Hydrocele Repair
Caring for your child after surgery

What is a hydrocele?
A hydrocele is a collection of fluid around the testicle in the scrotum. It is caused by an opening between the abdomen (belly area) and the scrotum. Fluid drains from the abdomen into the scrotum where it builds up. You may notice that the hydrocele swelling goes down when your child is resting or lying down. When your child gets more active or cries, the hydrocele may get larger. This is normal.

How is a hydrocele diagnosed?
Your child’s healthcare provider can tell whether your child has a hydrocele during a physical exam. Hydroceles are only seen in boys.

Why does the hydrocele need to be repaired?
Most hydroceles go away on their own after a few months as the body absorbs the fluid. If a child still has a hydrocele when they are 1 or 2 years old, surgery is planned because it will not go away on its own.

What can I expect from surgery?
An incision is made in the inguinal space (near the crease between the abdomen and leg) and the fluid is drained. The opening into the abdomen is then closed.

When will my child be able to go home?
Most children go home the day of surgery. If your child has another medical condition, they may need to stay overnight.

When can my child eat?
- It is common for children to have nausea and vomit (throwing up) after surgery. Give your child clear liquids slowly to help.
- When fully awake, your child may have clear liquids like 7UP, Jell-O, Popsicles and apple juice.
- If your child is not sick to their stomach or throwing up and is fully awake, they can start their regular diet.

How do I care for the surgery site?
- The incision(s) should look clean and dry. There will be some swelling around them, which should go down in a few days.
- The groin incision(s) may be covered with a liquid plastic glue or small pieces of tape (Steri-Strips) and a clear bandage (dressing). These should be left in place.
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- If the dressing curls up at the ends, it can be trimmed. A little blood under the bandage (dressing) is normal.
- No bathing for the first 2 days after surgery. Your child can shower the first day after surgery.
- If a dressing is in place, this can be removed in 1 week. Bathing will help loosen them. If your child has glue on the incision area it will peel on its own.
- The scrotum may be blue and swollen to twice the normal size after surgery. This may take several weeks to return to normal size. If it does not you should bring your child back to clinic.
- Some children should not soak in a pool, hot-tub, or swim outdoors (i.e. ponds, lakes or ocean) for 1 week. The surgeon will let you know if this applies to your child.

How much activity can my child do?
Watch your child closely on the day of the surgery.

If your child is younger than 2 years of age:
- Younger children will limit their own activities, in terms of crawling and walking.
- Avoid any straddle activities with your child that would increase pressure between their legs for 1 week. This includes:
  - Holding the child on your hip
  - Bouncing the child on your knee
  - Baby-wearing devices
  - Bouncer toys that require a harness
- Car seats and stroller straps are safe and should be used as instructed by the manufacturer.

If your child is 2 years of age or older:
Avoid strenuous activities, rough-housing or activities that involve straddle-activity. A good rule of thumb for your child is to keep “both feet on the ground” for 1 week. Types of activity to avoid for 1 week:
- Jungle-gyms and climbing
- Gym class
- Bikes and trikes
- After-school sports

When can my child return to school?
Your child may return to school when they no longer need narcotic pain medications or frequent daytime over-the-counter pain medications.
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To Learn More
- Urology
  206-987-2509
- General Surgery
  206-987-0237
- Ask your child’s nurse or doctor
- www.seattlechildrens.org

Free Interpreter Services
- In the hospital, ask your child’s nurse.
- From outside the hospital, call the toll-free Family Interpreting Line 1-866-583-1527. Tell the interpreter the name or extension you need.

What should I give my child for pain?
- After a surgery your child will likely feel pain in the groin and scrotum. We partner with you and your child to relieve pain as completely as possible. You know your child best. We encourage you to take an active part in your child’s recovery. No matter the level of your child’s pain, believe he is hurting and respond right away. Your child should feel better the next day.
- Effective pain control will help your child feel better and heal faster. Start by giving your child acetaminophen (Tylenol) or ibuprofen (Advil or Motrin) for pain. Use this medicine only if recommend by your child’s healthcare provider. Check with the healthcare provider first before giving any type of medicine to your child. If your child’s healthcare provider prescribed medicine for pain, use this if acetaminophen or ibuprofen does not help.
- Tylenol and prescription pain medicine may not be safe to use at the same time. Check with your child’s healthcare provider or pharmacy if you have any questions.
- In addition to medicine for pain, you can also help your child cope by distracting them with music, games, TV or videos.

When should I call a doctor?
If your child is having any problems, call their specialty surgery clinic during the day. After hours, call 206-987-2000 and ask the hospital operator for the General surgeon on call or Urology surgeon on call depending on which service did your child’s surgery. Please call us if your child has any of these warning signs:
- Fever higher than 101.5°F (38.6°C) for more than 24 hours
- Redness, swelling or discharge (fluid) from the wound
- Rapid swelling or bleeding at the site of surgery
- Severe, constant pain at the surgery site
- Inability to urinate 8 to 12 hours after surgery
- Vomiting

Seattle Children’s offers interpreter services for Deaf, hard of hearing or non-English speaking patients, family members and legal representatives free of charge. Seattle Children’s will make this information available in alternate formats upon request. Call the Family Resource Center at 206-987-2201.

This handout has been reviewed by clinical staff at Seattle Children’s. However, your child’s needs are unique. Before you act or rely upon this information, please talk with your child’s healthcare provider.

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