

Radical Inguinal Orchiectomy

Pre-Op Guide for a Testicular Mass

Goal: Remove the testicle through a small groin incision, send it to pathology, and use pathology, labs, and imaging to guide the next steps. This is usually outpatient surgery.

What surgery am I having?

A radical inguinal orchiectomy removes the testicle through a groin incision. This is the standard approach when a testicular mass is concerning for cancer.

The testicle is not removed through the scrotum when cancer is suspected.

Before surgery

- Exam and review of symptoms
- Scrotal ultrasound
- Blood work, including tumor markers such as AFP, beta-hCG, and LDH
- Possible chest, abdominal, or pelvic imaging
- Medication review, especially blood thinners

Fertility planning

If you may want children in the future, consider sperm cryopreservation before surgery. This is done through an outside fertility clinic or sperm bank.

This is especially important if you have one testicle, known fertility issues, or may need chemotherapy, radiation, or additional treatment later.

Testosterone

Most men with one healthy remaining testicle continue to make enough testosterone after surgery.

A small number of men can have a drop in testosterone. Symptoms may include low energy, low sex drive, erectile changes, hot flashes, mood changes, or persistent fatigue. We can check morning hormone labs if needed.

Testicular prosthesis

Some men are interested in a testicular prosthesis for cosmetic reasons. If this is something you want to consider, please discuss it before surgery.

Recovery planning

Plan for recovery similar to a minor hernia-type groin surgery.

No heavy lifting, strenuous exercise, running, squats, or heavy yard work for about 2-3 weeks. Walking and light daily activity are okay.

Day of surgery

Most patients go home the same day. You will need someone to drive you home. Do not drive, make important decisions, or drink alcohol for 24 hours after anesthesia or while taking narcotic pain medication. Follow the surgery center or hospital instructions about arrival time, eating, drinking, and medications.

Follow-up plan

Pathology often returns in about 1-2 weeks and will be sent to you when available. Formal follow-up is usually around 4 weeks after surgery. If tumor marker labs are needed, please complete them before that visit.