

Procedure Information Sheet – Scrotal Exploration

Hosp No. : HKID No.:

Case No.

Name :

DOB : M/F

Adm Date : Contact No.:

1. Introduction

- 1.1. An exploration performed through a surgical incision in scrotum.
- 1.2. Untwist the affected testicle and fix both testicles in scrotum with stitches to prevent further twisting.
- 1.3. If twisted testicle is not viable it may be removed.

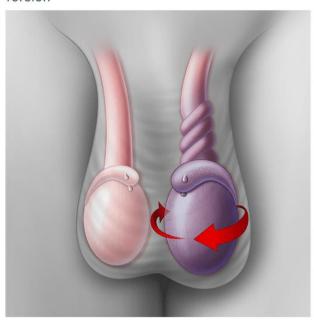
2. Procedural Preparation

- 2.1. A written consent is necessary
- 2.2. Patient will be asked not to eat or drink for 6-8 hours (or instructed by Doctor) before operation.
- 2.3. Inform your doctor of any medical condition (for example diabetes, heart disease, high blood pressure, etc.)

3. The procedure

- 3.1. A procedure under a general anesthesia.
- 3.2. A single incision in the front of scrotum which we can examine both testicles.
- 3.3. If torsion is confirmed, the surgeon will untwist the testicle.
- 3.4. If the testicle remains healthy and viable after untwisting, it will be fixed in the scrotum with non-absorbable stitches to prevent further twisting.
- 3.5. In a small proportion of patients who has a delay in diagnosis, the testicle is severely damaged and may need to be removed.
- 3.6. Also fix the other testicle to prevent twisting in the future
- 3.7. Use the absorbable stitches throughout and normally disappear within two to three weeks.

Torsion



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4. Possible risks or complications

- 4.1. Swelling and bruising of scrotum may last for few days.
- 4.2. May need to remove the affected testicle if it is severely damaged and not viable.
- 4.3. Haematoma around the testicle which may take time to resolve or need surgical drainage.
- 4.4. Infection in wound requiring antibiotics or surgical drainage.
- 4.5. Late atrophy of the testicle.
- 4.6. Reduced fertility due to testicular damage caused by temporary interruption of its blood supply.
- 4.7. This list is not exhaustive and rare complications cannot be listed.

5. Remark

5.1. This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information, please contact your doctor.

6. References

6.1.	The British Association	of Urological Surgeons	(BAUS) Website.

I acknowledged the above information concerning the operation or procedure. I have also been given the opportunity to ask questions and received adequate explanations concerning the condition and treatment plan.

Patient/ Relative Signature:	
Patient/ Relative Name:	
Date:	
Date.	

