



PATIENT EDUCATION

Circumcision: Caring for Your Baby

MAYO CLINIC CHILDREN'S CENTER



BARBARA WOODWARD LIPS
PATIENT EDUCATION CENTER

Mayo Clinic Children's Center

For more than 100 years, teams of physicians have cared for children at Mayo Clinic.

T. DENNY SANFORD PEDIATRIC CENTER

MAYO EUGENIO LITTA CHILDREN'S HOSPITAL

Pediatric Sub-Specialties in the following areas:

Allergy and Immunology	General Pediatric and	Plastic and Reconstructive
Anesthesiology	Adolescent Medicine	Surgery
Cardiology	Gynecology, Adolescent	Psychiatry and Psychology
Cardiovascular Surgery	Hematology and Oncology	Pulmonology
Child and Family	Infectious Diseases	Radiation Oncology
Advocacy Program	Medical Genetics	Radiology
Community Pediatrics and	Neonatal Medicine	Regional (Health System)
Adolescent Medicine	Nephrology	Pediatrics
Critical Care	Neurology	Research
Dermatology	Neurosurgery	Rheumatology
Developmental and	Ophthalmology	Sleep Medicine Center
Behavioral Pediatrics	Oral and Maxillofacial Surgery	Speech Pathology
Emergency Medicine	Orthopedic Surgery	Surgery
Endocrinology and Metabolism	Otorhinolaryngology (ENT)	Urology
Gastroenterology and	Physical Medicine and	
Hepatology	Rehabilitation	

Pediatric Specialty Clinics:

Adrenoleukodystrophy Clinic	Dermatology Genetics Clinic	Neonatal Follow-Up Clinic
Aerodigestive Clinic	Diabetes Clinic	Neuromuscular Clinic
Anxiety Disorders Clinic and	Eating Disorders Clinic	Pain Clinic
Intensive Therapy Program	Eosinophilic Esophagitis Clinic	Pain Rehabilitation Center
Arrhythmia and Device	Epilepsy Clinic	Pediatric Diagnostic Referral
Placement Clinic	Erythromelalgia Clinic	Clinic
Asthma Center	Facial Paralysis and	Pediatric Level 1 Trauma Center
Attention Deficit Hyperactivity	Reanimation Clinic	Plagiocephaly Program
Disorders (ADHD) Clinic	Feeding Program	Pulmonary Hypertension
Bariatric Surgery Clinic	Fertility Preservation	Program
Brain Injury Program	Fetal Surgery Program	Renal Stone Clinic
Brain Tumor Clinic	Friedreich's Ataxia Clinic	Spina Bifida Clinic
Cerebral Palsy Clinic	Functional Movement	Spinal Deformities Clinic
Chemotherapy/Radiation	Disorder Program	Sports Medicine Center
Long-Term Effects Clinic	Heart Failure Clinic	Thyroid Nodule/Cancer Clinic
Child and Adolescent Intensive	Hemophilia/Coagulopathy Clinic	Transgender Clinic
Mood Program (CAIMP)	Hyperlipidemia Program	Transitions Program
Childhood Sarcoma Clinic	Immunodeficiency Disorders	Transplant Center
CompPASS (Palliative Care and	Clinic	Travel Clinic
Integrative Medicine)	Inflammatory Bowel Disease	Vascular Malformations
Congenital Heart Clinic	Clinic	Velo-Pharyngeal
Constraint Induced Movement	Learning Disorders	Insufficiency Clinic
Therapy Program	Assessment Clinic	Voiding Clinic
Craniofacial Clinic	Long QT Syndrome Clinic	Weight Management Clinic
Cystic Fibrosis Center	Marfan Syndrome Clinic	
Dana Child Developmental and	Metabolic Bone Clinic	
Learning Disorders Program	Mood Disorders Clinic	

Circumcision removes the skin covering the tip of the penis. It is a fairly common surgical procedure for newborn boys in certain parts of the world. This includes the United States.

For some families, circumcision is a religious ceremony. The procedure also can be a matter of family tradition, personal hygiene or preventive health care.

This material explains how to care for your newborn son after his circumcision takes place in the hospital or shortly after he leaves the hospital.

Feeding your baby before the circumcision

You may feed your baby up until the time of the circumcision.

Helping your baby with discomfort

Talk to your health care provider about what is done to help lessen pain during circumcision. Usually a topical medicine numbs the penis. Medicine that blocks pain may be injected into the base of the penis. Your baby is swaddled and placed on a padded board for comfort during the procedure.

Your baby may have some discomfort after the circumcision. Talk to your baby's health care provider about what you may do to help with pain. Holding, feeding, swaddling, and using pacifiers usually offer enough help.

If your son is returning to be circumcised as an outpatient

If your son was not circumcised in the hospital shortly after he was born, this information explains what happens at the circumcision appointment.

- At the appointment, the doctor first examines your baby to decide whether the circumcision can be done in an outpatient setting. The doctor may find it is not possible to circumcise your baby safely at that time. Then you may need to schedule an appointment for another day to have an evaluation by a specialist in Urology.
- Following the circumcision, your baby will be brought to you. You need to stay at the hospital or clinic for observation for about 30 to 60 minutes. You may hold, comfort and feed your baby during this time. While you wait, a member of the care team checks your son's circumcision site.
- Before you leave, you will be shown how to care for the circumcision area when you go home.

Care of the penis

Follow these instructions until healing is complete. Healing usually takes place in about 10 to 14 days.

The tip of the penis will look very red for a few days after circumcision. You may see yellow matter that does not easily wipe away on the tip of the penis. This is normal healing. Leave the matter alone. It will flake off on its own. See Figure 1.

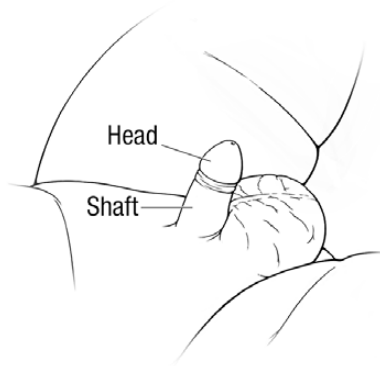


Figure 1. Newborn circumcised penis

If a dressing was used to cover the penis, your provider will tell you when it is all right to remove it.

Keep the area where your son was circumcised as clean as possible. Every time you change your baby's diaper, gently wash the penis with warm water and a soft cloth or use baby wipes. If your baby had a bowel movement, use warm water or baby wipes to remove the stool until the area is clean. You may put your baby in water to bathe him.

If your son was circumcised using the Plastibell technique, follow the instructions in "Care following the Plastibell technique." If the Plastibell technique was not used, continue following the instructions here.

After you wash the penis, use your finger to take a generous amount of petroleum jelly from its container. Gently cover the entire head of the penis with petroleum jelly. Use an amount about the size of a quarter. **Do this every time you change your baby's diaper until the penis is completely healed.**

Putting petroleum jelly on the tip of the penis stops it from sticking to the diaper or surrounding skin. This is an important part of your son's healing. Doing this helps to prevent an adhesion. An adhesion is a spot where the surrounding skin sticks to the head of the penis as it heals. Adhesions may go away on their own, or they may need medical attention.

Starting on the third day after circumcision, gently pull back, or retract, the skin on the shaft of the penis. Do this every day to prevent adhesions. To pull back the skin, gently push down on the skin at the base of the penis away from the head. Do this every day at bath time or when you change your baby's diaper. Doing this helps to prevent adhesions. See Figure 2.

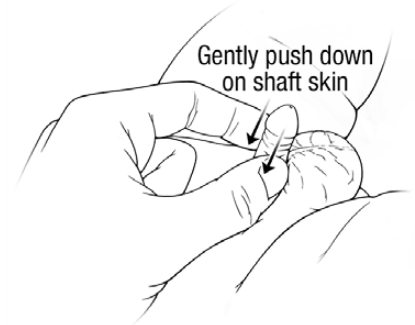


Figure 2. Retract the skin to prevent adhesions

Care following the Plastibell technique

Some surgeons use the Plastibell technique to perform circumcisions. You may see a plastic ring on the tip of the penis. See Figure 3. The plastic ring separates and falls off in 5 to 15 days. If it does not fall off in 15 days, contact your baby's health care provider.

Leave the ring alone unless your baby has a bowel movement. When that happens, use warm water or baby wipes to remove stool around the ring until the area is clean. You don't need to apply petroleum jelly. You don't need to do anything more until the ring falls off.

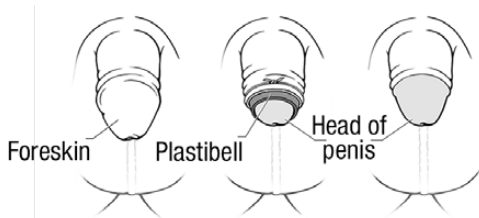


Figure 3. Plastibell technique

After the plastic ring falls off, gently pull back, or retract, the skin on the shaft of the penis. Do this every day to prevent adhesions. To pull back the skin, gently push down on the skin at the base of the penis. You are gently pushing the skin away from the head of the penis. Do this every day at bath time or when you change your baby's diaper. Doing this helps to prevent adhesions. See Figure 2.

Preventing adhesions

No matter how your baby's circumcision was done, as your baby grows, you may notice a fat pad at the base of the penis. This fat pad may push the skin on the shaft of the penis so that it is over the head of the penis. See Figure 4. Gently push down on the fat pad or shaft skin every day. This pulls back the skin so that the rim of the head of the penis is visible. See Figure 5.

Do this until the skin no longer goes over the head of the penis. The age when you will stop doing this is different for each child. Ask your baby's health care provider about this at regular check-ups.

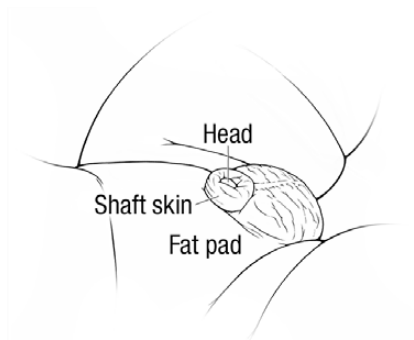


Figure 4. Shaft skin pushed forward by pubic fat pad

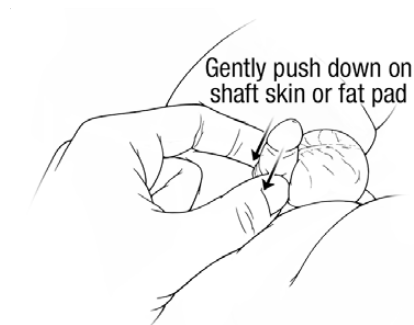


Figure 5. Continue to retract the skin every day

Call your baby's health care provider right away if:

- Your son does not urinate within 24 hours after the circumcision.
- Your son is crying and you are not able to comfort him.
- You see a spot of blood bigger than a quarter on your son's diaper. Or the incision bleeds more than a few drops even though you have put pressure on the penis. Put pressure on for 5 minutes with a warm washcloth or wet wipe.
- The circumcision site looks infected. Signs of infections include:
 - Redness that extends up the penis.
 - Swelling that gets worse after the second day.
 - A yellow coating on your son's penis that lasts longer than 10 days.
 - A rectal temperature higher than 100.4 degrees Fahrenheit (38 degrees Celsius).
 - Crying that doesn't stop with comforting.



BARBARA WOODWARD LIPS PATIENT EDUCATION CENTER

Mrs. Lips, a resident of San Antonio, Texas, was a loyal Mayo Clinic patient of more than 40 years and a self-made business leader who significantly expanded her family's activities in oil, gas and ranching. Upon her death in 1995, Mrs. Lips paid the ultimate compliment by leaving her entire estate to Mayo Clinic. By naming the Barbara Woodward Lips Patient Education Center, Mayo honors her generosity, her love of learning, her belief in patient empowerment and her dedication to high-quality care.

This material is for your education and information only. This content does not replace medical advice, diagnosis or treatment. New medical research may change this information. If you have questions about a medical condition, always talk with your health care provider.

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