

## What next?

- Dressings should be kept dry for the initial 72 hours after surgery and soaked off in a bath thereafter.
- The dressing may sometimes adhere to the wound causing slight bleeding on removal. Don't panic, the bleeding will stop.
- The catheter will be removed as soon as you are awake, or if there are concerns, the following morning.
- On discharge, a prescription may be issued for patients to collect.
- Patients should schedule a follow-up appointment with Dr Schoeman 2 weeks after the procedure.
- There will be signs of bruising for at least 10 days.
- Refrain from using your erect penis for 3-4 weeks
- The suture-line will be hard and indurated for at least 8-10 weeks.
- Sick leave will be granted for 10 days.
- Please direct all further queries to Dr Schoeman's rooms.
- **PLEASE CONTACT THE HOSPITAL DIRECT WITH ANY POST-OPERATIVE CONCERNS AND RETURN TO THE HOSPITAL IMMEDIATELY SHOULD THERE BE ANY SIGNS OF SEPSIS.**

**Jo Schoeman**  
**FRACS, FCS (Urol) SA, MBChB**

Pelvic Medicine Centre  
St Andrews War Memorial Hospital  
Wickham Terrace  
Springhill, Brisbane QLD 4000

Ph: 07) 3831-9049  
Fax: 07) 3834-4471  
E-mail: [admin@brisbane-urology.com.au](mailto:admin@brisbane-urology.com.au)  
Emerg: 0403 044 072

# Urologist



**Dr Jo Schoeman**  
Specialist Urologist

## **PATIENT INFORMATION BROCHURE**

## ***PENILE FRACTURE REPAIR***

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Patient well-being is my first priority!

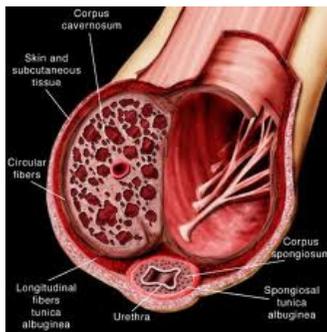
# Penile Fracture Repair

## How does this occur?

- Classically seen in guys turning over onto an erect penis in their sleep
- Vigorous sex where the erect penis slips out and is re-inserted outside the desired orifice, causing a bend in the Corpora Cavernosa with a snap sound signifying a tear of the CC
- Occurs at any age
- Sudden severe swelling of penis turning blue, looking like an eggplant.
- Pain occurs at the time of incident.
- This requires acute attention, therefore make your way to an Emergency department as soon as possible.

## What to do?

- **URGENT.**
- **Make your way to ED ASAP**

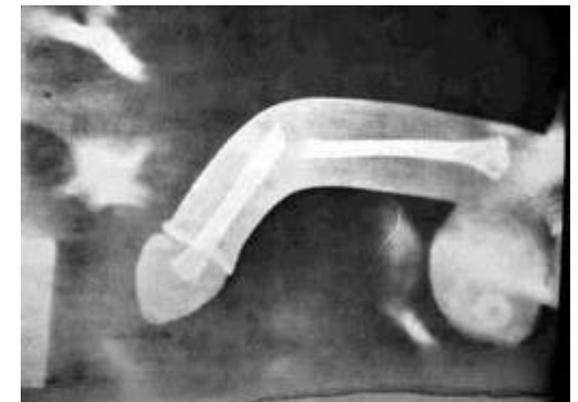


## How is it fixed?

- This fixed under general anaesthetic.
- Supine position ( on your back), sterile procedure.
- An ultrasound is done to isolate the tear in the Corpora
- An incision is done over the isolated spot.
- The corpora is sutured with non dissolving sutures
- The Foreskin is loosened proximal to the glans with a circumferential incision and the whole penile skin is retracted to the base of the penis when the fracture site can not be isolated.
- Occasionally a circumcision may result due to complications with this technique, yet foreskin preservation is attempted.
- A catheter will be inserted until the swelling is better.
- A dressing is then applied, which should be removed after 72 hours.

## What to expect after the procedure?

- Any anaesthetic has its risks and the anaesthetist will explain such risks.
- Bleeding is a common complication.
- A haematoma (blood collection under the skin) is present and will take some time to settle. Bruising is normal.
- Sutures may tear loose with vigorous use of erect penis, and the procedure may then require revision.
- An infection of the wound may occur and requires immediate attention.
- Necrosis of the foreskin can occur in rare circumstances.
- **DANGER SIGNS:** A wound that swells immediately, fever, and puss. Contact Dr Schoeman or the hospital immediately as this occurs in up to 15–20% of all cases.



### Note:

The penis has no bones in it, this is a joke