Let's Talk About ...

Meatotomy: A surgical procedure to correct urination in boys

A meatotomy (may-uh-TOT-oh-me) is a surgery that opens the meatus (me-AY-tus), the opening at the end of the penis where urine comes out, to make it a normal size. This procedure helps give your child a better urine stream.

Why does my child need a meatotomy?

Your child may need a meatotomy if they have meatal stenosis, a condition where the meatus becomes smaller after birth. A smaller meatus can cause changes in the urine stream, painful urination, and trouble voiding (peeing).

What happens during a meatotomy?

During a meatotomy, your child will be sedated so they don't feel pain. The surgeon will make an opening at the tip of your child's penis (glans) to help widen the meatus. They may use small stitches to hold the opening together so it will heal.

When can my child go home after a meatotomy?

Your child usually goes home the same day. Watch your child carefully during the ride home to make sure their head and neck do not slump forward and close their airway.

What should I expect after my child's meatotomy?

Your child may have mild burning when peeing and slight swelling at the meatus for 48–72 hours after the procedure. Mild fevers and a small amount of blood spotting on your child's underwear are normal. If the meatus is dripping blood, hold gentle pressure with a clean, dry washcloth for 5–7 minutes. If blood continues to drip, hold pressure again and call your child's surgeon's office.



When can my child eat after a meatotomy?

After your child wakes up from surgery, they can have clear liquids, including Pedialyte™, water, apple juice, sports drinks, ice pops, and plain gelatin. These are easily digested. Most babies can take a bottle or breastfeed. Your child may eat a normal diet after being discharged from the hospital. Start with soft, easily digested foods. Avoid high-fat or greasy foods, like hamburgers and pizza, the first 24 hours after surgery.

What should I do if my child is nauseated or vomits?

After surgery, many children feel nauseated and may vomit in the first 24 hours. This can be caused by medicines during surgery, car movement, or pain medicine after surgery. Help control nausea by:

- Encouraging your child to lie still
- Offering clear liquids, which are important after surgery to help prevent dehydration
- Slowly offering regular foods over a few days until your child can eat a normal diet

If your child vomits, let their stomach settle for 30–60 minutes and offer clear liquids. If your child vomits for several hours, call their healthcare provider for instructions. It may take 1–2 days before your child is interested in solid foods.

What are the signs of dehydration?

Your child may be low on body fluids (dehydrated) after surgery. Signs of dehydration include:

- Dark yellow urine
- Dry mouth (no spit)
- Chapped lips
- Sinking soft spot on a baby's head

After surgery, encourage your child to urinate (pee) every 2–3 hours. Usually, normally voiding (peeing) resumes within 24 hours after surgery. A baby should have 6–8 wet diapers within a 24-hour period; an older child should pee every 3–4 hours.

How do I help my child manage pain after a meatotomy?

To help your child manage pain, comfort them and listen to their concerns. Make your child as comfortable as possible to encourage healing. Talk to an older child about pain levels, and watch for signs of pain in a younger or developmentally delayed child. A child in pain may moan, whimper, make a face of pain, cry, be irritable, be inactive, not eat, or not sleep.

If it is not time for pain medicine, try other ways to control pain, like watching a favorite show, giving massages, or playing games.

What medicine does my child need?

Alternate doses of acetaminophen (such as TylenolTM) and ibuprofen every 3–4 hours for the first couple of days. If your child is sleeping, do not wake them to give them another dose. Most children will not need stronger pain medicine. If you can't control your child's pain with acetaminophen and ibuprofen, call their healthcare provider.

How do I care for my child's wound?

To care for your child's wound, your child's healthcare provider will show you how to gently open the meatus after the procedure. Have your child soak in the tub 1–2 times a day. Gently dry the meatus and apply petroleum jelly as shown. Do this for 3 weeks: 3 times a day the first week, twice a day the second week, and once a day the third week.

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- 1. Have your child soak in the tub 1–2 times a day.
- 2. Gently dry the meatus and apply petroleum jelly. Do this for 3 weeks:
 - Week 1: 3 times a day
 - Week 2: 2 times a day
 - Week 3: Once a day

When can my child take a bath or shower?

Your child can take a bath or shower the same day as the meatotomy. Soaking in the tub 1–2 times a day is helpful and comforting.

What activities should my child avoid after a meatotomy?

Anesthesia medicine can affect balance, so don't let your child do any activities that require balance the first day after surgery. This includes riding a bike, playing on playground equipment, and riding a scooter. After the first day of surgery, there are no activity restrictions.

What is normal behavior after a meatotomy?

It is normal for your child's behavior to change after surgery. They may act like a younger child (bed wetting or acting out), change sleep and eating patterns, or have nightmares. Be patient. Most behavior changes last a few days to 2 weeks. Remember that your child's routine was upset by surgery and comfort them. If the behavior lasts longer than 4 weeks, call your child's doctor.



When should I call the doctor?

If you are concerned about your child, call the urology office at 801.662.5555 and choose option 3. If the office is closed, call the operator at 801.662.1000 and ask them to page the on-call pediatric urology resident.

Call the doctor if your child has any of the following:

- Inability to urinate (pee)
- A fever above 102 °F
- Signs of dehydration (not drinking, dry mouth, fewer than 6–8 wet diapers, reduced urine output, and lack of tears)
- Increase in diarrhea or constipation
- Increase in pain that does not go away

If your child has chest pain or trouble breathing, take them to the emergency room or call 911 immediately.

Notes			

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