



OCTOBER 2020
**PHALLOPLASTY,
RADIAL FOREARM
FREE-FLAP (RFF) TECHNIQUE**
INFORMATION BOOKLET

PART B

PHALLOPLASTY, RADIAL FOREARM FREE-FLAP (RFF) TECHNIQUE INFORMATION BOOKLET

PART B

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INTRODUCTION PART B

**THIS SECTION CONTAINS INFORMATION ABOUT HOW TO PREPARE FOR YOUR SURGERY.
IT ALSO CONTAINS INFORMATION ON THE COURSE OF YOUR STAY WITH US.**



2 THE MONTHS PRECEDING YOUR SURGICAL PROCEDURE

2.1 PREOPERATIVE QUESTIONNAIRE

The preoperative questionnaire completed when your file was opened is valid for a 6-month period. After this time, for security reasons, you will be asked to fill it out again.

AT ALL TIMES, BEFORE YOUR SURGERY, LET US KNOW IF:

- you notice a change in your health status;
- your life situation changes (i.e. if you are homeless)
 - > our team will work with you to mobilize the necessary resources;
- you develop a bacterial or viral infection
 - > ask your attending physician to forward your consultation report to us and to include details about the infection and treatments; and/or
- there are changes with your current medication
 - > please provide us with an up-to-date list.

2.2 PREOPERATIVE EXAMINATIONS

You will need to send us the results of your complete blood count commonly known as CBC.

If you are 40 years of age or older, the results of a resting electrocardiogram with interpretation (also known as an ECG, a test that analyzes the electrical activity of the heart) will also be required.

You must provide us with the results of these tests at least 2 months prior to the date of your surgery. Please note that these results are valid for a 4-month period.

Following their analysis by the surgical team, you may be required to undergo additional tests. If so, please make sure to send us the results as soon as possible to avoid postponing the date of your surgery.

2.3 PREOPERATIVE MEDICATION

ALLOWED MEDICATION

At all times before your surgery:

- Continue taking your hormones (testosterone)
- Continue taking your antidepressants and neuroleptics
- You can take acetaminophen (Atasol®, Tylenol®, Paracetamol®, Doliprane®)

MEDICATION THAT SHOULD BE STOPPED

It is your responsibility to check whether or not the medication you are taking contains any of the products listed below. If in doubt, consult your doctor or pharmacist. The medication is to be stopped to avoid any risk of complications.

3 months before surgery, stop taking:

- retinoids (Accutane®).

2 weeks prior to surgery, stop taking:

- natural health products;
- homeopathic products;
- vitamins, supplements, and minerals;
- products containing garlic (allicin).

Consumption of fresh raw or cooked garlic is not recommended.

10 days before surgery, stop taking:

- acetylsalicylic acid such as Aspirin® and any other products containing acetylsalicylic acid;
- anti-inflammatory drugs (unless otherwise advised by your treating physician or surgeon) such as Advil®, Ibuprofen®, Celebrex®, Indocid®, Motrin®, Naprosyn®, Orudis®, Vioxx®, Voltaren®, etc.;
- cold and flu medicines such as Tylenol Sinus®, Advil Sinus®, Reactin®, cough syrup, etc.

2.4 ALCOHOL

Stop all alcohol consumption **2 weeks before and 3 weeks after the surgical procedure**. Alcohol increases the risk of intraoperative bleeding. Mixing alcohol and medication can also cause unpredictable side effects.

2.5 TOBACCO

Stop smoking cigarettes and/or electronic cigarettes containing nicotine and nicotine products at least **6 months before and 8 weeks after your surgical procedure**. It is suggested that you quit nicotine now to increase your chances of success.

Nicotine and the toxic substances contained in these products can constrict small blood vessels and therefore:

- slow down the healing of your wounds;
- increase the risk of phallus loss and infection;
- increase the risk of breathing problems and pneumonia after the procedure;
- cause nausea and/or vomiting and excessive coughing in the morning, which increases the risk of bleeding after surgery.

* Nicotine substitutes (Nicorette® or other) are also contraindicated during this period since they have the same harmful effects as cigarettes.

2.6 CANNABIS

Stop recreational cannabis used in any form (inhaled, oil, etc.) 6 weeks prior to your surgery, primarily due to the possible interactions of cannabis with anesthetic agents.

Cannabis can be used for medical purposes, under prescription only. In certain contexts, its use may be authorized following evaluation with the medical team and your prescribing physician. Please inform us.

However, smoking cannabis, like smoking cigarettes, contributes to the deterioration of your respiratory system and may interfere with your postoperative recovery.

Since there are no studies confirming a safe threshold for pre and postoperative cannabis use, the safest approach is not to use cannabis. If you use cannabis to relieve a health problem, please discuss this with your surgeon.

Please note that the use of recreational cannabis, in any form, is prohibited on all property. In addition, municipal laws prohibit the use of cannabis in any public place, indoors or outdoors.

3 PREPARING FOR YOUR RETURN HOME

WE HAVE LISTED BELOW SEVERAL THINGS TO PLAN FOR AND ITEMS TO PURCHASE TO FACILITATE YOUR RETURN HOME. PREPARING IN ADVANCE WILL ALLOW YOU TO CONCENTRATE YOUR ENERGY ON YOUR CONVALESCENCE AND CARE.

3.1 ITEMS TO PURCHASE

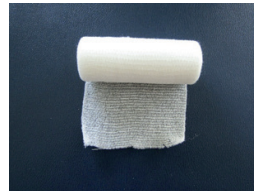
Here are the items to get and leave at home. You do not have to bring them with you. You will need them for your home care.

- 1 thermometer
- NaCl 0.9% saline solution: necessary to clean wounds once a day
- gentle soap type Dove® or Ivory®, fragrance free
- white cotton underwear not too tight
- non-sterile 4X8 compresses for wound care
- vitamin E cream, silicone gel or other healing product

For the donor arm dressing



- 1 elastic bandage
3 inches



- 3 boxes of rolls of
Kling type bandages
3 inches (12/box)

- 2 packs of disposable blue underpads



- 2 to 3 boxes of sterile
compresses 4 X 8
(25/box)



- 2 tuberculin type
syringes (small insu-
lin syringe)



- 1 tube of polysporin



- 1 box of Adaptic®
type bandages 3 X 3
(20/box)



- 1 box of non-adherent
Telfa® 3 X 8 type
dressings (10/box)

3.2 MEALS AND SNACKS

Cook and freeze meals; buy non-perishable food items so you do not have to cook upon your return home. It is important to include enough protein in your diet as it directly influences the healing of your wounds. In addition, adequate hydration and a balanced diet will optimize your immune functions, which will give you better protection against infection.

3.3 YOUR HOME-BASED ACTIVITIES

Your movements will be limited and there will be restrictions in the weight you can lift. You will need help with your household activities. Ask a family member or friend to be available if you need help. This person can accompany you if you need to move about or run errands and, if necessary, provide support with your personal care and daily activities.

3.4 RETURN TO WORK AND NOTIFYING YOUR EMPLOYER

The recovery period is 8 to 12 weeks and may vary depending on the nature of your work. It is important to notify your employer. If you would like a letter justifying a period of work leave, you can request one at the GrS Montréal consultation office.

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PREPARING YOUR SUITCASE

4.1 A SMALL SUITCASE ON WHEELS

- Airline carry-on baggage with a size of approximately 23 cm x 40 cm x 55 cm (9" x 15.5" x 21.5") and a maximum weight of ideally 10 kg (22 lbs).
- After surgery, you will not be able to lift anything weighing more than 4.5 kg (10 lbs.).

In your room at the Care Unit and at Asclépiade, the space for storing your personal belongings and suitcase will be very limited. In addition, the floors must be kept clean and clear to prevent falls.

4.2 ITEMS TO PURCHASE AND TO BRING WITH YOU FOR YOUR STAY

- 2 sodium phosphate enemas of 130ml each (Enema® or other brand - at a cost of approximately \$15 for 2 enemas)
- Chlorhexidine-based sponges or soap



- Dove® or Ivory® brand unscented and alcohol-free mild liquid soap
- Portable mirror with holder to see your genitals during your treatments
- Loose-fitting clothes for your return home
- Veet or Vichy hair removal cream

4.3 PERSONAL ITEMS TO BRING

- For identification purposes, your provincial health insurance card OR passport (if you are not a Canadian resident)
- Current medication, properly identified and MUST be kept in their original containers

*No personal containers will be accepted. Ask your pharmacist to prepare your medication in identified containers for the duration of your stay only.

- 1 pair of closed slippers with non-slip soles
- 1 pair of shoes that are easy to put on
- 3 sets of loose and comfortable clothing adapted to the operated area
- 3 sets of pyjamas
- 1 bathrobe
- 2 bags, one to bring back soiled clothing if necessary and the other to put the items you may need to bring back
- Entertainment such as a book and a device to listen to your music and its charging wire – do not forget to bring your headphones!
- Personal hygiene kit containing toothpaste, toothbrush, unscented lotion, etc.
- Pocket money and/or credit card

And if applicable:

- Inhalation pump and inhalation chamber
- Glasses and/or contact lenses, case, and lens solution
- Container for your dentures and/or hearing aids
- Calling card for long distance calls

The Complexe chirurgical CMC has no laundry service and is not responsible for the loss, damage or theft of personal belongings. Do not bring large amounts of money and leave jewelry and valuables at home.

4.4 DOCUMENTS TO BRING

- The three parts of this Information Booklet (Parts A, B and C)
- An up-to-date list of your medications. Ask your pharmacist for it.
- For patients who are not Canadian residents: the “Contract for Medical Services” and the “Governing Law and Jurisdiction” form. If you have not received these documents, please contact us at 1 514 288-2097.

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THE DAY BEFORE YOUR SURGICAL PROCEDURE

5.1 CHANGE IN YOUR HEALTH STATUS

If the day before your surgery you have a fever (temperature higher than 37.5°C) or if you have the flu, diarrhea, or vomiting, quickly notify the CMC nursing staff by calling 514 332-7091, ext. 232. You can leave a message on the voice mail.

5.2 ENEMAS

The day before your surgery, you will have to self-administer the 2 sodium phosphate enemas that you have purchased (see point 4.2) intrarectally. Follow the instructions on the package.

- 1st enema at 4 p.m.
- 2nd enema at about 8 p.m.

5.3 FIRST SHOWER BEFORE THE PROCEDURE

It is mandatory to take a shower the day before and the morning of your surgery.

In order to reduce the risk of infection and to reduce the number of bacteria on the skin during and after surgery, you must use the sponges or chlorhexidine-based soap you have purchased (see point 4.2) to wash the area to be operated on.

Be sure to follow the instructions provided with the product carefully and avoid contact with the eyes, ears, and genital mucosa.

After showering, do not apply any lotion or cream to your skin or any styling product to your hair.

5.4 “PIERCING” JEWELRY

It is **mandatory** to remove all your piercing jewelry because of the risk of burns during the procedure. Please note that the surgeon may refuse to proceed with surgery if you refuse to remove them. However, piercing jewelry on the body can be temporarily replaced by silicone piercing jewelry, except for those located on the face or in the mouth, which must be removed.

5.5 FASTING

You must **fast from midnight on the day of surgery**, i.e. you must not eat any solid or liquid food, including water.

Avoid chewing gum or sucking candy.

However, you can brush your teeth and use mouthwash.

6 THE MORNING OF YOUR SURGICAL PROCEDURE

6.1 PREOPERATIVE HAIR REMOVAL

WHEN?

Before the preoperative shower on the morning of the surgery and a maximum of 12 hours before the surgery.

AREA TO BE DEPILATED?

Remove hair from the area to be operated on from the navel to the knees, including the groin and around the anus, as well as any hair remaining around the donor arm.

HAIR REMOVAL METHOD?

Use a depilatory cream on the area, except on the mucous membranes of the genitals. Depilatory cream can be purchased at pharmacies (Veet, Vichy, Klorane, etc.). Follow the instructions on the product and refer to your pharmacist for more information.

If your skin reacts to the product, remove hair with a razor clipper to make sure you shave the hairs rather than uprooting them.

* Waxing and razor blades are not permitted. *

SHAVING CHECK?

The nurse will check the depilated area before your procedure.

6.2 THE SECOND SHOWER BEFORE THE PROCEDURE

You must take a shower the morning of the surgical procedure and wash the area to be operated on with a sponge or chlorhexidine-based soap. (See point 5.2)

After showering, do not apply any lotion or cream to your skin.

Your next shower will take place approximately 7 days after your surgery.

6.3 PERSONAL MEDICATION

The morning of your surgical procedure:

- use your inhalation pumps even if you normally use them only when needed; and
- do not take your regular medications, including diabetes, heart, and blood pressure medications.

*Your nurse will tell you whether to take them, based on the anesthesiologist's recommendations.

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YOUR STAY AT COMPLEXE CHIRURGICAL CMC

7.1 ADMISSION

A member of GRS Montréal's administrative team will inform you one week before your surgery of the time you will be expected at the Centre Métropolitain de Chirurgie.

Please note that the time of your admission does not correspond to the time of your surgery, as it cannot be precisely confirmed.

On the morning of your surgery, you will be greeted by a member of the nursing staff who will complete a preoperative checklist with you and answer any questions you may have.

7.2 MEDICAL CONSULTATION

On the morning of your surgery, your anesthesiologist and surgeon will meet with you and answer all your questions.

7.3 PREMEDICATION SPECIFIC FOR YOUR SURGERY

Approximately two hours before your surgical procedure, the nursing staff will give you premedication in tablet form to help reduce postoperative pain as well as the risk of nausea and vomiting

7.4 OPERATING ROOM

You will be taken to the operating room by a member of the care team.

When arriving in the operating room, members of the surgical team will verify your identity and the information in your file. For security reasons, you will be asked to confirm your first and last name several times. You will then be under the care of the anaesthesiologist during surgery.

7.5 RECOVERY ROOM, CARE UNIT, AND ASCLÉPIADE

Immediately after surgery, you will be transferred to the recovery room. It is normal at this time to feel nausea and pain. These symptoms are part of the side effects of anesthesia. The time spent in the recovery room is approximately 30 to 90 minutes and will allow you to recover under the continuous supervision of the nursing staff.

You will then be transferred to your room in the care unit for three nights.

To avoid complications, you will stay in bed for the first day following surgery. Your first time getting out of bed will be on the second day with the help of the nursing staff. To promote good blood circulation in your legs, the sequential pressure stockings that were applied during surgery will be kept until the first time you get out of bed.

You will receive medication to manage your pain if necessary.

Feeding will be resumed gradually, according to your tolerance.

Thereafter, you will be transferred to Asclépiade for seven nights. There you will receive information and education related to your postoperative care.

7.6 VISITORS

Your relatives will not be allowed to follow you to the operating room. They can wait for you in the waiting room located at the main entrance (Poincaré Street) or wait in your room.

When you return to your room in the care unit, your relatives will be allowed to come and visit you, but only one at a time to respect the quietness and privacy of the other patients. Consequently, if the peace of the clientele is disturbed, we will be obliged to intervene, and we may ask to minimize the visiting time.

Visiting hours will be from 9 a.m. to 8 p.m.

When you will be at Asclépiade, the visits will always be one visitor at a time but visiting hours will be from 2 p.m. to 8 p.m. instead.

During your stay, no meals will be served to your relatives. Please check with the staff at the Complexe chirurgical CMC for nearby restaurants.

7.7 MEDICAL DISCHARGE

Usually, 10 days after your surgery you will get your medical discharge. You will need to arrange your transportation home. On the day of your discharge, you may be asked to vacate your room early in the morning to allow us to accommodate a new patient.

However, you will be able to wait in the lounge until your companion or other transportation arrives. Make sure you have all your personal belongings and identification before you leave.

You will receive a prescription and information documents about your care and treatment.

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