	Document Scope: Departmental	
	Document Type: Clinical Practice Guideline Approved on 2019-12-11 Next Review Date: 2021-12-10	
	<b>Management of Undescended Testicles</b>	Version: 2

## Introduction

### Purpose

Testicles are considered undescended when they fail to spontaneously migrate down into the scrotum after birth. Boys with bilateral, non-palpable testes, associated or not with hypospadias, require immediate consult of appropriate specialists, including Endocrinology, Urology, Gynecology and/or Genetics for evaluation of a possible disorder of sex development.

### Target Users

- Nurses, nurse practitioners, staff physicians, residents, fellows, and primary care physicians

### Target Patient Population


- **Inclusion:** Intended for boys 2 months of age or older who present with one testicle that is not palpable within the scrotum.
- **Exclusion:** Not intended for use in boys with bilateral undescended testicles.

### Definitions

- **Retractile testes:** hypermobile testes; are descended testes that easily move back and forth between the scrotum and the abdomen. Retractable testes are normal testes that have been pulled into a suprascrotal position by the cremasteric reflex. These testes can be brought into a dependent scrotal position and will remain there if the cremasteric reflex is overcome.

### Referrals

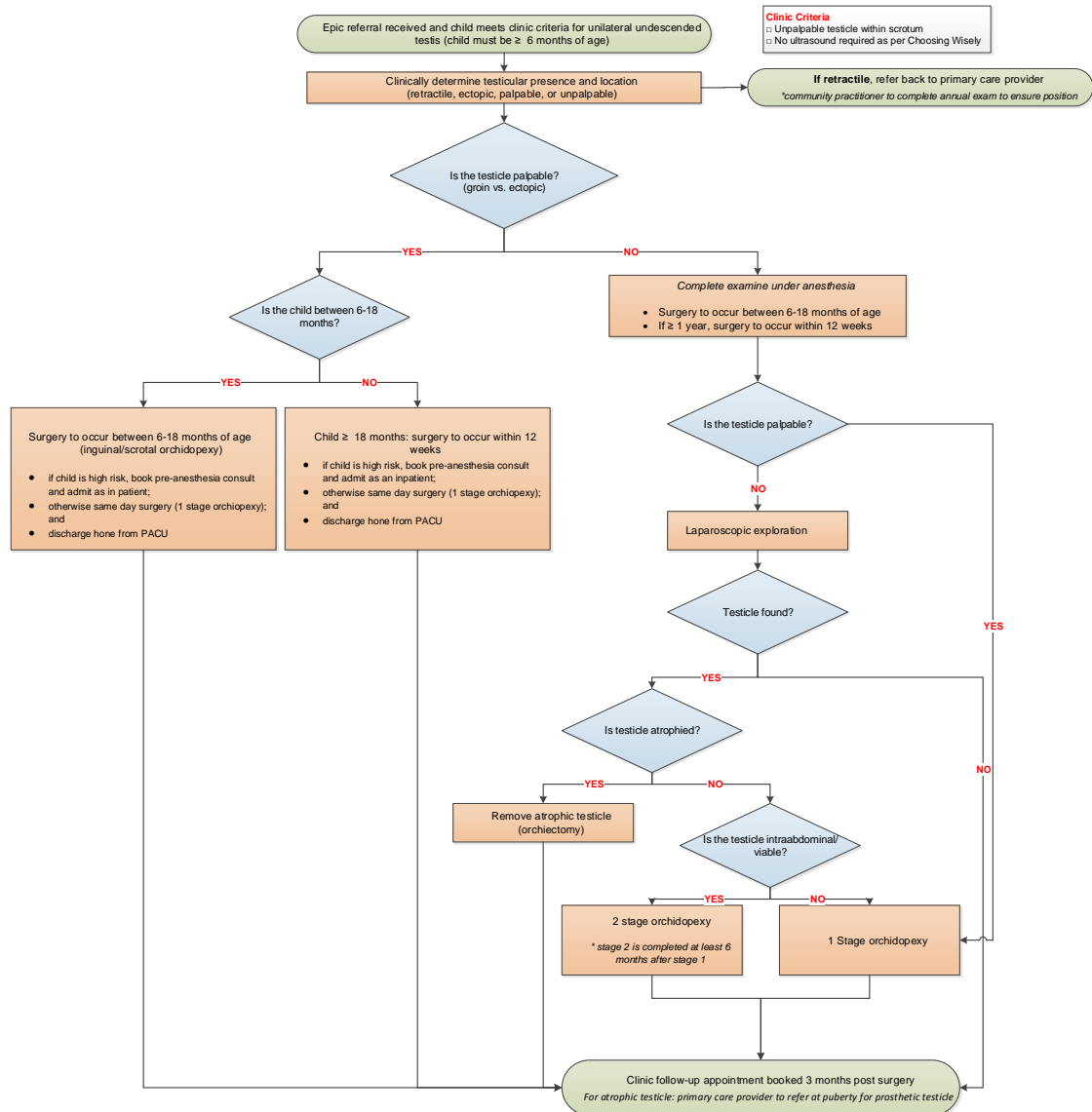
- Primary care physicians should refer boys two months of age or older who do not have spontaneous testicular descent to a surgical specialist for evaluation. It is expected that the testicles should descend by 6 months of age.
- Scrotal ultrasounds should not be completed prior to referral. These studies rarely have any impact on decision making.
- Retractable testicles do not need to be referred for surgical treatment however primary care physicians should assess the position of the testes annually to monitor for secondary ascent.


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## Clinical Recommendations

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### Management of Unilateral Undescended Testicles



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## Guideline Group and Reviewers

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## References

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### Attachments:

[AAP orchidopexy.pdf](#)

[AUA guidelines orchidopexy.pdf](#)

[CUA-PUC guidelines.pdf](#)

[pathway\\_aug 9.pdf](#)

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