

Penuma Implant Post-Operative Instructions **Dr. Tajkarimi**

To ensure a speedy recovery, we ask that you carefully review this post-operative protocol. The points are broken out between what to do/expect immediately after the procedure, over the next 6-8 weeks and over the next 6-12 months.

Please note that office visits are required for at least the first 3 or 4 days after surgery (potentially more based on your individual circumstances), so please schedule your post-operative office visit with our staff. Routine follow-up consultations are also highly recommended and will be discussed with the medical staff.

Post-surgical care is critically important for preventing and reducing potential post-operative complications and maximizing the likelihood of positive results.

It is important to email progress pictures (Info@novaurology.com) at least every two weeks for the first six weeks to report progress. Thereafter, monthly email updates are sufficient. This is your responsibility, and failure to do so is considered non-compliance with medical advice and can be detrimental to the recovery process. Most complications can be mitigated with compliance of the following instructions.

Should you have any questions, please do not hesitate to contact our office at (7036783601). Please try to organize all your questions and be as specific as possible so that we can address all of your questions effectively.

**In case of a medical emergency, do not call the office!
Please call 911!**

YOU MUST NOT USE ANY TOBACCO PRODUCTS (CIGARETTES, VAPE,CHEWABLE) UNDER ANY CIRCUMSTANCES FOR THE NEXT 60 DAYS. NONCOMPLIANCE WILL LEAD TO POOR HEALING AND COMPLICATIONS.

DO NOT STICK ANY NEEDLES INTO THE PENIS SKIN OR TRY TO POP ANY BLISTERS UNDER ANY CIRCUMSTANCES: CONTACT DR TAJKARIMI OR TEAM WITH CONCERNS.

APPLY ICE TO LOWER ABDOMEN AND SCROTUM ONLY OVER A TOWEL. DO NOT APPLY ICE TO ANY PART OF PENIS AS THIS CAN CAUSE FROSTBITES AND DAMAGE TO SKIN

KEEP YOUR HIPS AND THIGHS ELEVATED FOR THE FIRST 4 WEEKS WHILE SLEEPING. PLACE TWO PILLOWS UNDER YOUR THIGHS TO LIFT YOUR PELVIC. THIS HELPS REDUCE SWELLING AND FASTER RECOVERY.

AVOID EXCESS ACTIVITY FOR THE FIRST WEEK TO REDUCE RISK OF HEMATOMA AND SEROMA!!! Keep your feet up and apply gentle pressure to the space above your penis and hip bone.

What to Expect Immediately After the Procedure:

After your procedure, please eat a light meal (steamed fish, salad, etc.), and please drink plenty of water and juice. You may be constipated immediately after the surgery as a result of the anesthesia. Therefore, soft bowel movement is important. Salad and generous amounts of olive oil can stimulate soft bowel movement. If you do not have a bowel movement by the second day after your procedure, please contact Dr. Tajkarimi Or staff for further instructions.

After surgery, you may experience a decreased appetite. Your appetite should return to normal in a few days; however, for the time being, it is essential that you resume eating. Therefore, please begin eating light foods such as soup, salads, and/or fruits.

While urinating the first few times after surgery, you may experience a burning/stinging sensation. This is normal and is due to the antibiotics used during surgery. As you urinate, the burning will gradually decrease.

After surgery, your penis will be wrapped with gauze to prevent swelling and bleeding. This wrap may cause your urine stream to be split or weak, causing dripping. This is normal and should not be a concern. Your normal urinary stream will resume after removal of the wrap. Your penis must be wrapped for the first 24-72 hours after surgery. Please do not unwrap it for any reason unless the dressing is too tight for you and causing swelling of the head of your penis. Dr. Tajkarimi or a member of his staff will replace the wrapping around your penis will be replaced by a medical sleeve called Tubigrip or Uro-Wrap, which must be kept on your penis 6 hours on/6 hours off after surgery for the first 3-4 weeks.

Note: Dr. Tajkarimi will give you an initial supply of Tubigrip or TUBI-HEAL or staff at the time the drain is removed. However, you will need to order at least one box so that you have a supply for the next 6 to 8 weeks. You can order TUBI-HEAL (one size) from eBay and Tubigrip (Size A only!) from Amazon.

Antibiotics and Other Medications

Begin taking your prescribed antibiotics as instructed following your surgery.

You may also begin taking your pain medication if needed.

If you experience nausea or feel sick after taking your medications, try taking them with food.

If you notice unusual itching or redness on your skin after taking your medications, it is most likely due to a reaction to one of your antibiotics. Discontinue taking them and notify a member of Dr. Tajkarimi's medical staff immediately.

Warning! Please be sure you have provided Dr. Tajkarimi and staff with a list of any other medications you may have been taking before the procedure (whether prescribed or over-the-counter). Dr. Tajkarimi must approve the use of any of these medications before resuming their use.

- Some medications may not be combined with post-operative medications.
- For example, some patients may be required to use Nitrobid ointment/cream.
- However, Nitrobid cannot be used if a patient is taking any PDE5 Inhibitors such as Viagra, Cialis, Levitra, etc.
- Therefore, it is critical that you inform the medical staff of all current medications/allergies.

Due to the nature of the surgery, nighttime erections (an occurrence typically every 90 minutes while you are asleep) might feel uncomfortable during the first few weeks after surgery. If nighttime erections are frequent and painful, use the medications provided. You can try Nyquil or CBD oil to improve sleep and reduce force of erections.

About Your Drain:

After your procedure, you will notice a small tube and a clear collection bulb coming from your lower abdomen. This is called a JP drain, and its purpose is to allow for antibiotic fluid around the implant to exit your body in the following days. It will be removed during your final follow-up visit, which will take place generally 3-4 days (and in some cases more) after your procedure. As long as you have the JP drain, you will need to keep it activated. Instructions and pictures for activating the drain have been provided to you in the instruction packet. Please let us know if you have any questions.

When the fluid level of the drain reaches the halfway mark, you will need to empty the drain bulb. To drain and reactivate:

- Wash your hands with soap and water
- Pull the plug out of the bulb
- Pour the fluid inside the bulb into the toilet
- Squeeze the bulb flat
- While the bulb is flat, put the plug back into the bulb
- The bulb should stay flat after it is plugged so that the vacuum suction can restart

You will need to milk the tube a times to unplug it from any clots. The instructions about milking the tube will be provided after your surgery.

You may notice the color of the fluid within the bulb is red. This is normal.

Do not take a shower, bathe or expose your body to any open pools of water for the entire time the JP drain is with you. Sponge baths are allowed while you have the drain, and you may wash your hair or face; however, the area of the surgery and the area around the drain must remain dry until your drain is removed.

After the Drain is Removed

The drain will be removed approximately 3 to 4 days after your procedure (individual circumstances can vary). We typically remove the drain if output is less than 25 ml per 24 hours. Ideally the drain color should be light pink and not very bloody before removal.

At the time the JP drain is removed, the drain hole in your abdomen will be closed with steril strips and covered with gauze. You can remove this gauze in 72 hours.

After the drain has been removed, you may shower after 24 hours. . Please be sure to remove the Tubigrip® or Uro-Wrap® before you shower. Rinse the genital area with regular soap or body wash and dry the skin gently. **DO NOT USE A BLOW DRYER WHEN DRYING THE SKIN.**

Apply Neosporin ointment to the incision line after each shower.

There will be staples on your incision site in the scrotum. Keep the incision side clean and dry. You can cover it with a medical tape.

Staple Removal: A staple removal kit and instructions will be provided. Attached here. Please removal staples 14 days after your surgery. Wash your hands with soap and water and clean the skin with alcohol pads before removing staples. Cover the incision after removing staples with silicone band aid.

Do not use a hot tub, Jacuzzi, sauna (wet or dry), or Whirlpool bath or submerge yourself in any body of water until you have been cleared to do so by the medical staff (typically six (6) to eight (8) weeks after the procedure).

For the next 3-4 weeks after the drain is removed (or per the surgeon's instructions), please wear the Tubigrip® or Uro-Wrap®, **6 hours on and 6 hours off.**

Skin Care

Your skin is the primary and most important barrier against infections, protecting the body from dangerous invaders such as bacteria. Keep the skin well hydrated as to prevent it from drying out.

Use a non-scented, hypoallergenic, vitamin-rich (Vitamins A and D) lotion/cream (ask your pharmacist) to hydrate the skin. You may also use Vaseline PLEASE DO NOT USE ANY OTHER OINTMENT OR CREAM UNLESS INSTRUCTED BY THE PHYSICIAN.

DO NOT SHAVE your pubic/genital area using a razor or blade (Trimming is acceptable). Watch for any unusual appearances. Immediately report skin irritation, swelling, redness, etc. to you physician.

In general, you can prevent most skin yeast infections (candida) by keeping your skin clean and dry (again, do not use a blow dryer), and by following a healthy lifestyle, including proper nutrition. The affected area must be kept clean, dry, and protected from chafing. Exposure to air is also helpful. It is important that for people with diabetes to keep their blood sugar under tight control.

Sexual Activity

It is critical that you refrain from all forms of sexual activity (including oral, vaginal, anal, and masturbation) after the procedure until given clearance by Dr. Tajkarimi. This clearance typically takes place 6 to 8 weeks after the procedure, but individual circumstances may vary.

After clearance for sexual activity, please use a condom and wash yourself with antibacterial soap and water after engaging in sexual activity for the first 6 to 8 weeks of sexual activity.

Observe the penis for the first few months and report any unusual findings (redness, soreness, swelling, inflammation, etc.) to Dr. Tajkarimi and his staff immediately.

Important! Even after you are cleared for sexual activity, you must exercise great care when engaging in sexual activity. Do not engage in any risky or strenuous sexual activity! You may also need to use lubricant in order to minimize strain on the penis.

Physical Exercise

Do not engage in any heavy lifting or strenuous activity until you receive clearance from the medical staff (typically six 6 to 8 weeks after the procedure).

The first week after the drain has been removed is a time for relaxation, rest, recovery, and letting the incision heal.

Light upper body exercises can resume upon clearance by Dr. Tajkarimi. This typically takes place 4 weeks after the procedure, but individual circumstances may vary.

Light lower body exercises can resume upon clearance by Dr. Tajkarimi. This typically takes place 4 to 6 weeks after the procedure, but individual circumstances may vary.

Regular exercise routines can resume upon clearance by Dr. Tajkarimi. This typically takes place 6 to 8 weeks after the procedure, but individual circumstances may vary.

Even after clearance, please continue to wear Tubigrip® or UroWrap® during any strenuous activity for up to 6 months.

Sleep and Clothes

You should sleep on your back as much as possible for at least the first 6 to 8 weeks following surgery.

Try to wear loose, comfortable clothing such as loose boxer shorts and sweatpants as much as possible. We would like you to allow the penis to hang down in loose boxer shorts for at least 6 to 8 weeks.

Your scrotal support (jock strap) is like underwear and should be worn for 3 to 4 days after the procedure, including during your flight home, if applicable. If you need to go to the bathroom, you can lower and raise it just like regular underwear. Please note that your penis should protrude out of your scrotal support (jock strap) through the hole, which was made by the surgeon.

Swelling, Bleeding, and the Incision

After the surgery, the incision area needs to heal. Over the next approximately 3 weeks, as the new tissue grows, you may notice temporary “lumps and bumps” underneath the incision line, which typically dissolve over time. Every surgery can result in some degree of swelling, bruising, and pain. You may see minimal bleeding and blood spotting on the incision line of your suprapubic area. This is normal and expected. Please consult with Dr. Tajkarimi if the incision line is not improving and/or worsening.

You may experience some swelling and/or bruising of the penile shaft, scrotum, and lower abdomen for approximately 1 to 2 weeks after the procedure. This is normal and typically goes away after a short period of time. You may elevate the scrotum and penis with a towel placed between your legs to minimize swelling. **Do not apply ice or heat!**

A temporary increase or decrease in sensation after your surgery may be experienced. This is likely due to the stretching of the skin after placement of the implant, and it typically return to normal in the coming weeks or months. Please be patient with your body as it stretches to accommodate the implant.

After the surgery, your penis may temporarily feel as though it is in a semi-erect state as a result of the penile skin expansion. This is normal. As your body adjusts to the new implant, it will become softer, and your penis will resume its flaccid state.

6+ Months After the Procedure

Potential changes to erect length, if any, are unpredictable and depend on individual anatomy and physiology. Please be patient with this process.

Please do not use any form of stretching or stretching exercises/external devices. This will damage your implant and may cause serious complications.

They are dissolvable and will typically dissolve on their own after a few months. Please notify Dr. Tajkarimi’s medical staff if this does not occur.

Final Note

Please use our texting system to give updates.

As always, if there is an urgent issue, please contact the office immediately using the same number 7036873601.

Please keep in mind that Dr. Tajkarimi is currently one of a few surgeons performing this type of patented penile implant surgery. Please therefore direct all inquiries to your surgeon’s medical

staff. If you consult with a medical professional untrained in this procedure, this will be against medical advice and may nullify any warranty you may have.

Dr. Tajkarimi and his staff have the experience to guide you through exercises, questions, and any possible complications. Therefore, all questions and concerns should be directed to Dr. Tajkarimi or staff only. **Avoid seeking answers online, as most comments and answers lack a scientific basis and may cause harm.** If, for some reason, you need to see your local doctor, please let us know, so that we may advise the doctor on proper procedures.

In case of a medical emergency, do not call the office!

Please call 911!

Discharge Instructions: Caring for Your Jackson-Pratt Drainage Tube

Your doctor discharges you with a Jackson-Pratt drainage tube. Doctors commonly leave this drain within the abdomen and other cavities after surgery. It helps drain and collect blood and body fluid after surgery. This can prevent swelling and reduces the risk for infection. . The tube is held in place by a few stitches. It's covered with a bandage. Your doctor will remove the drain when he or she determines you no longer need it.

Home care

- Don't sleep on the same side as the tube.
- Secure the tube and bag inside your clothing with a safety pin. This helps keep the tube from being pulled out.
- Empty your drain at least twice a day. Empty it more often if the drain is full. Wash and dry your hands before emptying the drain.
 - Lift the opening on the drain.
 - Drain the fluid into a measuring cup.
 - Record the amount of fluid each time you empty the drain. Include the date and time it was emptied. Share this information with your healthcare provider on your next visit.
 - Squeeze the bulb with your hands until you hear air coming out of the bulb if your healthcare provider has instructed you to do so (sometimes the bulb is used as a reservoir without suction). Check with your healthcare provider about specific drain instructions.
 - Close the opening.
- Change the dressing around the tube every day.
 - Wash your hands.
 - Remove the old bandage.
 - Wash your hands again.
 - Wet a cotton swab and clean the skin around the incision and tube site. Use normal saline solution (salt and water). Or, you can use warm, soapy water.
 - Put a new bandage on the incision and tube site. Make the bandage large enough to cover the whole incision area.
 - Tape the bandage in place.
- Keep the bandage and tube site dry when you shower. Ask your healthcare provider about the best way to do this.
- "Stripping" the tube helps keep blood clots from blocking the tube. Ask your nurse how often you should strip the tube. Stripping may not be needed, depending on where and why your doctor placed the tube. It may even be dangerous in some cases.

- Hold the tubing where it leaves the skin, with one hand. This keeps it from pulling on the skin.
- Pinch the tubing with the thumb and first finger of your other hand.
- Slowly and firmly pull your thumb and first finger down the tubing. You may find it helpful to hold an alcohol swab between your fingers and the tube to lubricate the tubing.
- If the pulling hurts or feels like it's coming out of the skin, stop. Begin again more gently.

Follow-up care

Make a follow-up appointment as directed by our staff.

When to call your healthcare provider

Call your healthcare provider right away if you have any of the following:

- New or increased pain around the tube
- Redness, swelling, or warmth around the incision or tube
- Drainage that is foul-smelling
- Vomiting
- Fever of 100.4°F (38°C) or higher, or as directed by your provider
- Fluid leaking around the tube
- Incision seems not to be healing
- Stitches become loose
- Tube falls out or breaks
- Drainage that changes from light pink to dark red
- Blood clots in the drainage bulb
- A sudden increase or decrease in the amount of drainage (over 30 mL)

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Instructions to remove surgical staples (14 days after surgery)

Staples are made of stainless steel wire and provide strength for wound closure. The wound location sometimes restricts their use because the staples must be far enough away from organs and structures. The aesthetic outcome may not be as desirable as a suture line, but staples are strong, quick to insert, and simple to remove.

Removal of staples require a staple extractor. Inspect the wound very carefully. If you notice redness or any signs of opening, do not remove staples and send pictures to Dr. Tajkarimi or staff. Wash your hands for at least 20 seconds with soap and water and clean your scrotum incision with alcohol wipes. Open the staple removal kit provided. Then carefully engage each staple as seen in this picture. You can also watch many helpful youtube videos as to how to removal surgical staples. If you are unable to remove them, contact your physician or come to our clinic.

