

Your child's surgery information:

Procedure name: _____

Date: _____

- Open procedure
- Laparoscopic procedure

How do I care for my child after surgery?

Showering

- For the first 48 hours (2 days) after surgery, sponge bathe only.
- After 48 hours, it is ok to shower. Let soap and water run over the incision and pat the area dry.
- Do not submerge the incision in a bath for 1 week after surgery.

Swimming

- Your child may swim 2 weeks after surgery.

Returning to daily activities

- It is safe to return to school or daycare when pain is well controlled and your child is not taking opioid pain medications. Opioid pain medications (such as oxycodone, Norco, Vicodin, or Hycet) may affect your child's ability to learn and participate in activities.
- Children 8 years or older should not lift anything heavier than about 10 pounds for 2 weeks after surgery.
- If your child's backpack is heavier than 10 pounds, we recommend asking for an additional textbook to keep in class or using a suitcase with wheels to carry books to and from class.

- Your child may not use straddle toys such as a bike, bouncy chair, or any other activity that puts pressure on the surgical area for 2 weeks after surgery.
- Holding your child on your hip and using a car seat is safe after surgery.
- Your child may resume gym or sports:
 - 2 weeks after surgery if your child is 10 years or younger
 - 4 weeks after surgery if your child is 11 years or older

Diet

- Your child may resume a regular diet and should drink plenty of liquids to stay hydrated and avoid constipation.

Incision care

- Incisions have been closed with absorbable suture (stiches) and glue. They will dissolve on their own and do not need to be removed.
- If your child has a bandage over the incision site, remove this bandage in 2 days after surgery when ready for a shower.
- If your child has Steri-Strips (thin pieces of tape) under the bandage, take them off 2 weeks after surgery if they have not already fallen off on their own. You may remove them if they have not fallen off by then. Do not apply any creams, lotions, or ointments on the wound until the Steri-Strips have come off. After that, we recommend sunscreen for the first year after surgery to minimize scarring of the wound.
- If your child had a penile surgery such as a circumcision or hypospadias repair, apply petroleum jelly (such as Vaseline or Aquaphor) with diaper changes for at least 1 week (or twice a day if not in diapers), then as needed. This helps prevent irritation and keeps stitches from sticking to a diaper or underwear.

What should I expect for pain?

Your child may have incisional pain, abdominal (belly) pain, cramping, and even shoulder pain. Abdominal pain felt in the shoulder is called “referred pain” and may happen after laparoscopic surgery. This is normal and will improve over the next few days.

How do I manage my child’s pain after surgery?

Unless directed otherwise by your child’s doctor, for pain control during the first 48 hours after surgery, use over-the-counter pain medications such as **acetaminophen** (brand name Tylenol®) around-the-clock, even if your child is not in pain. **Around-the-clock** means your child will take the medication on a set schedule rather than taking them as needed

What over-the-counter medications will my child be taking?

Acetaminophen (Tylenol®) and **ibuprofen** (Motrin® or Advil®) are available over the counter and do not need a prescription, they can be purchased at the store (before or after surgery). The dose is determined by your child’s weight. A syringe/dropper should be used to measure all liquid medication. Please do not use a spoon. **These are very effective pain medications that help with inflammation after surgery and are an important aspect of pain relief.**

Do not give ibuprofen (Motrin or Advil®) to children under 6 months of age.

Do not give if your doctor has specifically told you not to.

- Follow the dosing instructions in your discharge instructions based on your child’s weight. Talk to your medical provider about the maximum dose before ever administering higher or more frequent doses than recommended.
- **For children age 6 months or younger:** Give acetaminophen (Tylenol) every 6 hours while your child is awake.

- **For children older than 6 months of age:** Alternate taking acetaminophen (Tylenol) and ibuprofen (Motrin or Advil) every 3 hours while your child is awake. Each medicine should be given every 6 hours, but alternated so that one medicine is given every 3 hours while your child is awake (see instructions below).

How do I alternate over-the-counter pain medication?

You will give your child a dose of pain medication every three hours.

- Start with a dose of acetaminophen
- 3 hours later give a dose of ibuprofen
- 3 hours after taking the ibuprofen give another dose of acetaminophen (This will be 6 hours after the last dose of acetaminophen)
- 3 hours after give a dose of ibuprofen (This will be 6 hours after the last dose of ibuprofen)

For example, if the first dose of Tylenol is given at 12:00pm this would be your child’s schedule for the day:

12:00 PM	Tylenol dose
3:00 PM	Ibuprofen dose
6:00 PM	Tylenol dose
9:00 PM	Ibuprofen dose
Continue alternating every 3 hours	

What are opioid medications?

Opioids are strong medications that provide good pain relief, but may cause harm. Examples of opioids that may be prescribed to your child are:

Oxycodone, Norco, Hycet, Vicodin, and Percocet. These medications require a prescription from your doctor.

How can my child take opioid medications safely?

Depending on what type of surgery your child had, you may receive a prescription for opioid pain medication. If your child receives a prescription for an opioid pain medication it is for break-through pain only. **Break-through pain** means pain that is not controlled by around-the-clock acetaminophen and ibuprofen. Even if your child needs a dose of opioid medication for break-through pain, **you should still give the over-the-counter medications (Tylenol and ibuprofen).**

If your child has been prescribed Norco, Hycet, Vicodin, Percocet or a different opioid **please contact the clinic or discuss with your provider how to safely alternate acetaminophen (Tylenol).** These medications also contain acetaminophen and could result in **too much Tylenol being given.**

- Give opioids only as needed and never give more frequently or in higher doses than instructed on the bottle.
- If your child is prescribed a combination medication which includes an opioid **and** acetaminophen (such as Vicodin, Norco, or Hycet), do **not** give additional acetaminophen.
- Never give your child a medication that was not prescribed to them.
- **Medications should always be locked in a safe place and managed by a responsible guardian.**
- If your child is prescribed an opioid medication, they will get a prescription at the time of surgery and it will need to be filled at the hospital or local pharmacy. Not all pharmacies carry the liquid form of opioid medications so you may want to call first.

What are the risks of opioid medications?

Opioid medications can cause

- Nausea
- Constipation

- Drowsiness
- Slowed breathing
- And overdose

They are particularly dangerous if taken with alcohol or other medications such as sleep aids or anti-anxiety medications. They can also cause addiction, especially among people with a history of substance abuse or mental health conditions. Do not share these medications with anyone to whom they were not prescribed.

What can I do to manage my child's constipation?

If your child is taking an opioid medication regularly (at least once a day for 2 days), they should also take an over-the-counter stool softener such as Miralax (polyethylene glycol) according to dosing instructions to avoid constipation. This is available at your local pharmacy and does not need a prescription. If you have questions about safe dosing for your child, please contact the clinic.

How do I dispose of leftover medication?

Old medications are the **number one cause of poisonings** in children under the age of 5. Leftover medications are also **tempting targets for theft**. As soon as your child no longer takes the opioid, dispose of the extra medication by bringing them to a take-back program or a collection site in your area. Find more information on how and where to safely dispose of old medications at <http://michmed.org/MmA6N>

When can my child start driving?

Teenagers who are licensed to drive must be off of all opioid medications before driving. Please contact the clinic or discuss this with your provider at your scheduled post-operative visit. Your child should not resume driving until clearance is given by surgeon. Before driving have your child sit behind the

wheel in a parked car to make sure they are able to turn their head and body without pain or limitation.

Who should I call for help?

Your child's pain should slowly improve and most children are back to normal in about 1-2 weeks after surgery.

Call us immediately if pain suddenly worsens or your child develops:

- Persistent nausea
- Vomiting
- Abdominal pain
- Diarrhea
- Yellowing of the skin or eyes
- Fever over 101 degrees
- Redness, bleeding or drainage from your wound sites

Who do I contact if I have questions?

- Monday through Friday 8am to 5pm: Call **(734) 936-7030** and **ask to speak to a Pediatric Urology Nurse.**
- After 5pm or on weekends: Call **(734) 936-6267** and **ask to speak with the Pediatric Urology Resident on call**

You will be asked to leave a message, and a nurse or doctor will call you back as soon as possible. Someone is available to answer your questions 24 hours per day, 365 days per year.

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