



# *History & Physical Examination of Genitourinary system*

# Undescended Testis

- **Developed** → in the posterior abdominal wall from the nephritic tissue.
- **Blood supply** →
  - ✓ **Artery**: Abdominal aorta.
  - ✓ **Vein**: right / drain into inferior vena cava. Left / into renal vein.
  - ✓ **Lymphatic**: drain into para-aortic glands
- **Testis guided by** → gubernaculum , left testis descend before the right and most testis reach the scrotum by the time of birth .
- **Absence of both testes from the scrotum cause by failure to descend called** → cryptorchism
- **Undescended testis increase risk for** →
  - Malignancy; fixing the testis in the scrotum (Orchiopexy ) does not eliminate this risk.
  - risk for ipsilateral inguinal hernia
  - ipsilateral torsion

	True unseconding	Ectopic	Retractile
Definition	If the testis stopped anywhere in the <u>normal pathway</u> .	If the testis stopped <u>rather than the normal pathway</u> .	the testis <u>descend normally</u> in at birth but goes up again
Presentation	Empty scrotum	Empty scrotum	Empty scrotum , <u>appear and disappear again</u> → due to hyperactivity of the <i>cremasteric</i> muscle
	Palpable → you can feel it in the groin area Not palpable → you cannot feel it in the groin area		-----
Diagnosis	The gold standard → <b>Laparoscopy</b> <b>MRA</b> → it doesn't reach the diagnostic accuracy of laparoscopy.		
Management	<ul style="list-style-type: none"> <li>Palpable → Open Orchiopexy</li> <li>Not palpable → 1- Laparoscopy-assisted Orchiopexy 2- Two stages Fowler-Stephens Orchiopexy</li> <li>The treatment should be done at the age of <b>6-12monthsto</b> give a chance for spontaneous testicular descent after birth.</li> </ul>		<b>Surgery is unnecessary</b> → ultimately descend properly <i>before/ or at puberty</i>
History	<u>Absence of one or both testes from the scrotum</u> , scrotum has not developed	Absence of a testis is the common presenting , but the patient also may complain <u>from pain or discomfort</u> during physical activity due to → the testis compressed	The parents notice that the tactical ( <b>frequently/ intermittent both</b> ) is absent from the scrotum. <i>The testis appear normal when child warm and relax</i>
Examination	<b>The scrotum</b> → <b>Both undescended</b> : small and hypoplastic <b>Only one</b> : asymmetrical <b>The site</b> → could be a <b>palpable</b> or <b>not palpable</b>		<b>Scrotum</b> normally developed. If the testicle can be persuaded into the scrotum and it <b>rests there</b> when you let go , it is retractile



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