

Dr. Dec's Newborn Circumcision Information Sheet

Either you have been referred to this office for discussion regarding newborn circumcision, or Dr. Dec has been following you for your pregnancy and you have been considering having a circumcision done on your son. Dr. Dec has been performing circumcisions on male baby infants since 1997. He was instructed and trained by 2 local family physicians (Dr. Alison MacTavish and Dr. Robert Ainslie) regarding the GOMCO method of circumcision.

There are several pros and cons when considering circumcision. First of all, this is an "elective" non-mandatory procedure for male newborns, and is usually requested for cultural reasons (for instance Jewish or Muslim faith customs) or because the baby's father is also circumcised. It is a choice/decision that is made by you, for your child, as his parents. I am assuming you wish to compare the benefits vs. the risks. Potential benefits: there is a noticeable, easier time of keeping the penile area clean to maintain good hygiene. There is also a slight reduction in cancer of the penis and a decrease in infection risks in certain populations. Although circumcision is not a necessary procedure, it can be required later in life if the foreskin fails to pull back or if there are recurrent penile/foreskin infections. However, there are also potential risks and complications of circumcision. The most common ones include bleeding, bruising, swelling, infection and possible damage to the urethra (the long tube inside the penis) itself. These complications are rare but they are still a possibility and are seen from time to time.

To prepare for the procedure, I usually ask that you do not feed your child 2-3 hours prior to the circumcision in order to prevent "spit-up"/vomiting. When we take your baby to prepare for the procedure, we need to do several things which include securing his arms and legs so he doesn't move and disrupt the process. We also cover him with some drapes and clean the area with antiseptic solution. We then put a needle on each side of his penis and provide freezing to help numb any potential pain. As I mentioned above, I use the GOMCO method which involves stretching the foreskin, bringing it back over the penis, then making a small cut. I then put the bell device over the head of the penis, draw it through the clamp, then tighten. I usually wait five minutes after tightening and removing of the foreskin in order to have good bleeding control. When I release the clamp and remove the bell, the circumcision is complete. We usually treat the area with lots of Vaseline and gauze in order to avoid stickiness. You can then feed your baby after the procedure and I suggest that you wait at least a half hour, to ensure there are no other complications or any significant difficulty passing urine.

In terms of payment, circumcision is not an O.H.I.P. insured service so payment is private. My fee is \$175.00 and I usually prefer cash at the time of the procedure. The hospital has what they call a "tray fee" for the use of their equipment and staffing and that comes to \$225.00.

If you agree to proceed, I usually book circumcisions on Monday mornings, when I have time at the outpatient clinic at GNGH to do these procedures. I usually start between 8-9am and it usually takes 20-25 minutes.

If you have any further questions, please do not hesitate to ask myself, or my staff. Thank you.

David Dec