

Post Operative Inflating Instructions

Patient Name:	Date:
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- Continue with your present post-operative care with upward penile positioning, daily hot baths (2 to 3), appropriate use of analgesics and increase physical activity as tolerated. You may take up to three hot baths per day and shower as well if needed. The showers are not a substitute for the baths.
- Ideally we would like you to start inflating and deflating the device as soon as it is possible after the third post-operative day. A videotape and brochure describing the function of the device with explanations on how to use the implant will be provided to you. You should also have received a facsimile of the pump which will allow you to familiarize yourself with the different anatomical features of the pump. Begin to form a mental picture of where the deflation footprint is located and while in the bathtub examine and palpate the scrotum. Each time attempt to locate the inflation bulb and the deflation button. Please do not under any circumstances activate the device until you are 100% sure of the location of the deflation button.
- As soon as you are able to feel the deflation button (post-op day 3 to 14) begin cycling of the implant by squeezing the inflation bulb 3 to 6 times or until the cylinders are fully deployed and the folds and ridges along the length of the shaft are no longer palpable. Initially maintain the fluid in the cylinders for a few minutes only and increase the duration of the erection as tolerated each time that the implant is cycled. Gradually increase the erect time to 15 to 30 minutes. Each time the cylinders are inflated, they must be fully deflated by holding down the deflation button with your dominant hand while squeezing the cylinders in the shaft of the penis with the palm of the contralateral hand.
- Inflating the device without fully deflating the cylinders will prevent the fluid from returning to the internal reservoir. If the reservoir is not maintained fully filled, scar tissue will form around a partially empty reservoir thus permanently compromising its capacity to store the implant fluid when an erection is not desired. This will later cause the penis to spontaneously inflate after its deflated and ultimately compromise penile flaccidity. A

partial erection will then always be present and may interfere with regular activities or be readily noticeable. If this occurs, additional surgery could be necessary later to remove the scar tissue that is trapping the reservoir or remove fluid from the system. Completely deflating the cylinders will maintain the reservoir full, allowing scar tissue to form around it in this configuration, thus maximizing its storage capacity.

- Similarly, scar tissue will also form inside the shaft of the penis and surround or trap the deflated cylinders. The penis will retract causing the cylinders to bend and form folds. To avoid foreshortening of the erect penis, it is very important to begin early cycling (post-op day 3 to 14) of the device by fully inflating the cylinders until they are fully deployed and straight. The cylinders must be inflated until all the cylinder folds completely disappear. Palpate the left and right side of the entire shaft of the penis after inflation to confirm the disappearance of cylinder folds. Failure to do so will permanently foreshorten the length and the quality of the erection.
- Continue to inflate and deflate the implant each time a hot bath is taken. This will stretch
 the pseudo capsule of scar tissue which is forming around the cylinders and reservoir
 during the healing process, maximizing both penile length as well as reservoir volume.
 Each time increase the rigidity of the cylinders (by increasing the number of pumps) and
 duration of the erection. Upward positioning of the penis will no longer be necessary if
 the implant is cycled daily.
- Daily implant cycling will gradually soften the pump, increase manual dexterity and strength and reduce erect penile pain.
- Sexual activity may begin as early as 3 weeks as tolerated. Cylinder inflation will initially cause penile pain which will gradually subside. In the beginning, one can take Motrin or Tylenol 15 minutes before anticipated sexual activity.
- Please call the office at (212) 535-6690 for routine matters or if you are unable to fully deflate the cylinders. In case of an emergency or for any additional information or clarification of these instructions outside of regular office hours please call Dr. Eid on his cell at (917) 797-1012.