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CIRCUMCISION CONSENT FORM

hereby request and authorize Dr Malik to perform upon me the procedure: Circumcision of a male baby name	
CONSENTING PARENT NAME:	
Description: A circumcision is an elective surgical procedure; it is your written consent. Baby boys are born with a covering called benis, called the glans. A circumcision removes the foreskin of the during the procedure, yet major anesthesia is generally not used may be used to help alleviate pain. There are hygienic reasons for cells, Smegma , that can build up under the foreskin of males who door and/or infection. However, a boy can be taught to properly there are personal reasons for circumcision. Some parents circumcishild will be in a culture where most boys are circumcised, so he circumcision is part of a religious practice. Circumcision may help research shows that circumcision may decrease the risk of a man Circumcised infants appear to have less urinary tract infections the both groups.	the foreskin. The foreskin covers the sensitive end of the e penis, leaving the glans exposed. Pain may be experienced because of its potential harm to the baby. A local anesthetic or circumcision. There is a thick white discharge of dead or are not circumcised. The build up of Smegma can lead to wash his penis so that odor and infection can be prevented, make their infant if the father has been circumcised, or if the does not look different from other males. For some parents of prevent cancer of the penis, a rare condition. Some
Possible Risks or complications: usually infrequent and minor - the foreskin, requiring future revision or poor cosmetic outcome. glans, and denuding an excess of the penile shaft.	
Post op Care: For the first five to seven days as it heals, the penishmount of vaseline is applied with each diaper change for 7 days any other body part. When cleaning the penis, it is necessary to reduce the nature and purpose of the proposed surgical procedure at the prognosis with vs. without treatment. My signal. I have read the above authorization and consent and have been proposed procedure(s) including their potential benefits and consecuperation and the likelihood of achieving expected goals have no refuse and medical or surgical procedures or treatment. 4. I centered and have no further questions which I need answered procedures and have no further questions which I need answered procedures.	After it is healed, the penis is washed at bath time just as etract any foreskin not completely removed. I have been edure(s), the nature of my condition, alternative types of ature below certifies that: n provided the opportunity to ask questions. 2. The inplication or side effects, problems that may occur during to been explained to me. 3. I understand that I have the right rifiy that I have read and fully understand the above
Patient Signature	Date
	 Date
Dr Malik Signature	 Date