 术后让孩子有规律地排便是很重要的。
- 孩子可能正在服用的一些药物（如奥昔布宁）可能会导致便秘。
- 如果孩子在术后 2 到 3 天内感到排便困难或没有排便，要多喝水和果汁，多吃水果或蔬菜。
- 如果孩子 3 天没有排便，请致电泌尿科。我们可能会给你开一种大便软化剂。
- 如果孩子的大便粘到了切口上，用水洗掉（不要用肥皂）。

我的孩子会痛吗？

- 手术后，孩子可能会感到疼痛。我们会与你及你的孩子配合，尽可能彻底地缓解疼痛。你是最了解你的孩子的人。我们鼓励你与治疗团队谈谈你孩子的治疗方案，以积极参与到孩子的康复中。无论孩子的疼痛程度如何，我们都会立即与你一起进行评估并做出响应。
- 我们可能会开对乙酰氨基酚（泰诺）、异丁苯丙酸（安非他明或布洛芬）来止痛。当你准备回家时，我们会告诉你服药的时间和剂量。请参阅我们的手册“急性疼痛”。 seattlechildrens.org/pdf/PE503SC.pdf
- 除了开出止痛药物外，我们还将与你一起制定一项计划，鼓励你通过音乐、游戏、电视或视频等活动来应对疼痛，并提供支持。
- 通过良好的疼痛治疗帮助孩子更快地康复。
- 请参阅我们的传单“安抚宝宝：在医院和家里”。 seattlechildrens.org/pdf/PE593.pdf

我的孩子可能需要哪些其他药物？

- 抗生素：你的医生可能会开这个处方，以防止置入导尿管时发生感染。这种药物在取出导尿管后即停止用药了。
- 奥昔布宁（Ditropan）：你的医生可能会开这个处方，以防止膀胱痉挛。膀胱痉挛是由导尿管刺激引起的膀胱肌肉痉挛。孩子可能出现膀胱痉挛的迹象包括苦恼、膝盖紧贴胸部或导尿管周围漏尿。不要在拔管当日使用奥昔布宁。

注意：请仔细阅读药物处方，以免将止痛用的羟考酮与治疗膀胱痉挛的奥昔布宁混淆。
- 大便软化剂：你的医生可能会开大便软化剂来预防或帮助缓解便秘。

我什么时候应该打电话给医生？

周一至周五，如有疑问或有下列任何疑虑，请致电泌尿科，电话：206-987-2509。对于非紧急问题，请发送 MyChart 消息。

夜间、周末和节假日，请致电 206-987-2000 并向泌尿科值班的住院医师询问以下列表中的紧急问题：

- 发热且体温高于 101.5° F (38.6° C)
- 发红或肿胀，已蔓延至腹部
- 大量出血，在你按压 5 分钟后仍无法停止
- 孩子出现处方药物无法控制的疼痛
- 术后 8 到 12 小时内不能小便，或者导尿管超过 4 小时没有排出尿液
- 呕吐
- 导尿管脱落

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