



Dr Mark Romero

B. Biomed. Sc. (1st Class Hons), M.B.,B.S., F.R.A.C.S.

General and Colorectal Surgery

Provider Number: 248039CX

ABN: 53 135 443 969

2 Wyandra Crescent (P.O. Box 9429)

Port Macquarie NSW 2444

Tel: (02) 5524 7474

Fax: (02) 6584 1408

Post-operative instructions for circumcision

After your boy's circumcision is performed, he will be reviewed by me or one of my team members and discharged. This will usually be on the same day as the operation. Below are some post-operative notes, please familiarise yourself with them.

Diet:

No special restrictions. Everything in moderation.

Pain relief:

Regular Panadol and Nurofen are usually sufficient and can be taken regularly **and** together. No stronger pain relief is usually required.

Wound care:

The wound has been closed with dissolving sutures and dressed. Please try to keep the dressing on for 24h. You will be provided with Chlorsig ointment to apply to the wound after baths/showers for 48h.

Activities:

There are no restrictions to activities.

Expected healing process:

The wound will heal quickly. The sutures will fall off in about 7-10 days on their own.

Things you should tell your GP or me about:

- Severe pain that is not responding to the pain relief prescribed needs attention and should not be ignored.
- Increasing redness or discharge from the wound may indicate a wound infection and may require antibiotics.
- Fevers or feeling sick after this procedure is unusual and you should contact your GP or me for attention immediately.
- If the wound has split open or bleeding significantly please contact my rooms or attend the emergency department.

Follow up:

The usual follow up with me will be around 4 weeks after the procedure and you will be provided with an appointment card at discharge or will be asked to make an appointment yourself. It is important

for you to keep your appointment as we can discuss your boy's recovery, the histology results, and I can assess the healing.

All the best,

A handwritten signature in black ink, appearing to read "Mark Romero". The signature is fluid and cursive, with a large, sweeping initial "M" that loops back over the rest of the name. There is a small dash or mark at the end of the signature.

Dr Mark Romero