**Name of Operation:**  
First-stage Hypospadias repair  
(preparing for the process of moving the pee-hole to the tip of the penis)

**Main issues:**

- The main aim of this first stage is to make up for the lack of skin on the under-surface of the penis, by filling the gap with a skin-graft. The graft is usually taken from the foreskin of the penis, but sometimes may need to be taken from inside the cheek of the mouth.

- This operation usually corrects the bend in the penis ("chordee") that is normally seen in boys with a more severe form of hypospadias.

- Clinical photographs may be taken under anaesthetic before and after the operation, for his hospital records. If you agree, these may be used elsewhere (eg, for teaching), but it will be done confidentially (so that no one else will be able to identify your son).

- Dissolving stitches.

- Bladder drainage-tube ("catheter") for 1-2 weeks, secured with a bulky dressing.

- Double nappies.

- Removal of dressing, and usually catheter, in 1-2 weeks, under brief general anaesthetic.

- The penis may look swollen and bruised for several weeks after that.

- Even when the bruising has settled, the skin on the penis may look quite baggy until the next operation. The position of the pee-hole will also not improve yet: in fact, the pee-hole may actually look to be in a worse position until the next operation (PTO for diagram 2).

- Sore to pee for a few days after the catheter has been removed.

- Please do not wipe the under-surface of the penis for 1 month afterwards (this may dislodge the skin-graft, so that the operation would have to be re-done).

- The penis often heals with a circumsised appearance (ie, there is no foreskin).

**Intended benefits:**

- This first stage is an essential step to prepare for the main second-stage repair, usually 6-12 months later. This should then produce a dramatic improvement in the position of the pee-hole and in the overall appearance of the penis (PTO for diagrams 3 and 4).

**Common or serious risks:**

- Bleeding (rarely serious).

- Infection (rarely serious).

- Damage to penis, water-pipe, or bladder (rarely serious).

- Graft not sticking down ("taking"), needing further graft-surgery (rare).

- Scarring of the graft, and/or narrowing ("stricture") of where the graft joins his water-pipe, which may need further surgery before the second-stage repair can be properly done.

- Anaesthetic problems (rarely serious, but around 1 in 250,000 general anaesthetics in children can be fatal).
To accompany DHSSPS Consent Form 2

Hypospadias (1st-stage) Page 2 of 2

Diagram 2: the typical appearance after the 1st stage operation

Diagram 3: the planned appearance after the 2nd stage operation; here we usually try to repair the foreskin too

Diagram 4: the process of staged repair of hypospadias

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