NEWBORN CIRCUMCISION - CARE OF YOUR CHILD AT HOME

We hope you will find the following information useful in caring for your child. If you have any questions or concerns not answered in this handout, please call us at 602-279-1697.

PRE-PROCEDURE (BEFORE YOUR NEWBORN’S CIRCUMCISION):

● No formula or breast-feeding one hour prior to procedure.
● Give Infant Tylenol Drops 0.4 ml 30 minutes prior to procedure/appointment time.
● Bring a pacifier even if your child has never used one. A pacifier allows us to give Sweet Ease to your child during the procedure.

POST-PROCEDURE (AFTER YOUR NEWBORN’S CIRCUMCISION):

PAIN: Infant Tylenol Drops is usually adequate for pain control in infants. Your child may be irritable for the first 24 hours after the procedure. Give the Tylenol every 6 hours the first day.

CARE OF THE PENIS: Antibiotic ointment will be placed on the penis after the circumcision. Apply ointment (Neosporin or Bacitracin) to the circumcision site with each diaper change. A slight amount of blood may be on the diaper for the first 2 to 3 days after circumcision. This is normal. If you see blood clots in the diaper, apply firm but gentle pressure to the penis to stop the bleeding with a clean cloth or gauze and call our office. It is not unusual to have a bruise at the base of the penis where the local anesthesia was injected. This will go away in time.

Note: It is common to have the glans or head of the penis develop a yellow or white film (fibrinous exudate) over it. This is normal and will heal completely in a few weeks.

CLEANING: You may clean with diaper wipes or soap and water. Sponge bathe your child for the first 48 hours. You may resume bathing him in warm water after this, limiting the time sitting in the tub to 5 minutes until after your follow up appointment at the clinic. You will need to change the diaper frequently, as prolonged wetness can be irritating to the wound. Do not pull back on the penile skin to lean the penis until one week after the circumcision.

CALL THE CLINIC FOR:

● Fever of more than 101 degrees.
● Persistent vomiting.
● Bleeding occurs that is continuous and does not respond to direct pressure.
● Significant redness around the incision or noticeable drainage of pus from the incision.