

Orchidopexy

(OR – kee – o – PEK – see)

What is orchidopexy?

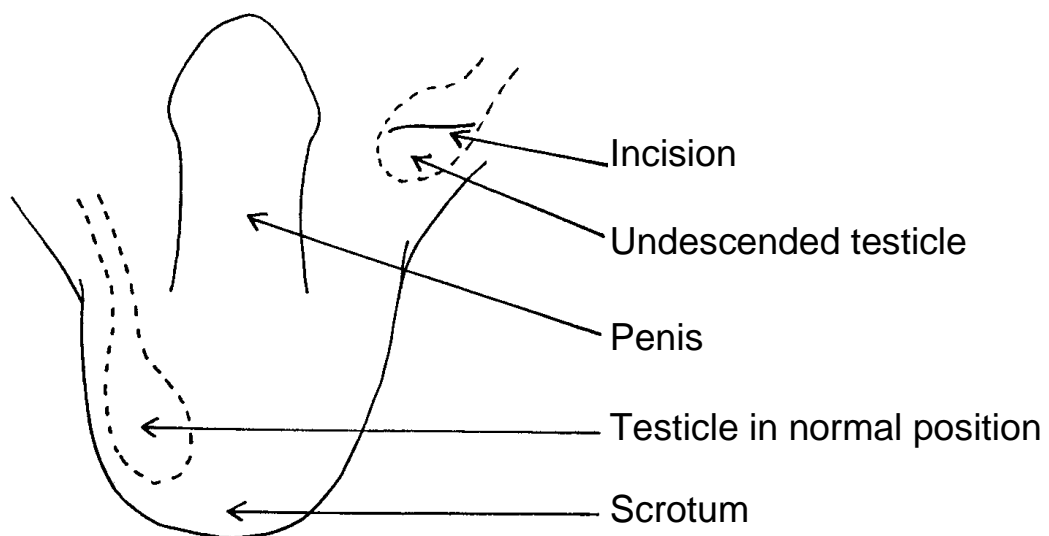
Orchidopexy is surgery to bring a testicle down into its normal position in the scrotum.

Why is this surgery done?

During normal development, the testicles move from the lower abdomen down into the scrotum. This usually happens before birth, or before age one. The testicles need to be in the scrotum for them to function properly.

If one or both of the testicles fail to move down (descend), surgery is done to move the testicle(s) into the scrotum. This surgery will improve your doctor's ability to examine your son's testicles. This exam is an important part of your son's health care throughout his life.

This picture shows one testicle in the normal position, and an undescended testicle with the incision site on the other side.



What happens before surgery?

Your child will have an appointment in the Pre-op Clinic in the Same Day Surgery Unit. A Child Life Specialist and a nurse will help you and your son prepare for surgery. The Anesthesiologist will also see your son. You will be given a checklist of instructions to follow the day before surgery.

On the day of surgery, come to the Same Day Surgery Unit. Your child will change into hospital clothes and walk to the operating room with you.

What happens right after surgery?

Your son will go to the Post Anesthetic Care Unit (PACU) after surgery. In the PACU, your son will be closely monitored until he is fully awake. As soon as possible, the nurse will bring you to the PACU to be with your son.

When your child is fully awake, you and your son will return to the Same Day Surgery Unit or go to the children's ward if your son needs to stay in the hospital. The nurses will continue to check your son's vital signs and incision.

Before taking your son home, the nurses will review how to take care of him as he recovers and arrange a follow-up visit with the surgeon at the clinic.

How can I help my son feel more comfortable?

After surgery, the amount and type of pain is different for each child.

Your son may feel mild pain for 2 to 3 days after surgery. When he is uncomfortable, he may cry or be fussy or irritable. Your doctor may give you a prescription for pain medication. For stronger pain, use the prescription pain medication as directed by the surgeon. For mild to moderate pain, you can give your son 'over-the-counter' pain medication such as acetaminophen (Tempra[®] or Tylenol[®]) or Ibuprofen (Advil[®]) according to the directions on the package.

What can I feed my child?

It is best to offer your child water first, then begin to add other fluids such as breastmilk, juice or milk. He should be able to eat and drink as usual within 12 to 24 hours of surgery.

How do I take care of the incision(s)?

There are small white tapes across the incision(s) and there may be a clear dressing on top. The tapes and dressing should fall off on their own once your son starts bathing. Remove them 1 week after surgery if they have not fallen off, unless otherwise directed by your surgeon.

Keep the incision clean and dry. If your child is not toilet trained, change his diapers often. Once or twice a day, clean the diaper area well with mild soap and warm water (sponge bath), then pat dry. Do not use "baby wipes" on the incision(s). The stitches (sutures) will dissolve on their own and do not need to be removed. The surgeon may want you to apply an antibiotic cream to the incision. Please follow the surgeon's specific instructions.

The scrotum may be bruised or swollen for a few days.

Your son may have a short, full bath 5 days after surgery. Use a mild soap, not bubble bath. Pat the incision(s) dry after his bath. Rinse the incision(s) well with clean running water at the end of the bath and pat the incision(s) dry after his bath.

What activity can my child do?

Your son can return to most of his daily activities as soon as he feels able.

For 7 to 10 days he should avoid:

- any activity that would get dirt onto or near the incision, such as playing in a sand box
- vigorous or rough activities such as contact sports
- toys/activities that require your child to straddle or ride, such as bicycling

Your son should not go swimming or have long baths for 2 weeks after surgery.

What is considered normal after surgery?

- the scrotum may look red, bruised or swollen at first, but returns to usual size and colour as it heals (the redness, bruising and swelling should decrease each day)
- mild to moderate pain that is relieved with pain medication
- mild fever within the first 24 hours after surgery (not above 38.5°C or 101.3°F)

When should I call the hospital?

- your child feels ill or has a fever; a temperature higher than 38.5°C (101.3°F)
- increasing redness, swelling or drainage (discharge) from the incision or scrotum
- constant bright red bleeding from incision(s)
- an open incision
- increasing or severe pain that is not relieved with pain medication
- continuous nausea or vomiting (unable to eat or drink as usual)
- fewer wet diapers, or trouble passing urine

McMaster Children's Hospital 905-521-2100
<p>To call Pediatric Urology:</p> <ul style="list-style-type: none">• Natasha Brownrigg, Nurse Practitioner – ext. 73070• Pediatric Urology offices – ext. 73777 <p>To call General Surgery:</p> <ul style="list-style-type: none">• Dr. Bailey – ext. 73550• Dr. Fitzgerald and Dr. Cameron – ext. 75231• Dr. Walton and Dr. Flageole – ext. 75244• Julia Yole, Nurse Practitioner – ext. 73618 <p>After hours and on weekends, call 905-521-5030 and ask to speak with the Pediatric Urologist or Surgeon on-call.</p> <p>For urgent concerns or if your son looks unwell, bring your child to the Emergency Department at McMaster University Medical Centre. If you live outside of the Hamilton area, take your son to the nearest Emergency Department.</p>