

## Introduction

The loose fold of skin that partially or completely covers the glans of the penis is known as the foreskin or prepuce. Phimosis, the condition where the foreskin is too long or too tight to be retracted, is very common in children, and carries no urgency for management unless accompanied by complications.

## The Operation

Circumcision is a minor procedure. General anaesthesia is required in order to prevent struggling during the operation. Excess foreskin is removed and absorbable sutures are used to close the wound.

## Preoperative Preparation

1. Admit 1 day before or on same day of this elective operation.
2. A written consent is required.
3. Anaesthetic assessment. **Inform your doctors** about drug allergy, regular medications or other medical conditions.
4. Keep fast for 6 to 8 hours before operation.
5. Empty bladder and change to operation clothes before transfer to operating room.
6. Pre-medication, antibiotic prophylaxis and intravenous line may be required.

## Postoperative Instruction

### General

1. Mild throat discomfort or pain because of intubation.
2. Mild discomfort or pain over the operation site. Inform nurses if more analgesics are required.
3. Nausea or vomiting are common; inform nurses if symptoms severe.
4. Can mobilize and get out of bed 6 hours after operation and usually go home the following day.

### Wound care

1. During hospitalization, use normal saline, distilled water, or cool boiled water to cleanse the wound.
2. Do not apply medicated cream or lotion onto the wound unless recommended by medical staff.
3. Wear a gown but not underpants. Use a bottomless paper cup to protect the wound from friction and to minimize stress to the wound.
4. After rinsing, dab the wound dry with clean gauze. There is no need to cover the wound with gauze.
5. Inform medical staff when excessive bleeding from the wound occurs.
6. Do not attempt to remove the scab over the wound, which will detach spontaneously.
7. Practise good personal hygiene, bath daily. Do not apply soap directly to avoid irritation.

### Diet

Resume diet usually 4 hours after anaesthesia, when taking sips of water well.

## Common Risks and Complications (not all possible complications are listed)

### Anesthesia related complications

1. Cardiovascular: myocardial infarction or ischaemia, stroke, deep vein thrombosis, pulmonary embolism.
2. Respiratory: atelectasis, pneumonia, asthmatic attack, exacerbation of chronic obstructive airway disease.
3. Allergic reaction and shock.

### Procedure related complications

1. Fever.
2. Persistent redness and swelling of wound.
3. Active bleeding from wound.
4. Purulent discharge from wound.
5. Foul odour from wound.
6. Dysuria.
7. Difficulty in voiding.
8. Should you have any queries, please consult your doctor-in-charge.

## Things to take note on discharge

1. Contact your doctor or the Accident & Emergency Department if you find increasing pain or redness around the wound and discharge from the wound.
2. Take analgesics prescribed by your doctor if required.
3. Resume daily activity gradually.
4. Wear a gown or loose cotton trousers until the wound has healed.
5. Maintain good personal hygiene and keep the wound dry.
6. After voiding, use distilled water or cool boiled water to rinse the wound.

### Remarks

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your doctor. Evangel Hospital reserves the right to amend this leaflet without prior notice. We welcome suggestions or enquiries on the information provided in this leaflet. Please contact our Healthcare professionals so that we could follow up and make improvement.

### Reference

Hospital Authority: "Circumcision" (2018)  
Smart Patient: <http://www21.ha.org.hk/files/PDF/QM/SRG-14.pdf> (12-07-2023)