## Urethroplasty w/ Buccal Mucosal Graft

Patient Guide

### **Prior to Surgery**

- At your clinic visit, your surgeon will review with you (1) your anatomy, (2) stricture/ disease location, and (3) risks and benefits of the procedure.
- You may be referred to one of our ENT surgeons prior to surgery in the likelihood you require a buccal mucosal graft for your surgery.
- ➤ Up to 6 weeks before your procedure, your surgeon will collect a urine culture to ensure there is no UTI. If so, he/she will prescribe an antibiotic to start within the week prior to surgery.
- If you take any blood thinners (ie: Xarelto, Eliquis, Aspirin), please discuss with your surgeon prior.
- ➤ The hospital will call you 1-2 days prior to surgery to confirm arrival time and location.
- No eating or drinking after midnight prior to your procedure unless otherwise instructed.
- Your surgeon will meet you in the pre-operative area before surgery and review consent.

### **During Surgery**

- Your procedure requires 2-4 hours of general anesthesia.
- ➤ You may have 2-3 incisions during your surgery: (1) perineal incision (between scrotum and anus), (2) mouth incision for graft, and/or (3) suprapubic tube.
- You will have a catheter draining your bladder for 2-3 weeks. You may also have a temporary suprapubic tube below your belly button.







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# Urethroplasty w/ Buccal Mucosal Graft (2)

#### Patient Guide

## **After Surgery**

Pain Most people report a dull ache around the incision and more pain from position during

surgery or from oral mucosal site. You may place ice 20min on/off on the sore sites for

48 hours.

You will be prescribed a pain medication that can be alternated with Tylenol 650mg or

ibuprofen 200mg with meals as needed.

Bladder spasms

You may experience bladder spasms, which is a sharp pain that can be felt in penis, scrotum, or bladder. You will be prescribed oxybutynin daily to prevent these spasms

while the catheter is in place.

Urine leakage around catheter is not normal. Please take the medication and if

persistent or minimal urine is in the bag, please call our office immediately.

Oral graft harvest site

It is important to ice the cheek for 48 hours after surgery. Start using the 'Mouthwash' the morning after surgery, 3-4x/day for 2-3 weeks. You will swish & spit with 15 ml (0.5oz) of Peridex after each meal and at night. Once the mouth is healed you may stop.

**Incision** care

After surgery, there will be a compressive dressing that is taped to your perineum. We

typically leave this tight dressing on for 24-48 hours.

After the compressive dressing is removed, you will need to change the gauze that is covering the incision daily for 5 days. After the 5<sup>th</sup> day – the incision should be well

healed – and you do not need to cover the wound anymore.

For one month after surgery, wear "briefs" type underwear.

Activity You may walk and climb stairs. You may perform household duties. Avoid strenuous

activity (running, jogging, biking) and heavy lifting (>10 lbs) for 4-6 weeks.

**Bathing** Starting 48 hours after surgery, you may remove the dressing and shower daily. Do not

scrub your incisions, let the water pass over your incision. Tap dry and replace gauze. No

bathtubs, jacuzzies, or swimming pools for at least 4 weeks after surgery.

Diet You may have a decreased appetite after surgery. You should eat light food, easy to

chew, for 2 days after surgery. You may then gradually resume your normal diet. No

alcohol until all catheters are removed.

It is important to avoid constipation. Please take docusate or miralax for 4 weeks.





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# Urethroplasty w/ Buccal Mucosal Graft (3)

### Patient Guide

Foley care	You will have a catheter in your penis for 2-3 weeks. During the day, keep the cathete
	rou will have a catheter in your perior for 2 o weeks. Buring the day, keep the cathete

connected to a leg bag. At night, connect the catheter to a large drainage bag, so you

can sleep the whole night, without needing to empty the bag.

You may have a suprapubic tube (SPT) in which case your penile catheter will be capped. Your nurses will teach you how to care for your foley prior to discharge.

May resume driving once catheter removed and if not taking any pain medications. **Driving** 

School/Work You may return to work/school 1 week after surgery.

Intercourse Please refrain from intercourse for 6 weeks to prevent damage to surgical site.

When to call Please call your surgeon (or in severe cases, present to the ER) if any of the following

❖ you have a fever >101 F

❖ you cannot have a bowel movement within 3-5 days

❖ you have leg swelling

you experience shortness of breath or chest tightness

❖ your pain is not controlled with medication

Follow-up We will see you in clinic in 2-3 weeks for imaging and possible catheter removal.

Please call our office if you do not have an appointment already.

**Home Meds** Bacitracin ointment – place a dab of ointment to the tip of the catheter where it goes

into the penis twice daily until it is removed.

**Oxybutynin XL 10 mg** – take one tablet daily to prevent bladder spasms.

Antibiotic – You will be given an antibiotic to take for 8 days total. Take the first 5 days after surgery and then restart the day before your catheter removal appointment.

**Tramadol** – pain medication, which can cause constipation and drowsiness.

**Colace**— take twice daily for one month after surgery to prevent constipation.

Peridex mouthwash (Chlorhexidine is the generic name ) – if we harvest a graft from

the mouth. Directions above.

**Home Supplies Fluff gauze:** Place over the incision after showering. Will need enough for 1 week.

Foley bags: Leg bag and large bag

**Catheter secure:** Clip device that is used to secure each of your catheters x 4.

Mesh underwear





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