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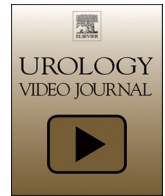
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Peri-operative considerations for inflatable penile prosthesis: A same-day discharge pathway

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Introduction & objectives

Inflatable penile prosthesis (IPP) procedures can be complicated by peri-operative care, hospital stays, and post-operative narcotics. A same-day discharge pathway with thorough care can help reduce complications and narcotics.

Materials & methods

We present three patients who underwent IPP procedures following our same-day discharge pathway. Once sterilized, patients receive bilateral pudendal nerve blocks (0.5 % Marcaine (5 mL), followed by a dorsal penile nerve block and ring blocks from 9 o'clock to 12 o'clock and 12 o'clock to 3 o'clock position [1].

All our IPP procedures begin with a 3 cm transverse incision into the penoscrotal junction, dissecting down the dartos layer to identify the urethra and corpora on either side completing the procedure in a standard fashion. At the end of the procedure, scrotum is then closed with 4–0 Monocryl sutures in a running horizontal mattress fashion.

The device was once again tested, and the cylinders appeared to inflate without any buckling or lateral bulging. Surgical adhesive glue was applied to the skin and a compressive scrotal and penile wrap dressing was placed.

Results

Upon discharge patients are prescribed: Tylenol, Motrin, Robaxin, Gabapentin, and Bactrim for 7 days. [1] Post-operative care instructions include: (1) POD 1 remove Foley catheter (2) Drinking fluids and returning to normal diet as tolerated, (3) Raise legs while seated, (4) POD 2, home-removal of compression dressing, (5) Maintain scrotal support until 2 week visit, (6) Maintain penis position with head up on abdomen, (7) Decrease swelling by placing an ice pack on scrotal

support for 2–3 days, and 8) Return at 4–6 weeks for teaching and proper use of IPP.

Conclusions

We present our technique of same-day discharge for patients undergoing an inflatable penile prosthesis, outlining peri-operative considerations. To date we have performed 42 cases using this same-day discharge pathway. One case was aborted due to bladder injury and a malleable was placed instead, so this pathway was not used. Since implanting our standard discharge protocol, we have not prescribed any narcotics and have not received any patient inquiries for them.

Patient consent form

All patients undergoing procedures at Henry Ford Hospital sign a consent form during the pre-operative time allowing images and video footage of their surgery to be used for teaching and publications.

CRediT authorship contribution statement

Sami E. Majdalany: Conceptualization, Data curation, Writing – original draft. **Grace Yaguchi:** Data curation, Visualization. **Mahdi Bazzi:** Writing – review & editing. **Marcus L. Jamil:** Methodology, Writing – review & editing. **Ali A. Dabaja:** Conceptualization, Supervision. **Amarnath Rambhatla:** Conceptualization, Supervision.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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Supplementary materials

The video related to this article can be found online at: [doi:10.1016/j.urolvj.2023.100252](https://doi.org/10.1016/j.urolvj.2023.100252).

Reference

- [1] C.M.C. Tong, J. Lucas, A. Shah, C. Foote, J. Simhan, Novel multi-modal analgesia protocol significantly decreases opioid requirements in inflatable penile prosthesis patients, *J. Sex. Med.* 15 (8) (2018) 1187–1194, <https://doi.org/10.1016/j.jsxm.2018.05.017>.