



ברית מילה

**PREPARING FOR YOUR SON'S  
BRIT MILAH**

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מרדכי בן חיים דוד

וּבְנֵי־שְׁמֹנֶת יָמִים יִמּוּל לָכֶם כָּל־זָכָר  
לְדֹרֹתֵיכֶם ... בראשית ק"ד י"ז, פ"ק י"ב

**And a son of eight days shall you  
Circumcise, every male throughout  
Your generations ... Genesis XVII, v.  
12**

# Hermensz van Rijn Rembrandt

The Circumcision: c. 1630



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## **OVERVIEW**

# T

he performance of Brit Milah, ritual circumcision of the male on the eighth day of life, is one of the happiest of Jewish occasions. I hope the following instructions will help you make things go more smoothly so that you will be in a better position to enjoy this event.

The Brit, or Covenant of Abraham, is a very important Jewish precept. It is so important that we are allowed to make a Brit even on the Sabbath or on a holiday should it occur on the eighth day. The Brit is a symbol of man's role on Earth. God gave us a world which is almost, but not totally, complete. It is our task to be God's junior partner in creation and to finish the job of completing the world. God wants us to begin with ourselves. Each of us is born incomplete, even physically, and it is the act of circumcision, for the male, that completes him. Physical completion for the female takes place later, when she marries. Abraham was not blessed with Isaac until he was circumcised. That fact signifies that children are the greatest blessing that God can bestow upon man, and that the organs that produce children must never be allowed to be sullied. We must always realize that the sexual act is a gift from God and should be conducted in holiness and purity. We believe that God's laws were given to us for our benefit. Therefore, it is not surprising that circumcision also has hygienic and medical benefits. Circumcision must never be performed before the eighth day. If it is, the circumcision is not valid religiously. A Brit can be made after the eighth day if the baby is not well or if no Mohel is available on that day. Physiologically, on the eighth day the infant's clotting mechanism is naturally improved. Symbolically, in Judaism, the number eight signifies the completion of man in both his roles - as man the creator and as man the meditator and appreciator. Six days of the week we are to create and help God complete this world. On the seventh day we are to step back and appreciate what God has given us. We gain, through study, new insights into ourselves and the world. A Jew must be both man the creator and man the meditator in order to be complete. The act of circumcision, which is our physical completion and symbolic of all other completions, could not take place before we have assumed both these roles. Also, circumcision must take place only during the daylight hours to be religiously valid. We demonstrate pride in following God's precept by doing it openly, in the clear light of day. May your children grow up to give you only pride and joy and to help the Holy One, blessed be He, complete this world.



An important custom is the presence of a chair for Elijah, the prophet. Elijah is called the guardian angel of children because God allowed him to miraculously revive the lifeless son of a widow in the town of Zarepeth. Also, Elijah lived in the time of Ahab, king of the northern Kingdom of Israel. Under the influence of Jezebel, Ahab's wife, people disobeyed God's commandments, including Brit Milah, and followed the idolatrous prophets of the Canaanite gods, Baal and Ashtarte. Elijah tirelessly urged people to keep God's law and to perform Brit Milah. Eventually, he exposed the falseness of the idolatrous prophets and led the people back to belief in God. And, according to tradition, Elijah will return to Earth to announce the coming of the messianic era. Elijah's chair represents our silent prayer for the baby's safety, a sign of our faithfulness to God's law, and an expression of our hope that God will bring the Messiah soon, perhaps during the life of the child or even in our own lifetimes.

### ***PREPARATIONS FOR THE CEREMONY***

# T

he following items should be obtained for the Brit Milah:

1. Kosher **grape** wine for Kiddush (e.g., Manischewitz®, Kedem®, or Carmel®). A sweet red wine may be best, as a drop will be offered to the baby.
2. A Kiddush cup. If one is not available, a wineglass will suffice.
3. A kosher challah (two, if the Brit takes place on a Sabbath or holiday) to start the festive meal (matzah, of course, during Passover), a challah or bread knife, a challah cover (or napkin), and a board on which to cut the challah.
4. Yarmulkes (kipot, or skullcaps) for the men. A small yarmulke for the baby is optional. A chinstrap may help keep it on the baby's head. Double-backed tape may be used for that purpose, but does not always work.
5. A table, two chairs, a pillow, and a good light source where the circumcision will take place. If the baby is to be held on the Sandak's lap, a very small table will be adequate to hold the instruments. It is nice to use a fancy tablecloth and pillow cover, as they will not normally become soiled.

6. A pacifier and/or a bottle of water, glucose water, formula, or breast milk, which may be used, if the parents wish, during and/or after the circumcision to make the baby feel more comfortable (optional).
7. Acetaminophen suspension infants for pain after the circumcision.
8. A box of facial tissues.
9. Extra disposable diapers.
10. A package of 3-inch by 3-inch gauze pads.
11. A jar of Vaseline® Petroleum Jelly. Some also like to use an antibiotic ointment. Tongue depressors are nice for putting Vaseline® on the gauze pads.

# T

he following is the information I will need to know for the ceremony:

1. The date and time of the baby's birth.
2. The baby's English and Hebrew names.
3. The father's and mother's English and Hebrew names.
4. Both grandfathers' Hebrew names, and whether either is a Cohen or Levite (most of us are Israelites).
5. The address and the phone number of the parents' home and of the place the circumcision is to be performed, if not at their home.
6. The English names of the Sandak, the Kvatter, and the Kvatterin. The duties of these people will be outlined later, in the sections labeled "Holding the Baby" and "The Ceremony."
7. The name of the Rabbi(s) and/or Cantors (if any) who will attend and help officiate the Brit Milah ceremony.

## ***THE BABY'S NAME***

# R

egarding your baby's name, the following rules are normally followed. Ashkenazi Jews customarily give the baby his Hebrew name in memory of a deceased relative or close friend. Sephardic Jews customarily name the baby in honor of a living relative. The exact Hebrew name should be used, except that a female name will have to be changed to the most appropriate male name. Generally, it is better to name a boy after a male and to wait for a girl to name after a female, but that is not required. Most parents then choose English names, the first letters of which are similar to or the same as the first sounds of the Hebrew names. While there is no real need to have the English name resemble in any way the Hebrew name, most families will find that it is a big advantage to have the names resemble each other as closely as possible. It will be much easier in the future to remember the Hebrew names that way. Choosing English names that are the exact equivalent as the Hebrew name can even be a sign of pride in our heritage. You may want to consult your Rabbi about the name. I will also try

to help you, if you wish. "The Name Dictionary," by Alfred J. Kolatch (available in paperback - published by Jonathan David Publishers, New York, 1982), has a very extensive list of Hebrew names, their meanings, and their equivalents (according to meaning) for the opposite sexes. Also, there are a number of internet sites that contain lists of Hebrew names.

The choice of a name is a sensitive issue with many families. It is a good idea to give careful thought about consulting members of either or both sides of the family to avoid injured feelings about the name.

## **CLOTHING AND FEEDING**

# T

he ideal baby's clothing is a gown - something that is easily raised over the baby's waist as the circumcision is being performed and easily pulled back over the baby's body afterwards. That minimizes the amount of handling that is necessary right after the circumcision. However, any nice clothing is appropriate. A blanket should be handy to keep the baby warm before and after the circumcision. Socks and/or shoes can be put on the baby, but they often fall off unless they are tied on. A yarmulke is cute and appropriate, but not required. Unless tied on by a chinstrap, they also frequently fall off.

It is usually recommended that babies not be fed within an hour of the circumcision for fear that infants may vomit and aspirate when crying in severe pain. **No such restriction is required if local anesthesia is used** and the infant is restrained comfortably, by hand, since pain is then minimal and a hand-held baby can be turned over easily if vomiting occurs for any other reason. The baby will be less likely to be upset during surgery if he is not hungry. However, keep in mind that the infant is less likely to defecate and urinate during the ceremony if he is not fed just prior to the circumcision.

## **ANALGESIA AND ANESTHESIA**

# T

here is no question that babies feel pain because of the circumcision. There are a number of options available to help alleviate that pain. The most important consideration is that the most painless and efficient method is used. The Mogen clamp, which will be used, is just as safe as any of the other clamps and devices used by the majority of physicians in the hospitals. Furthermore, it is more likely that the proper amount of tissue will be removed when the Mogen clamp is used. Additionally, whereas circumcision with the other clamps and devices usually takes 7 to 30 minutes to perform, the technique I will use takes only about one minute. The baby will be subjected to far fewer painful maneuvers, and the amount of time it takes to perform those maneuvers is just a few seconds.

A few drops of wine will be given to the baby during the naming ceremony, but not enough to alleviate any pain. Wine sufficient in quantity to produce significant analgesia may also induce vomiting and depress respiration.

A pacifier may be given to the baby to suck on for comfort during the surgery. In anesthetized infants, water, sugar water, formula, or bottled breast milk may be used if the parents wish. Any of these may also be used to comfort the baby after the surgery.

suspension for infantsfanesthesia is used first dose after the circumcision and/or the ceremony are completed1.25 mlsyringe

If the parents wish, the baby may receive 4 to 6 drops of paregoric 45 minutes before the circumcision. It should not be used repeatedly because it can be quite constipating. It may sometimes cause drowsiness and may rarely cause agitation. These side effects, however, are usually transient. Paregoric is easily administered by dropping 4 to 6 drops of the solution from an eyedropper into a spoon partially filled with water or sugar water. It is normal for the mixture to turn a cloudy white. Empty the rest of the paregoric in the eyedropper back into the bottle. Use the tip of the eyedropper to stir the mixture in the spoon. Draw the mixture into the eyedropper and feed it to the baby directly from the eyedropper. Paregoric can be obtained by prescription. Your baby's doctor or I can prescribe it for you by phone, but it is hard to find nowadays.

By far, the most effective pain relief is obtained by administering a small amount of anesthetic, Lidocaine and Bupivacaine, just above the penis. This technique, a form of regional anesthesia known as Dorsal Penile Nerve Block (DPNB), is so effective that infants often do not cry at all during the surgery. DPNB is highly recommended in the literature. I have had extensive experience with it - over 10,000 cases without any complications! The injection itself is only minimally painful and takes only a few seconds to administer. A similar technique, local anesthesia (given circumferentially at the site of the excision), is probably just as effective, but requires numerous injections.

Topical anesthetics have been shown to be only minimally effective. For any effect to occur at all, the topical anesthetic must be applied by an occlusive dressing for an hour prior to the procedure. Freezing sprays are not effective at all, since the tissue warms up again long before the painful maneuvers are actually performed during the surgery.

I very strongly recommend that the baby receive DPNB prior to, pacifier or bottle during (if the baby is normally soothed by it), and acetaminophen every 4 hours as needed after the circumcision. DPNB is the safest and best method for preventing pain, is permitted by Jewish Law, and allows circumcision to be performed quite humanely. I do not recommend using paregoric unless the baby is extremely colicky or has pain associated with loose bowel movements. I would avoid using paregoric in babies who are very small, are already sleepy, or have a tendency to become fussy when they take medicines.

## ***HOLDING THE BABY***

# **T**

he Sandak is the adult Jewish male who has the great honor of holding the baby during the circumcision. The baby may be held in one of three ways, depending on the wishes of the family and the Sandak. All these methods are equally safe, religiously acceptable, and comfortable for me.

1. The baby may be restrained by a special molded (Circumstraint®) board. This method requires no real help from the Sandak. It is more stressful for the baby, as the frog-leg position on the board can be very uncomfortable. I do not recommend its use and no longer even have such a device.

2. The Sandak may restrain the baby by hand on a pillow, on a table (a more traditional approach and the most comfortable method for the baby). Almost any adult can be quickly taught to properly restrain the baby in a comfortable position. The Sandak does not necessarily have to watch the procedure if he prefers not to. The table that is best in size and height is one like a small card table, at which the Sandak can comfortably sit. Dressing tables and some other types of furniture do not work well if they are too high or low for the Sandak or if there is no place beneath the table for the Sandak's legs. I recommend this method in most cases.

3. The Sandak may restrain the baby directly on his own lap, on a pillow (a very traditional approach). This should only be attempted by someone who is certain he can handle the situation. A tall or elevated chair would be needed so that the baby would be at a height comfortable for the Mohel, who will be standing. A footrest that will allow the Sandak to hold his legs up would also be needed.

## ***THE CEREMONY***

# W

While it is always nice if ten Jewish males (thirteen years of age or older) attend a Brit, there is no religious requirement for a “minyan.” The Mohel, Sandak, Kvatter, and father are, naturally, included in the count.

Anyone may watch the circumcision. The parents have the option to limit the number of observers. However, most people will feel honored to be able to observe. Parents may use one room for the circumcision and another for the Kiddush and naming or, simply, use just one room for the whole ceremony .

It is proper for all who can to remain standing for the entire ceremony, from the time the infant is brought into the room for circumcision until all the prayers have been recited and the “Ha-motzi” is recited over the challah. If you wish to become familiar with the entire text of the ceremony, it can be found in many “siddurim” (prayer books). I have included in this booklet the prayers you should be ready to recite (you do not need to memorize them).

The baby (whom I have prepared in advance by cleansing the area of the circumcision) is handed by the mother to the Kvatterin (a Jewish woman, 12 years or older), usually in a bedroom. The Kvatterin brings the baby into the room where the circumcision will be performed, to the Kvatter (a Jewish male, 13 years or older). The Kvatter brings the baby to the Sandak and the Mohel. The Kvatterin and Kvatter perform the kindness of relieving the parents from the task of physically bringing their new infant to surgery. If you wish to honor more people, they may also participate in transporting the infant to surgery (the honor, of course, is that each person in the line participates in bringing the baby closer to the Covenant of Abraham). A person may be honored by being asked to give a pacifier or a bottle to the baby during the procedure (to make him more comfortable). After the surgery, others may be honored by being asked to hold the baby as the Kiddush, naming, and other prayers are being recited. In planning for honors at the ceremony, parents should consider the welfare of the infant, as well as the feelings of family and friends.

The Torah specifies that it is the father’s duty to circumcise his son. Naturally, most fathers do not have adequate training and experience to safely perform a circumcision. Even those that do perform circumcisions may not be trained to do so by accepted ritual methods, or may not wish to perform surgery on their own son. Jewish law, therefore, recommends that a “shaliach,” or agent, be appointed to carry out this task for the parents. After the baby is brought into the room where the circumcision will occur, the following may be said by the father to verbally confirm that appointment:

**הַנְּנִי מִמַּנְה אֹתְךָ לְהִיּוֹת שְׁלוּחִי לְמוֹל אֶת בְּנִי.**

“Hin’ni m’mahneh ot’chah li’yot sh’loochi lahmol et b’ni.”

(“I hereby delegate you as my agent, to act on my behalf in circumcising my son.”)

Since this is a declaration, not a prayer, it should be said with intent, in a language understood by the declarer. Some prefer to say it both in Hebrew and in English. If your Rabbi is present and taking part in the ceremony, he may want you to recite a different declaration or none at all.

The infant may momentarily be placed on the extra chair as the Mohel designates the chair as the seat of Elijah. The baby is then placed on the lap of the Sandak (who sits in the other chair) or on the table at which the Sandak is sitting.

Just before the actual removal of the foreskin, the Mohel recites a B'racha (Hebrew blessing) and the circumcision is performed. Directly after the removal (which only takes a second) the father says the following B'racha:

בְּרוּךְ אַתָּה ה', אֱלֹהֵינוּ מֶלֶךְ הָעוֹלָם, אֲשֶׁר קִדְּשָׁנוּ  
בְּמִצְוֹתָיו, וְצִוָּנוּ לְהַכְנִיסוֹ בְּבְרִיתוֹ שֶׁל אַבְרָהָם אָבִינוּ.

“Baruch Atah Adonai, Elohainu, Melech Ha-olam, asher kid’shanu b’mitzvotav, v’tzivanu l’hachniso bivrito shel Avraham Avinu.”

(“Blessed art Thou, O Lord, our God, Ruler of the Universe, Who hast sanctified us with Thy commandments and hast commanded us to enter him into the covenant of Abraham our father.”)

The Mohel then completes the procedure, applies the bandage, and replaces the diaper.

If two rooms are used for the ceremony, the baby is then carried to the room where Kiddush will be recited. All who have come to the Brit Milah should be present for the Kiddush and the naming of the baby. The Rabbi or the Mohel also offers other prayers for the baby, asking for a full life of good deeds and for a swift healing from surgery. As stated earlier, additional honors can be given to friends or family by asking them to hold the baby as these blessings and prayers are recited. As the prayers are translated into English for those who do not understand Hebrew, still others can be asked to hold the baby. Remember, though, that too much jostling may cause the baby to become irritated.

A festive meal should then be served - as simple or as fancy as you wish - starting with the B'racha over the challah:

בָּרוּךְ אַתָּה ה', אֱלֹהֵינוּ מֶלֶךְ הָעוֹלָם, הַמוֹצִיא לֶחֶם  
מִן הָאָרֶץ.

“Baruch Atah Adonai, Elohainu, Melech Ha-olam, hamotzi lechem min ha-aretz.”

(“Blessed art Thou, O Lord, our God, Ruler of the universe, Who hast brought forth bread from the Earth.”)

### **CARING FOR THE CIRCUMCISION**

C

are of the circumcision is quite simple. Circumcisions generally heal by themselves. The object of care is to keep the area of the surgery as clean and comfortable as possible until the tissue heals.

After surgery a Vaseline® gauze strip will be wrapped around the penis. It may come off by itself, possibly within just a few minutes, or while you are changing his diaper. If so, just throw it away. Do not replace it. If it does not come off by itself, gently remove it after 2 or 3 days, when the infant does not seem bothered by diaper changes. If stool gets on it, it will have to be removed at that time, since stool contains bacteria and can be a source of infection. That may cause brief discomfort and some fresh oozing of blood, but will not cause any harm. Warm water soaks can help loosen the strip if it sticks to the penis.

The following procedure should be followed for 4 or 5 days, **whether or not the Vaseline® strip is on or off**. When you change the diaper, take off the gauze pad you put on during the previous diaper change (that will not be present the first time you change the diaper after the circumcision). Clean the diaper area as you normally would, but leave the penis alone. It will be necessary to clean the penis only if stool gets on it. In that case, clean the penis as gently as you can, using a cotton ball soaked with warm soapy water (use a mild non-stinging baby soap). Urine, though, is sterile, so you do not have to clean it from the penis itself for these 4 or 5 days.

After you clean the diaper area, prepare a 3-inch by 3-inch gauze pad by applying a circular layer of Vaseline® on one side of it. A butter-knife or tongue

depressor may be used to apply the Vaseline® in order to prevent your fingers from getting greasy and making it difficult to tab the diaper shut. Place the gauze pad, Vaseline® side down, over the penis just before closing the diaper. The Vaseline® will prevent the newly exposed *glans* (head of the penis) - which will assume a reddish, raw color after surgery - from sticking to and becoming irritated by the diaper and will allow the baby to lie comfortably on his stomach, side, or back. In addition, the gauze pads will help prevent stool from getting on the penis and, the Vaseline® will tend to loosen the Vaseline® strip if it becomes adhered to the penis. If you want to apply an antibiotic ointment onto the penis if stool gets on it, or you wish to occasionally apply it, instead of Vaseline®, onto the gauze pads, you may, though there is no real need to do so.

After 4 or 5 days, the *glans* will turn back to a normal color, but it will still have a “wet” appearance. You should discontinue applying the gauze squares at that time. Within 3 hours, the *glans* will look dry. Before that time, you should sponge-bathe the baby if he requires it, trying to avoid wetting the penis. After the area has dried up, you may discontinue caring for the circumcision and, if you wish, bathe the child in a tub, even if scabs are present (see below).

For 2 or 3 days, a small amount of blood will ooze onto the gauze squares, and some blood may seep though the gauze to stain the diaper, but not enough to soak the pads or diapers. Swelling may occur in the area of the circumcision, but will usually subside within a week. Any bruise at the site of the anesthetic injection will also disappear within a week. Scabs usually form over the *glans* and around the rim of the circumcision, especially on the under-surface of the *glans*. They are light yellow, off-white, or gray in color and may last 10 to 12 days. For the first 4 or 5 days, however, while you are putting Vaseline® gauze squares on the penis after each diaper change, they will not dry up. They will be oozy and slimy. They will not look like pus, though – pus has a greenish-yellow, ugly appearance and smells bad. After you stop using the gauze squares, the scabs will dry up, also within 3 hours. You do not need to bother with the scabs - they are a normal part of healing. While many babies do not seem to be in any distress after the circumcision, some may be uncomfortable for the first 2 or 3 days, especially when their diapers are being changed or when their urine initially comes into contact with the raw tissue. Feeding or nursing should not be affected once the initial severe soreness subsides.

If the baby is in great pain during the first day or two after the circumcision, you may give him acetaminophen suspension for infants, 1.25ml (¼ tsp) every 4 hours. Benzocaine spray or an antibiotic ointment (“with pain relief” or “with pain control”) can also be purchased and used as needed for effective topical post-surgical anesthesia.

Call me immediately about excessive bleeding, appearance of pus (greenish-yellow in color and darker than the usual scabs), prolonged swelling, diaper area rashes, or other problem that may be related to the circumcision.

In some babies the pubic area is quite fatty and the penis seems to sink down into the surrounding tissue or to be covered by the skin of the penile shank. If so, during each diaper change, until complete healing (10 to 12 days), briefly press the tissues at each side of the penis down with your fingers to “pop out” the head of the penis so that you can see the rim at the back of the *glans*. This maneuver helps to prevent the skin from growing back over the head of the penis. If you can not get the head to “pop out,” call me.

Occasionally, adhesions may form as the circumcision heals. In that case, it looks as if the skin of the shaft is attached to the head of the penis further out than it should be. They usually occur on the under-side of the penis. Rarely, “skin bridges,” a more permanent form of adhesion, may form, usually on the top-side. Adhesions eventually disappear, but since they may cause irritation and are removed so easily and quickly, I prefer that they be removed. It is not necessary for the parents to do it. The baby’s regular pediatrician or I can do it whenever it is convenient. Skin bridges should definitely be removed. It only takes a few seconds to correct this problem. Many pediatricians do not know how to handle skin bridges, so it would be best to contact me about them.

Lastly, be conscientious about hygiene of the diaper area even after the circumcision heals. Meatal stenosis occurs in 1% or more of circumcised males during the diaper-wearing period as a result of the exposed *glans* being irritated by prolonged contact with soiled and wet diapers. Good hygiene will prevent the meatus (the opening at the end of the penis) from becoming ulcerated, scarred, and stenotic (reduced to a pinpoint opening). If the baby’s meatus becomes stenotic and his urinary stream is weak, report it to his doctor. Meatal stenosis can, on rare occasion, cause urinary obstruction. It is easily corrected by a simple urological office procedure.

I will call you one or two days after the circumcision to check on the infant’s progress. Please call me concerning any questions you may have regarding the circumcision. I can be reached at my home [(713) 729-4982]. If I am not available at home, the line will be answered by “Call Notes.” Leave a message, and Call Notes will page me immediately to notify me that you have left the message. I can also usually be reached by my cellular phone [(713) 882-7859]. If you feel you have an **urgent** problem and must reach me on a Sabbath or holiday, leave a message on my emergency line [(713) 729-7816], and someone will call you back shortly. I can also be contacted by fax [ (713) 729-2290] or by E-mail [max@cybermintz.com].

Mazal tov to you and your family on this great simcha!

Max R. Mintz, M. D.



### COMPLETE CHECKLIST FOR BRIT MILAH

**A. List the following names *exactly* as they should appear on the Brit Milah Certificate.**

- Baby's **Full** English Name:
- Baby's **Full** Hebrew Name:
- Father's **Full** English Name:
- Father's **Full** Hebrew Name:
- Paternal Grandfather's **Full** Hebrew Name:
- Mother's **Full** English Name:
- Mother's **Full** Hebrew Name:
- Maternal Grandfather's **Full** Hebrew Name:

The following three positions should be filled by **Jewish** adults.

- Sandak (a male who holds the baby for circumcision): Name & relationship to baby (if any):
- Kvatter (a male who brings baby from Kvatterin to circumcision area):  
Name(s) & relationship to baby (if any) (Note: Sandak and Kvatter can be the same person.):
- Kvatterin (a female who brings baby from mother into surgery room): Name(s) & relationship to baby (if any):

**B. Others, whose names will not appear on the certificate.**

- Name and relationship to baby (if any) of one who will give the baby a bottle or pacifier during surgery:
  
- Name(s) and relationship to baby (if any) of others who will help the Kvatter and Kvatterin pass the baby into the room for circumcision:
  
- Name(s) & relationship to baby (if any) of others who will hold the baby during the ceremony which takes place after the surgery:

**C. For the baby:**

- Gown - Best is a “pullover,” without buttons, snaps, or pants (**Tip!** Socks usually fall off.)
- Kippah (Yarmulke, skullcap) - not required (**Tip!** It rarely stays on unless tied under chin like a bonnet.)

**D. At the baby’s dressing area:**

- Large jar or tube of regular Vaseline® (An antibiotic ointment is permissible, but not necessary). **Tip!** Avoid greasy hands by using disposable plastic knives or tongue blades to apply Vaseline® onto the gauze squares.
- 3-inch by 3-inch gauze pad squares
- Acetaminophen suspension for infants
- Box of facial tissues (**Tip!** Toilet paper is harder to work with.)
- **(Optional)** Pacifier or bottle of water, sugar water, formula, or breast milk, for use during the anesthetic injection, during surgery, and/or after surgery
- Extra disposable diapers

**E. For the circumcision table:**

- Table, card table, or desk - eating height, **not coffee (too low) or dressing table (too high and rimmed, or gated)**. If the table is very wide, a corner of it will be used for the procedure.
- Tablecloth - (White is traditional, but not required.)
- Pillow (adult size - the flattest, not the fullest) or soft pad
- Pillowcase - (White is traditional, but not required.)
- Two chairs - (The Sandak will sit on one.)
- One extra disposable diaper

**F. For the area where Kiddush and Naming will occur** (may be near the place the surgery takes place - **but not on the surgery table itself, unless the table is much longer than the width of a card table** - to make it easy for all to participate):

- Kiddush cup (or glass wineglass) - **filled almost to brim** with kosher **grape** wine (**not blackberry**, etc. **Tip!** Placing on an unsteady surface or within reach of children invites disaster.)
- Challah (matzah during Passover), kosher, unsliced, - 2 on Sabbath or holiday
- Cover on Challah - napkins are permissible
- Cutting Board for Challah - to prevent damage to furniture
- Challah knife - serrated bread knife is best

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