

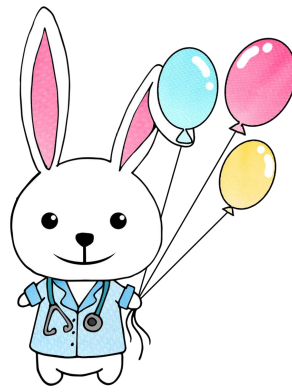
HEALTHY KIDS CARE

AT SUNRISE

INSTRUCTIONS TO PARENTS PRIOR TO CIRCUMCISION

- ❖ Please arrive at least 30 minutes prior to your appointment.
- ❖ Last feeding should be at least one hour prior to your appointment.
- ❖ Please bring milk with you if you do not breast feed so your baby can be fed following the procedure.
- ❖ Do not give any pain medications or any medications to your baby prior to the procedure.
- ❖ Please bring your pacifier and an extra receiving blanket.

Thank you,
Healthy Kids Care Family



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After Care Instructions for Circumcision

Your child has just been circumcised. You must pay attention and follow these instructions.

1. Your child is not to be given a bath for at least 3 days following the circumcision.
2. If bleeding starts, hold pressure at the base of the penis for 10-15 minutes with a gauze or washcloth. **Do not** keep checking the wound for blood, hold firmly for 10-15 minutes, then check.
3. If bleeding continues call us immediately or go to the nearest ER.
4. If the baby is very fussy use soothing measure to calm your baby; this is recommended and preferred: swaddling, playing water music, etc.
5. Leave the yellow gauze on the penis. This gauze will generally fall off on it's own. If it falls off sooner than 2 days, just leave it.
6. Use generous Vaseline in the front of your baby's diaper with each diaper change; keep the area around the penis clean. You can also apply Vaseline to the penis itself as shown in the office. This is in order to avoid the penis for sticking onto the diaper.
7. You must make a follow-up appointment within 2-3 days following your baby's circumcision with the doctor.
8. Please do call the office with any questions or concerns that do arise. If an emergency happens and you are not sure what to do and you cannot get a hold of your doctor please take your child to the nearest ER.

Thank you,
Healthy Kids Care Family



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CONSENT FOR CIRCUMCISION

You have requested that your doctor perform a circumcision on your child. This is a surgical procedure where the foreskin is removed from the penis. Once your authorization and consent is given, this procedure together with any different or further procedures which, in the opinion of the supervising doctor, may be indicated due to any emergency or previously unforeseen circumstances will be performed on your child.

There is no guarantee as to the outcome of the procedure as all people heal differently and you acknowledge this has been adequately communicated. This procedure may involve risks or unsuccessful results, complications, injury, or even death from both known and unforeseen causes, and no warranty or guarantee is made as to the results.

RISKS TO CIRCUMCISION INCLUDE:

- 1) Bleeding; If you know of bleeding disorder, such as hemophilia in your family, please inform the doctor prior to authorization.
- 2) Infection.
- 3) Circumcision may result in severe scarring of the penis, which may interfere with the patient's later sexual activity.
- 4) 1 in 30 circumcisions need to be repeated at 2 years of age because of excess skin.
- 5) Damage to the penis.
- 6) Allergic reactions to the lidocaine (anesthetic used for the procedure).

After the risks and benefits of the circumcision procedure has been explained to me by:

Dr. _____, I understand them and my questions have been answered to my satisfaction. I hereby authorize and direct Dr. _____ to circumcise my son. By signing this, you state you understand and assume full responsibility for knowing that complications may arise during or result from the procedure.

Child's Name

Child's Date of Birth

PRINT Parent / Legal Guardian Name / [Date]

Signature of Parent / Legal Guardian

Witness Signature / [Date]

Doctor Signature / Date