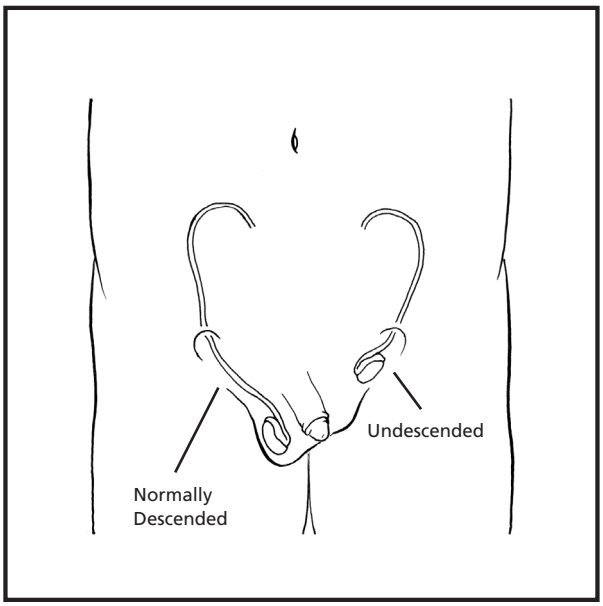
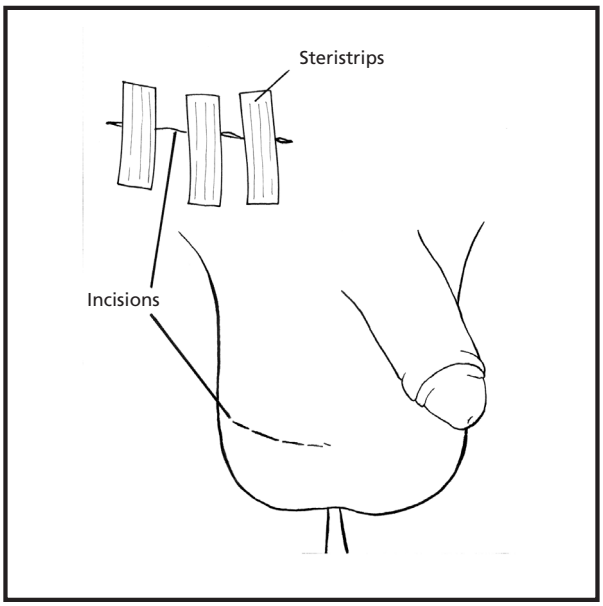
Let's Talk About...

Orchiopexy

(Surgery for Undescended Testicle)



Undescended Testicle



Undescended Testicle Repaired

Your son is having an operation called **orchiopexy** (or-key-oh-PEX-ee) to repair an undescended testicle. The testicles develop in the abdomen and then normally move into the scrotum by the time a baby is born. This movement is necessary for safe and normal development of the testicles as a child grows. Sometimes, one or both testicles stay higher in the abdomen and are not found in the scrotum at birth. Some of these eventually move down into the scrotum without surgery. If this does not happen, your child will need an operation to bring the testicles into proper position in the scrotum. Your child can go home on the same day of the operation.

Diet

When can my child eat after surgery?

After your child wakes up from surgery, he will start to drink clear liquids. These are easy to digest. Clear liquids include Pedialyte™, water, apple juice, Gatorade™, Popsicles™, and plain Jell-o™. Most babies can take a bottle or resume breast-feeding. Your child may resume a normal diet after discharge from the hospital. You should start feeding him soft, easily digested foods. Try to stay away from high fat or greasy foods like hamburgers and pizza for 24 hours after surgery.

What should I do about nausea and vomiting?

Anesthesia may cause your child to feel nauseated and he may vomit for up to 24 hours after surgery. Sometimes car movement or pain medications may cause nausea. You can help control these problems by encouraging your child to lie still and decrease movement. If he has trouble with nausea and vomiting, feed him clear liquids again for a while then slowly work up to a normal diet. If your child vomits, give his stomach 30-60 minutes to settle

down and then start feeding him clear liquids. It is very important for your child to drink after surgery so he doesn't get dehydrated (not enough water in the body), but it is fine if he does not eat much for a day or two. If he vomits frequently or continues to vomit for several hours call your doctor for instructions.

How will I know if my child is drinking enough?

After surgery, your child may have a lower level of fluid in the body. Some signs of not having enough to drink include dark yellow urine, diapers much drier than usual, a dry mouth (no spit), chapped lips, or the soft spot on a baby's head will sink inwards. If any of these happen, give your child more fluid to drink. He should return to a normal pattern of urination (peeing) within 24 hours after surgery. A baby should have 6 to 8 wet diapers in 24-hours and an older child will urinate (pee) every 6 to 8 hours.

Pain

How can I tell if my child is in pain?

We want your child to be comfortable, but no surgery is pain free. Some children can tell us about their pain. Young age or developmental delay may prevent this. Children may communicate they are in pain other ways. The child might moan, whimper, make a face of pain, cry, be irritable, be very quiet, have no appetite or not sleep. For all children it is important to offer comfort and listen to their concerns.

What medicines does my child need?

Give your child ibuprofen three times a day for the first 72 hours after surgery. This is an over-the counter medicine. You do not need to wake your child to keep the dosing schedule. The doctor may prescribe a stronger prescription medication to be used in addition to ibuprofen, as needed. If this is not enough, call the surgeon's office and speak to the nurse. If this is after hours, call the hospital to reach the doctor on call.

Wound Care

How should I care for the wound?

The surgeon will close the upper wound with sutures under the skin and Steri-Strips® over it. The Steri-Strips® should fall off about 7–10 days after surgery. You can help remove them when they start to peel off. Some patients have an upper wound. If there is a bandage over the upper wound, you may remove it after 24 hours. The stitches on the scrotum dissolve on their own and do not need to be removed. Keep Vaseline over these stitches on the scrotum for 10 days.

How much drainage is normal?

Swelling and bruising around the incision and in the scrotum are expected. A small amount of fluid or bloody drainage is expected. if the incision is dripping blood you should apply pressure and call your child's doctor.

When can the dressing come off?

If there is an outer bandage (over the Steri-Strips®) you can remove it about 24 hours after surgery.

Bathing/Showering

When can my child take a bath or shower?

Do not bathe your child in a bath or shower for the first 48 hours after surgery. Clean your child with a moist washcloth instead. After the first 48 hours, you can use wipes and start regular bathing. For the first week, keep the tub fairly shallow so that the wound (surgery site) in not under water. It is also OK to hold your child in the shower if this works better. Either of these will help healing and reduce swelling. We recommend washing twice a day for the first week.

Activity

How active can my child be?

For the first the day, because of anesthesia (the medicine your child received during surgery), your child should not do any activities that require balance such as riding a bike or scooter or playing

on playground equipment. He should not straddle any toys with narrow bars or seats, such as a bicycle or walker, for four weeks after surgery. You can place your child normally in a car seat or high chair. After this he can do activities as tolerated. When he is taking a narcotic for pain control (such as oxycodone) your child can become sleepy or dizzy. Watch your child and prevent him from falling.

Behavior

What is normal behavior after surgery?

It is normal to see behavior changes after surgery. Some examples of changes include acting like a younger child (bed-wetting or acting out), changes in sleeping and eating patterns or nightmares. Being patient with your child will help reduce these changes. Comfort your child and help him feel that he is safe. Understand that your child's routine has been upset by surgery. Most changes in behavior last only 1 to 2 weeks. If they last longer than four weeks, call your pediatrician.

Follow-up Care

What should I watch for and when should I do?

If your child has any of the following, call your child's doctor:

- **Wound:** The surgery site usually swells and becomes red for about ¼ inch around the edges. If you see more redness, pus, or drainage, or your child has persistent pain, call your child's doctor.
- **Temperature:** Mild fevers are common after surgery. Call your child's doctor if your child's temperature is over 101 degrees.
- **Bleeding:** Small amounts of bleeding are normal, but if there is active bleeding (dripping) place a clean dry washcloth on the bleeding area and apply gentle firm pressure for 10–15 minutes as you would for a nosebleed and call your child's doctor.
- **Dehydration:** Call your child's doctor if your child has signs of worsening dehydration (not drinking, dry mouth, fewer than 6 to 8 wet diapers, lack of tears).
- **Diarrhea or constipation:** Your child has diarrhea or constipation for more than 2 days.
- **Pain:** Your child has more pain or you cannot console him.
- **Breathing:** If your child has shortness of breath or difficult breathing, go to an Emergency Room or call 911.

Who Should I Call?

- 8:30–5:00 PM, Monday – Friday:
  Please call the doctor's office at 801.662.5555 and select the option to speak with the nurses.
- If the doctor's office is closed, please call the Operator at Primary Children's Hospital at 801.662.1000 and ask for the urology resident on call.
- If there is an emergency, please go to the nearest emergency room.

How and when should I schedule a follow-up appointment?

Please call the office and make an appointment to have your child seen by the surgeon 4 to 6 weeks after surgery. If you are due for a regular well-child visit with your pediatrician or if your doctor approves, you may be able to have the follow-up check with your regular doctor closer to home.

Special Instructions:

- If your child has difficulty breathing, excessive bleeding or if you are unable to arouse your child go immediately to the closest emergency room or call 911.
- Watch your child during the ride home. He should be in a child safety seat with proper restraints. He may sleep but his head and neck should not fall or slump far forward. This may cause his airway to become blocked or cause difficulty with breathing.
- Please contact the doctor's office if you have any other concerns about your child's healing. If there is a specific concern about the appearance

of the healing incision, sometimes we may be able to have you take a digital photo and share that with us. Talk with the nurse first and decide if this is needed.

Thank you letting us share in your son's care. We want to provide him the very best care possible.

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Pediatric Education Services, 801.662.3500 | Rev. 10/12, LTA520407984 | *Available in Spanish*