

ORCHIDOPEXY SURGERY

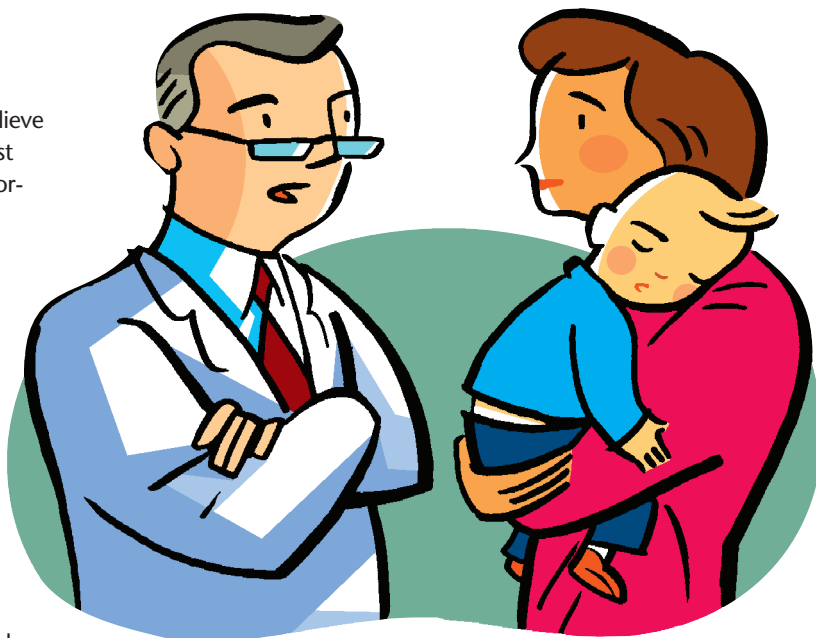
AT CHILDREN'S HOSPITAL OF PITTSBURGH OF UPMC, we believe parents and guardians can contribute to the success of this test and we invite you to participate. Please read the following information to learn about the surgery and how you can help.

Fast Facts About Orchidopexy

- Orchidopexy (*OR-kid-o-pex-ee*) is a surgery to move a testicle that has not descended or moved down to its proper place in the scrotum.
- If a testicle has not completely descended by about 8 months of age, it is unlikely to ever descend on its own and an orchidopexy is needed.
- Your child's surgery will be done under general anesthesia (*an-es-THEEZ-ya*), which means that he will be sound asleep during the surgery.
- Your child may receive caudal (*COD-ool*) anesthesia, which will give pain relief in the area below the waist.
- A pediatric urology doctor—a specialist in surgery of the urinary tract and reproductive organs of children—will do your child's orchidopexy surgery.
- This surgery is done through the Same Day Surgery Center.
- This surgery takes about 1 hour.

What Is An Orchidopexy?

- Before birth, a baby boy's testicles are located high in the belly (abdomen). As the baby develops inside the mother, the testicles drop down through an opening in the wall of the belly and pass into the scrotum, the sac of skin that holds the testicles on the outside of the body. In some cases, the testicle may not drop down on its own and may stay high up in the abdomen or groin area. This condition is called cryptorchidism (*cript-OR-kid-izm*) or undescended (*un-dee-SEND-ed*) testicle.
- Orchidopexy is an "elective" surgery, which means that surgery can be scheduled at the parents' earliest convenience.
- Orchidopexy surgery to repair an undescended testicle is important because:
 - Bringing down the testicle may improve its function and prevent it from being damaged.
 - An undescended testicle has a higher risk of testicular cancer. Although bringing the testicle down into the scrotum may not remove that risk, it will allow doctors to be able to feel any abnormalities in the testicle on routine physical exams throughout your child's lifetime.
 - An undescended testicle may also have a hernia associated with it that will need to be fixed during the same surgery to bring the testicle down.



- Sometimes a surgeon finds that a testicle never formed or lost its blood supply and died before your child was born. In this case, the doctor will explain what you as parents can expect and do for your child as he grows up.

What Is Anesthesia?

General anesthesia makes your child's whole body go to sleep and is needed for orchidopexy repair so that his reflexes will be completely relaxed. General anesthesia makes the surgery easier and safer to do because your child will not feel any pain or have any memory of it.

Caudal anesthesia is given with general anesthesia to block pain in the low back, belly, and lower trunk area. It allows the anesthesia doctor to give a smaller amount of general anesthesia during the surgery, and also provides up to 4 hours of pain relief in that area after the surgery.

Home Preparation

When general anesthesia is needed, there are important rules for eating and drinking that must be followed in the hours before the surgery. One business day before your child's surgery, you will receive a phone call from a surgical nurse between the hours of 1 and 9 p.m. (Nurses do not make these calls on weekends or holidays.) Please have paper and a pen ready to write down these important instructions.

- The nurse will give you specific eating and drinking instructions for your child based on your child's age. Following are the **usual** instructions given for eating and drinking. No matter what age your child is, you should follow the specific instructions given to you on the phone by the nurse.

ORCHIDOPEXY cont'd

For children older than 12 months:

- After midnight the night before the surgery, do not give any solid food or non-clear liquids. That includes milk, formula, juices with pulp, chewing gum or candy.

For infants under 12 months:

- Up to 6 hours before the **scheduled arrival time**, formula-fed babies may be given formula.
- Up to 4 hours before the **scheduled arrival time**, breastfed babies may nurse.

For all children:

- Up to 2 hours before the **scheduled arrival time**, give only clear liquids. Clear liquids include water, Pedialyte®, Kool-Aid®, and juices you can see through, such as apple or white grape juice. Milk is not a clear liquid.
- In the 2 hours before scheduled arrival time, give nothing to eat or drink.
- You may bring along a “comfort” item—such as a favorite stuffed animal or “blankie”—for your child to hold before and after the surgery.

A Parent's/Guardian's Role

The most important role of a parent or guardian is to help your child stay calm and relaxed before the surgery. The best way to keep your child calm is for you to stay calm.

Going To Sleep

Once your child has been registered for the surgery, a nurse, nurse practitioner or physician's assistant and a member of the anesthesia staff will meet with you to take your child's vital signs, weight, and medical history. As the parent or legal guardian, you will be asked to sign a consent form before the anesthesia is given.

- The anesthesia doctor will review your child's medical information and decide which kind of sleep medication he should get.
- If your child is very scared or upset, the doctor may give him a special medication to help him relax. This medication is flavored and takes effect in 10 to 15 minutes.
- If you wish, you may go with your child to the room where the surgery will be done and stay as the sleep medication is given.
 - Younger children will get their sleep medication through a “space mask” that will carry air mixed with medication. Your child may choose a favorite scent to flavor the air flowing through the mask. There are no shots or needles used while your child is still awake.

- Older children may choose between getting their medication through the mask or directly into a vein through an intravenous (IV) line.

- When your child has fallen asleep, you will be taken to the waiting room. If it has not already been done, an IV will be started so that medication can be given to keep your child sleeping throughout the surgery.

After the IV has been placed, your child will be turned onto his side. The lower back near the spine will be cleaned for the caudal anesthesia injection.

The Surgery

- A small incision (*in-SIZZ-yun*) will be made in the groin area over the testicle.
- The doctor will locate the testicle and bring it down into its proper place in the scrotum. A second incision will be made in the scrotum.
- Tiny sutures (*SOO-chers*) or stitches that dissolve on their own will be placed under the skin to make sure that the testicle does not pull back up and out of the scrotum.
- The incision will be covered by a simple dressing that you will be told when and how to change. When the incision is fully healed, most children have only a small scar from the surgery.

- The surgery will take about 1 hour.

While Asleep

While your child is asleep, his heart rate, blood pressure, temperature, and blood oxygen level will be checked continuously.

- Your child may have a breathing tube placed while he is asleep. If a breathing tube is used, your child may have a sore throat after the surgery.

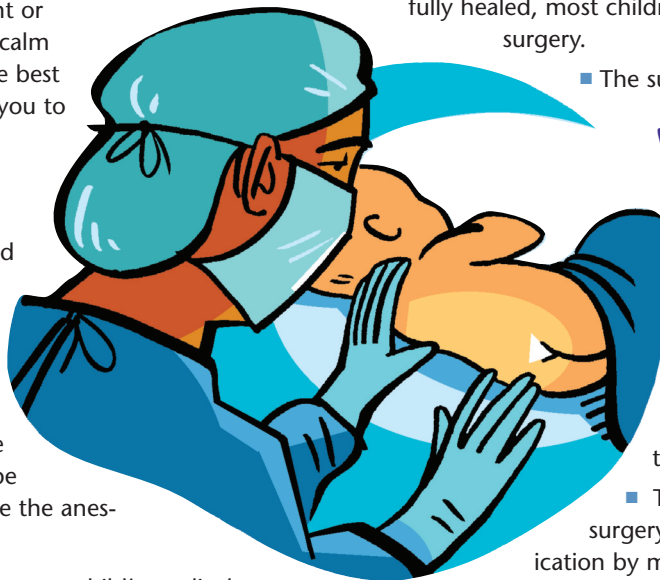
- To keep your child asleep during the surgery, he may be given anesthetic medication by mask, through the IV tube or both.

When the surgery is over, the medications will be stopped and your child will begin to wake up.

Waking Up

When your child is moved to the recovery room, you will be called so that you can be there as he wakes up.

- The doctor who did your child's surgery will meet with you to talk about the surgery and answer any questions you might have.
- The caudal anesthesia will allow your child to wake up comfortably, without any pain from the surgery.
- Your child will need to stay in the recovery room to be watched until he is alert and his vital signs are stable.



ORCHIDOPEXY cont'd

The length of time your child will spend in the recovery room will vary because some children take longer than others to wake up after general anesthesia.

- Children coming out of anesthesia may react in different ways. Your child may cry, be fussy or confused, feel sick to his stomach, or vomit. These reactions are normal and will go away as the anesthesia wears off.
- Children who have received caudal anesthesia may have some weakness, numbness or tingling in their legs. These feelings are normal and should go away within a few hours. You should watch your child closely for a few hours to prevent tripping or falling.



Special Needs

If your child has any special needs or health issues you feel the doctor needs to know about, please call your doctor's office **before** the surgery and ask to speak with a nurse. It is important to notify us in advance about any special needs your child might have.

To contact your child's doctor, please use the numbers below. If you are unable to reach your child's doctor, or if it is after hours, call the Children's Hospital operator at (412) 692-5325 and ask to page the doctor who is on-call for your child's doctor.

Dr. Steven Docimo
Dr. Michael Ost

412-692-7932

Dr. Mark Bellinger
Dr. Francis Schneck

412-687-5437

Going Home

After your child is discharged and goes home, he may still be groggy and should take it easy for the day.

- You will be told how to care for your child's dressing. An ointment may be prescribed for you to use with the dressing.
- Your surgeon will give you instructions for bathing your child after surgery.
- Your surgeon will determine when your child may resume normal activities.
- Your child may begin to eat and drink a little at a time and resume normal eating and drinking as long as he is feeling well.
- If you notice a fever higher than 101.4°F, bleeding or foul smelling drainage from the area around the incision, call the doctor who did the surgery right away.



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Children's North
2599 Wexford-Bayne Road
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Children's South
1300 Oxford Drive
Bethel Park, PA 15102

Children's East
Corporate One Office Park
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Monroeville, PA 15146

To see the list of all available patient procedures descriptions, please visit www.chp.edu/procedures.