Hypospadias and Chordee Repair
Instructions for after surgery.
Hypospadias surgery is done as outpatient (come and go) surgery. This means your child will be discharged from the hospital on the same day of the surgery. Surgery lasts 2-3 hours and is performed with a general anesthetic and local anesthetic (direct block to the penis or through a caudal block). Most children will go home with a bandage and a catheter in the penis. The catheter will drain directly into the diaper (or into a bag for older children) and will usually be removed 7-10 days after surgery in the clinic. (See the Figure 2 below). Below are instructions to help you care for your child at home after the surgery.

Catheter care
If your child is discharged with a catheter it will simply drain into a diaper. Or, if your child is older, it may drain into a bag connected to his leg. If your child is still in diapers, we recommend using a double diaper technique in order to adequately cushion and protect the area in addition to allowing the catheter to drain into the outer diaper away from his surgical incision. To do this, simply direct the catheter either around or through the first diaper into the second diaper. The first diaper will be for bowel movements and the outer diaper will absorb the urine. Because the catheter is constantly dripping do not expect a totally dry diaper but rather change it as it get appropriately heavy. On occasion you may observe leakage of urine around the
catheter; this is very common and not concerning. This is primarily caused by a bladder spasm where the extra pressure in the bladder pushes the urine around the catheter. Your child may arch his back and squirts of urine may be noted through or around the tube. While spasms are not harmful they may be uncomfortable. If excessive leakage around the catheter is noted, or if the catheter falls out, please contact your surgeon’s office immediately.

Wound care and bathing
For the first 48 hours after surgery we recommend sponge bathing only. If your child has a loose bowel movement and soils the surgical dressing, clean it gently with soapy water and a washcloth, wiping away from the penis and toward the rectum. After 48 hours we recommended twice daily tub baths, soaking the area 10-15 minutes and then gently patting dry; please do not scrub the penis. It is normal to have swelling and discoloration/bruising for several weeks after surgery, all of this will resolve in time. Most children will have improvement in swelling after about 10-14 days, but it is normal for some swelling to persist for up to 3-6 months. Mild wound oozing is also to be expected and it is normal to see some blood spotting in the diaper or underwear. Excessive bleeding or large blood clots are not expected and if these are observed please call your surgeon’s office. Do not apply powder or any other ointments to the genital area unless instructed to by your physician.

Medications after surgery
Most children will go home with antibiotics, medication to treat bladder spasms (Ditropan), and over-the-counter pain medicine (Tylenol and Ibuprofen).
1. Antibiotic: Your child will be given a prescription for a daily antibiotic. You should give the antibiotic daily while the catheter is in place and then continue the antibiotic for a couple days after removal of the catheter.
2. Medication for bladder spasms: Your child may need a medication called Ditropan to control bladder spasms while the catheter is in place. Please stop the medication the night before the appointment to remove the catheter otherwise your child may not be able to urinate on his own once the catheter is removed.
3. Pain medication: Tylenol and Ibuprofen may be given to your child to relieve discomfort and pain after the surgery. We recommend alternating Ibuprofen and Tylenol every 4-6 hours for the first few days in order to best manage your child’s pain. Once pain has improved you may give the medication as needed.

Activity
Your child may resume normal activity after surgery. Please encourage quiet play during the first few weeks of after surgery, such as watching television, reading or playing board games. Avoid contact sports, gym, sandboxes, bicycles, straddling toys, or swimming for 3-4 weeks after surgery.

Diet
Your child may resume a normal diet. Make sure they have plenty of fluids. Do not give medicine on an empty stomach in order to help avoid nausea and vomiting.
Follow up
If your child has a catheter in place you will follow up in clinic between 7-10 days after surgery to have the catheter removed. You should plan to follow up again in about 4-6 weeks after the catheter has been removed for a post-op check up with your surgeon. Please bring questions that you may have to the follow up appointment.

Contact Information:
Laurence S. Baskin, MD  
http://urology.ucsf.edu/people/laurence-s-baskin#
Hillary Copp, MD, MS  
http://urology.ucsf.edu/people/hillary-l-copp
Michael DiSandro, MD  
http://urology.ucsf.edu/people/michael-j-disandro

Appointments & Location
Mission Bay Benioff Children's Hospital (Surgical Admissions)  
1975 4th Street  
San Francisco, CA 94143  
415.353.2200 (Phone)  
415.353.2480 (Fax)

Children’s Hospital & Research Center Oakland  
747 52nd Street Ambulatory Care 4th  
Oakland, CA 94609  
510.428.3402 (Phone)

PEDIATRIC NURSE PRACTITIONER  
Anne Arnhym, CPNP  
Certified Pediatric Nurse Practitioner  
Anne.Arnhym@ucsf.edu

PEDIATRIC REGISTERED NURSE  
Audra Pisani, RN  
Registered Nurse  
Audra.Pisani@ucsf.edu