

Surgery for scrotal exploration (children)

Children's Hospital Ward 10

Information for parents/carers

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What is scrotal exploration?

Scrotal exploration is a surgery. We will do make a cut on the sac of skin holding the testicles (scrotum) and look inside to see if there are any problems as detailed in the leaflet. We do this surgery while you are asleep under general anaesthesia. We do this surgery when doctors think you have testicular torsion. This is when the testicle twists and can lose its blood supply. The surgery may show other testicular conditions. What happens during the surgery depends on what the doctors find inside. This leaflet will explain:

- what could be found during the surgery
- what will happen before, during, and after the surgery
- how to care for yourself after the surgery

What is testicular torsion?

The cord that brings blood to the testicle is called the spermatic cord. When it gets twisted this is called testicular torsion. This stops the blood from flowing.

This can cause problems in the scrotum like:

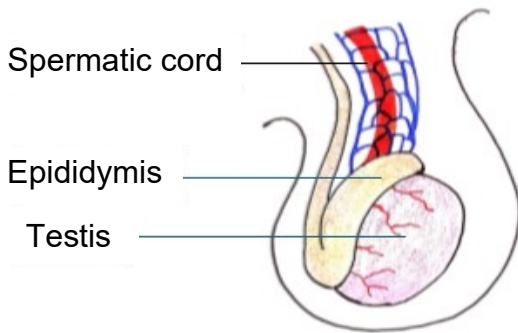
- a lot of pain
- swelling
- and redness

Blood needs to flow to the testicles for them to be healthy. If the blood flow slows down or stops it can damage the testicles permanently. This is why it is very important to get treatment quickly. Testicular torsion can happen at any age. It is most common between 12 and 18 years old.

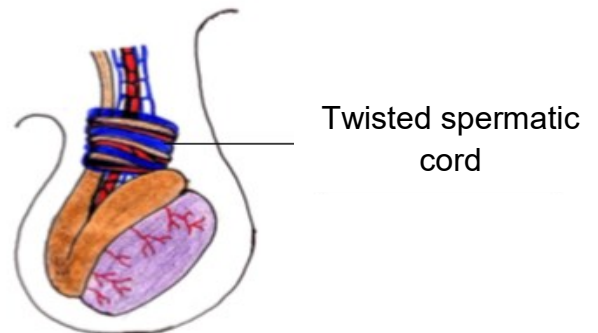
**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.uhleicester.nhs.uk for maps and information about visiting Leicester's Hospitals.
To give feedback about this information sheet, contact uhl-tr.informationforpatientsmailbox@nhs.net

Testicular torsion



Normal testes



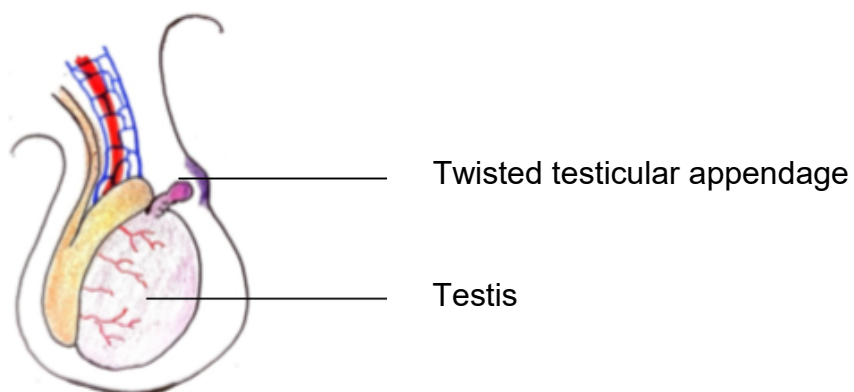
Twisted spermatic cord

What is a torsion of a testicular appendage?

A testicular appendage is a tiny piece of tissue attached to the testicle. It is also called a hydatid. It is leftover from when a baby was developing before birth. Sometimes, this piece of tissue can twist. This stops the blood from getting to it. This can cause:

- pain
- swelling
- redness in the testicle

The problem is common in boys, especially those between 7 and 14 years old.



What happens before the surgery?

We often do this surgery as an emergency. You should not eat or drink before the surgery. A surgeon will talk to you and your parent or guardian to:

- explain the surgery
- answer any questions
- to complete and sign a consent form.

An anaesthetist will also talk to your parent or guardian about:

- the surgery
- and medications that puts you to sleep during the procedure.

Are there any risks or complications?

Every surgery has some possible risks or complications. It is important parents and guardians understand these. The surgeon will explain these in detail to you before the surgery. They will also reassure you that most patients do not experience these. We will send you a consent form that has:

- a detailed explanation of the surgery
- the risks
- the need for surgery

We will send this to you digitally. Please read this form. When it is signed we place into the patient's medical records.

Risks during or right after surgery:

Common risks (more than 1 in 20 patients)

- Removing a testicle (orchidectomy): Sometimes, the testicle might need to be removed if it cannot be saved. Removing 1 testicles does not often affect the ability to have a baby (fertility) in the future.

Rare risks (fewer than 1 in 100 patients)

- Risks during surgery:
 - allergic reactions to medicine,
 - infections,
 - blood clots,
 - heart problems,
 - or kidney problems.

- Damage to nearby structures: The structures around it are at risk of being injured during the surgery.
- Bleeding: Some bleeding is expected in most surgeries. Sometimes the bleeding can be too much. It may need extra treatment like a blood transfusion.

Early risks in the days after surgery:

Common risks (more than 1 in 20 patients)

- Swelling and bruising: You can expect some amount of swelling or bruising after surgery. This often gets better in a few days.
- Usually if the testicle is twisted, both testicles will be fixed with a stitch to prevent the cord from being able to twist again in the future. This is to stop it from happening again and protect both testicles.
- The wound may have:
 - mild redness,
 - swelling,
 - or a burning feeling.
- Infection: We will give you antibiotics for this. It may heal slowly or reopen after it starts to heal. This may need further treatment.

Less common risks (less than 1 in 20 patients)

- Blood may collect inside the scrotum (scrotal hematoma): this sometimes needs surgery to drain it.
- Pus or infected fluid may collect within the scrotum (scrotal abscess): this might need antibiotics or a procedure to drain it.

Late risks in the months or years after surgery:

Common risks (more than 1 in 20 patients)

- Lasting pain: Some people may feel pain that lasts for a long time. Treatments like painkillers or therapy can help.

Less common risks (less than 1 in 20 patients)

- More surgery: Another procedure may be planned or needed based on:
 - the outcome or findings of the surgery
 - or from complications of the surgery



What to expect with the wound?

- Should heal by itself.
- Will have a certain amount of swelling.
- A small amount of oozing can be expected.

Contact Ward 10 for advice or go to the Children's Emergency Department if the wound:

- Starts to bleed and does not stop.
- Becomes more red and painful to touch.
- Starts to discharge pus or opens up.

Contact details

- Your GP. If you are well you do not need to see GP.
- Ward 10: **0116 258 5362**

If you have any concerns about your child's surgery, please contact your consultant's secretary.

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغةٍ أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿੱਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

Previous reference:

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email uhl-tr.equalitymailbox@nhs.net

