

Urologist



Dr Jo Schoeman
Specialist Urologist

PATIENT INFORMATION BROCHURE

FRENULOPLASTY

Jo Schoeman
FRACS, FCS (Urol) SA, MBChB

The Wesley Hospital
Suite 46 Level 4
The Wesley Medical Centre
24 Chasely Street
AUCHENFLOWER QLD 4066

Ph: 07)3371-7288
Fax: 07) 3870-5350
E-mail: jo@urojo.com.au
Emerg: 0403 044 072

www.drjoschoeman.com.au

See this live on:
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Patient well-being is my first priority!

Frenuloplasty

Why is it done?

- Penile tip has a ventral curvature with erection
- Frenulum can tear and bleed with intercourse

Pre-requirements

An informed consent is required from the patient.

Patients may not eat or drink from midnight the previous evening.

Can be done under local anesthesia (penile block)

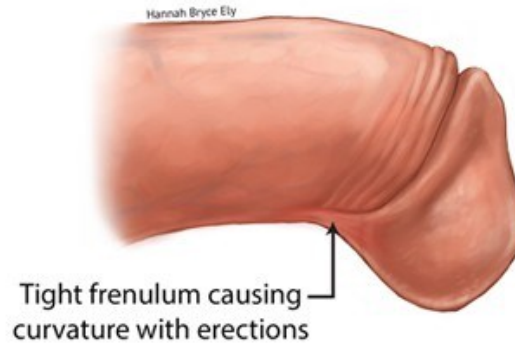
Toddlers may still have feeds up to 6 hours before the procedure.

Patients are to refrain from smoking before the procedure.

Patients allergic to IODINE/CHLORHEXIDENE must clearly state this to theatre staff and Dr Schoeman.

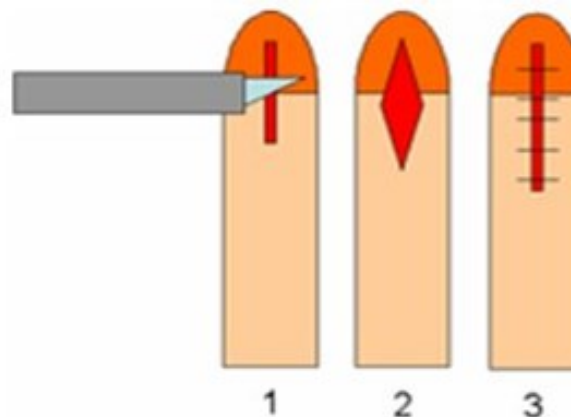
Any anti-coagulants such as Warfarin should be stopped 7 days prior to surgery.

This is a day surgery procedure and can also be done under a penile Block (Local Anaesthesia).



How is it done?

- This is done under general anaesthetic or a penile block.
- A horizontal cut is made through the tightest part of the frenulum
- The incision is then closed by opposing edges in the vertical plane .
- Dissolvable sutures are placed between the 2 remaining edges.
- A local anaesthetic is injected into the base of the penis thus giving post-operative pain relief for the next 4-6 hours.



What to expect after the procedure

- Any anaesthetic has its risks and the anaesthetist will explain such risks.
- Bleeding is a common complication.
- With any subsequent erections post operatively, the sutures may pull out causing an opening of the wound with subsequent bleeding.
- An infection of the wound can occur
- NB! Each person is unique and for this reason symptoms may vary!

What next?

- Bactriban (or similar) ointment should be applied on the wound twice a day.
- On discharge a prescription may be issued for the patient to collect.
- A follow-up appointment should be scheduled to see Dr Schoeman within 2 weeks.
- Please don't hesitate to direct all pre-operative queries to Dr Schoeman's rooms.
- PLEASE CONTACT THE HOSPITAL WITH ANY POST-OPERATIVE CONCERNS AND RETURN TO THE HOSPITAL IMMEDIATELY SHOULD THERE BE ANY SIGNS OF SEPSIS.