**PHIMOSIS ALGORITHM**

**TIGHT FORESKIN**

**HX OF FEBRILE UTI?**

- **YES**: REFER TO PEDIATRIC UROLOGY OBTAIN RBUS & VCUG PRIOR TO PED UROLOGY VISIT

- **NO**
  
  **INFANTS & CHILDREN <2**

  - **HX OF PAIN, INFECTION, BALANITIS, URINARY DIFFICULTY**
    - TRIAL OF STEROID CREAM: BETAMETHASONE = GOLD STANDARD (NOT COVERED BY MEDI-CAL) OR TRIAMCINOLONE APPLY BID WITH GENTLE YET FIRM RETRACTION* OF THE FORESKIN X 4-6 WEEKS
    
  - **NO HX OF PAIN, INFECTION, BALANITIS, URINARY DIFFICULTY**

  **CHILDREN >2**

  - **HX OF PAIN, BALANITIS, BALANOPOSTHITIS**
    - TRIAL OF STEROID CREAM: BETAMETHASONE = GOLD STANDARD (NOT COVERED BY MEDI-CAL) OR TRIAMCINOLONE APPLY BID WITH GENTLE YET FIRM RETRACTION* OF THE FORESKIN X 4-6 WEEKS

  - **NO HX OF PAIN, INFECTION, BALANITIS, URINARY DIFFICULTY OR UTI**

  **OPTION TO OBSERVE**

  **OPTION TO TREAT**

- **IF UNSUCCESSFUL REF* TO PEDIATRIC UROLOGY FOR EVALUATION**

- **IF SUCCESSFUL & ABLE TO PULL BACK SKIN = PROBLEM RESOLVED, NO NEED FOR REFERRAL**

- **IF UNSUCCESSFUL REFER TO PEDIATRIC UROLOGY FOR EVALUATION**

- **IF SUCCESSFUL & ABLE TO PULL BACK SKIN = PROBLEM RESOLVED, NO NEED FOR REFERRAL**

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* Foreskin must always be reduced back up over the head of the penis after retraction. If the foreskin cannot be pushed back up over the head of the penis, this is paraphimosis and is a medical/potential surgical EMERGENCY.