

Section: Division of Nursing

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\* **PROCEDURE** \*

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Approval: \_\_\_\_\_

Issue Date: July 16, 1990

Reviewed Date: January 2008

Revised Date: January 2010

HACKETTSTOWN REGIONAL MEDICAL CENTER

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**NEWBORN SERVICES/MINOR PROCEDURES**

(Scope)

**TITLE: CIRCUMCISION PROCEDURE**

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PURPOSE: To outline procedure to prepare male infant for circumcision.

SUPPORTIVE DATA: A signed consent, including name of physician to perform procedure, must be obtained from mother prior to procedure (per hospital-wide consent policy). The parent is to receive teaching about circumcision prior to signing the consent.

EQUIPMENT:

1. Circumstraint board
2. Circumcision set
3. Gomco clamp (size to be determined by physician) or Mogan clamp
4. #10 blade
5. Betadine solution
6. Surgeon's gloves
7. Vaseline gauze dressing
8. 2x2 gauze sponges/Vaseline tube
9. Disposable fenestrated towel
10. Bulb syringe
11. Toot Sweet Sucrose Solution if requested
- \*12. Lidocaine and syringe or EMLA cream per provider order
13. Procedural/Surgical Verification Form

CONTENT: PROCEDURE STEPS:  
**\*If EMLA cream is utilized, provider will call unit 1 hour prior to expected arrival to order EMLA be applied.**

1. Open circumcision set and gloves for doctor and place towel, blade, Gomco or Mogan and Adaptic with set.

2. Fix baby securely on circumstraint board.

3. Place 2x2 on penis and pour small amount of Betadine solution. Clean area with Betadine.

KEY POINTS:

EMLA must be applied 45 minutes to 1 hour prior to procedure for maximum benefit.

**Prior to bringing infant to procedure room, nurse is to make sure physician obtains informed consent from mother.**

Leave shirt on and loosen diaper. Strap arms and legs securely. Do not fasten too tightly.

To ensure clean area.

4. Prior to start of procedure do "TIME OUT" This verifies right patient, procedure.
  5. Assist doctor as necessary during the procedure.
  6. Clean Betadine off genital area; then dress and return baby to mother.
  7. Assess infant using NIPS. (see scale below) Utilize interventions for pain relief. Infant will probably be fretful at this time and should be cuddled and held by mother if possible. Explain circumcision care to mother at this time.
  8. Place instruments in plastic box, spray with enzyme cleaner, cover and place box on top of Central Supply cart on unit. Be certain knife blade has been removed. There should be seven (7) instruments plus four (4) piece Gomco (if used).
  9. Clean board with germicide and wash straps. Allow straps to air dry.
  10. Charge appropriately for the procedure.
  11. Give the mother written instruction on circumcision care. These include instruction on care if wound should bleed, or if the infant does not void, and post procedure wound care.
  12. Check circumcision every 15 minutes x 4. Teach circumcision care if not done earlier.
- DOCUMENTATION:
13. Chart the date, time, and by whom the procedure was done, and the amount of bleeding noted at diaper change. **Nurse to complete all sections of the Universal Protocol Document form in Cerner.**
  14. Physician document on medical progress notes.

**NIPS Scale**

ITEM	0	1	2
<b>Facial Expression</b>	Relaxed Muscles Neutral Expression	Tight Facial Muscles Furrowed Brow, Chin and Jaw	
<b>Cry</b>	Quiet, Not crying	Mild, Main, Intermittent Cry	Loud Scream Shriill, Continuous
<b>Breathing Pattern</b>	Relaxed	Irregular, Faster than Normal, Gagging, Breath holding	

<b>Arms</b>	Relaxed, No muscle Rigidity, Occasional Random Movement	Flexed/Extended, Tense Straight Arms, Rigid, Rapid Extension & Flexion	
<b>Legs</b>	Relaxed, No muscle Rigidity, Occasional Random Movement	Flexed/Extended, Tense Straight Legs, Rigid, Rapid Extension & Flexion	
<b>State of Arousal</b>	Sleeping or Awake Quiet, Peaceful Alert & Settled	Fussy, Alert, Restless, Trashing	

3. Interpretation of the NIPS Scale:

- 0 = No Pain                      No intervention Required
- 1 – 2 = Mild Pain              Nonpharmacologic interventions indicated
- 3 - 4 = Moderate Pain        Nonpharmacologic interventions indicated
- 5 – 7 = Severe Pain          Discuss pharmacologic intervention with a physician to be used in addition to nonpharmacologic measures

4. Record the interventions used to manage neonatal pain.

5. Record the effectiveness of the intervention using the NIPS scale.

REFERENCES :

\*“In summary, analgesia is safe and effective in reducing the procedural pain associated with circumcision and, therefore, adequate analgesia should be provided if neonatal circumcision is performed. EMLA cream, DPNB, and a subcutaneous ring block are options, although the subcutaneous ring block may provide the most effective analgesia.” PEDIATRICS Vol. 103 No. 3 March 1999, pp. 686-693 AAP Policy Statement (A statement of reaffirmation for this policy was published on 9/1/2005).

NIPS SCALE: Lawrence J., Alcock, D., et al. The Development of a Tool to Assess Neonatal Pain. Neonatal Network; (1993) 12: 59-66

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