WELCOME TO ALL




GOOD
Morning

A 6 years old boy with painful inguinal swelling



Dr. Zinat Amina Binaka
Intern Doctor
KuMCH

Particulars of the patient

- **Name** : Raihan
- **Age** : 6 years
- **Sex** : Male
- **Religion** : Islam
- **Address** : Kushtia Sadar, Kushtia
- **Date of admission** : 11/03/26
- **Date of examination** : 12/03/26

Chief Complaints

- Painful swelling in the right inguinal region for 2 days
- Multiple episodes of vomiting for 1 day
- Abdominal discomfort for 12 hours

History of present illness

According to the statement of the mother, he was apparently well 2 days back, then he developed sudden severe pain in the right groin associated with a swelling in the right inguinal region.

The swelling gradually became tense and painful, causing marked irritability and discomfort. The child complained of persistent pain localized to the right inguinal region & cried excessively.

Subsequently, he developed multiple episode of non bilious vomiting and refuse to take food or fluid. On query, mother previously noticed that both hemi scrotum were smaller and empty in comparison to other boys of same age and there were faint small swelling in both inguinal region.

Mother never noticed intermittent fullness of any hemi scrotum. The swelling was previously painless & did not interfere with his daily activities. There was no history of trauma to the groin, fever, diarrhoea or urinary complaints.

But for the last 2 days swelling became severely painful and the condition of the child continued to worsen.For this reason, he was brought to the hospital for further evaluation and management.

History of past illness

- No significant medical and surgical illness

Drug and treatment history

- Antibiotics
- Analgesic
- Antiemetic

Personal history

- Nothing significant

Family History

- Nothing significant

Birth history

- Full term
- Normal vaginal delivery
- No birth trauma

Socio economic history

- He comes from a middle income family
- Drinks arsenic free water
- Use sanitary latrine

Immunization history

- Vaccinated as per EPI schedule

General Examination

- **Appearance** : Ill looking and irritable
- **Co-operation** : Non co-operative
- **Nutritional Status**: Average
- **Anemia** : Moderate
- **Jaundice** : Absent
- **Cyanosis** : Absent
- **Clubbing** : Absent

- **Koilonychia** : Absent
- **Leukonychia** : Absent
- **Edema** : Absent
- **Dehydration** : Absent
- **Temperature** : 101° F
- **Pulse** : 110bpm
- **Respiratory rate** : 24 breaths/min

Examination of inguinoscrotal region

Inspection

- An oval swelling was present in the right inguinal region
- Both hemi scrotum were empty
- Size approximately 5*4 cm
- Surface appears smooth
- Overlying skin was reddish in colour
- No visible cough impulse

Palpation:

- Local temperature was raised
- Right sided swelling was extremely tender
- Consistency was firm and tense
- Irreducible
- Expansile cough impulse absent
- No fluctuation
- No transillumination
- About 2*2 cm oval non tender lump was found at left inguinal region

Percussion

- Dull

Auscultation

- Bowel sound was absent over the swelling

Abdominal Examination

Inspection

Shape	: Scaphoid
Flanks	: Not full
Umbilicus	: Centrally Placed, Inverted
Skin	: Normal
Visible peristalsis	: No visible peristalsis
Hernial Orifices	: Intact

Palpation

- Mild generalized abdominal tenderness
- No guarding
- No rigidity
- No palpable abdominal mass

Percussion

- Tympanic

Auscultation

- Bowel sound present

Examination of other system

- Reveals no other abnormality

Salient features

Raihan, 6 years old boy, hailing from Kushtia Sadar was apparently well 2 days back, then he developed sudden severe pain in the right groin associated with a swelling in the right inguinal region .

He also had multiple episodes of non bilious vomiting. Mother previously noticed that both hemi scrotum were smaller in comparison to other boys of same age and empty. There were faint small swelling in both inguinal region .

But for the last 2 days the swelling gradually became tense and painful, causing marked irritability and discomfort. There was no history of trauma to the groin, fever, diarrhoea or urinary complaints.

As the swelling remained painful and the child condition continued to worsen, he was brought to the hospital for further evaluation and management.

On general examination the child was Ill looking and irritable, body build average, temp -101°F, pulse -110bpm, resp. rate- 24 breaths/min. He was moderately anemic. Cyanosis and jaundice were absent.

On local examination a tense, tender, irreducible swelling was present in the right inguinal region, local temp. over the swelling was raised, consistency was firm, cough impulse was absent. Fluctuation and transillumination test were negative. About 2*2 cm oval non-tender lump was found at left inguinal region. Both hemi-scrotum were empty.

Others sysmetic examination reveals no abnormalities.

Provisional Diagnosis



Provisional Diagnosis

Bilateral undescended testis with torsion of right testis

Differential Diagnosis



Differential Diagnosis

- Obstructed right inguinal hernia
- Infected encysted hydrocele of right cord

Investigations

CBC	Result	Ref. Range
Hb	9.4 g/dl	12-16g/dl
TC	16.3 K / µL	5.5-14.5x10^3 /uL
Platelet	323 x 10^3 / µL	150-450 x 10^3 /uL
RBC	4.38 x 10^6 /µL	3.5-5.5 x 10^6 /uL
Neutrophil	58%	25-66 %
Lymphocyte	36%	25-62 %
Eosinophil	01%	00-03 %
ESR	66 mm in 1st hr	0-10

CRP

Test	Result	Unit	Reference Value
C-Reactive protein	47.2	mg/L	6.0

Bilirubin Total

Test	Result	Unit	Reference Value
Bilirubin Total	0.73	mg/dl	Adult upto : 1.1 New-born upto : 13.3

USG OF WHOLE ABDOMEN

LIVER
Normal in size (about 8.7 cm along the mid clavicular line with homogeneous parenchyma. No intrahepatic biliary channels are dilated. No focal Iesion.

GALL BLADDER: Normal in size with regular outline, Its wall thickness appears normal.
No stone or soft tissue mass seen.
C.B.D: Not dilated
PANCREAS: Normal in size with homogeneous and uniform echotexture.
Main pancreatic duct is not dilated.

SPLEEN: Normal in size with homogeneous texture
KIDNEY: Both are normal in size (right kidney is about 6.0 cm & left is 6.1 cm in It's length) with normal shape and position with well defined cortex and medulla. No stone or feature of obstruction seen.

URINARY BLADDER: Regular in outline. No significant intravesical lesion.
PROSTATE: Normal for age.
: No ascites or lymphadenopathy.
**** A hernial sac noted into the right inguinal region measuring (about 0.76 cm). Through which bowel loops are descend into inguinal canal but not move during cough impulse.**

IMPRESSION: Suggestive of right sided obstructed inguinal hernia.

Management

- NPO
- IV fluid administration
- Intravenous broad spectrum antibiotics
- Antipyretics
- Analgesics
- Monitoring vital signs

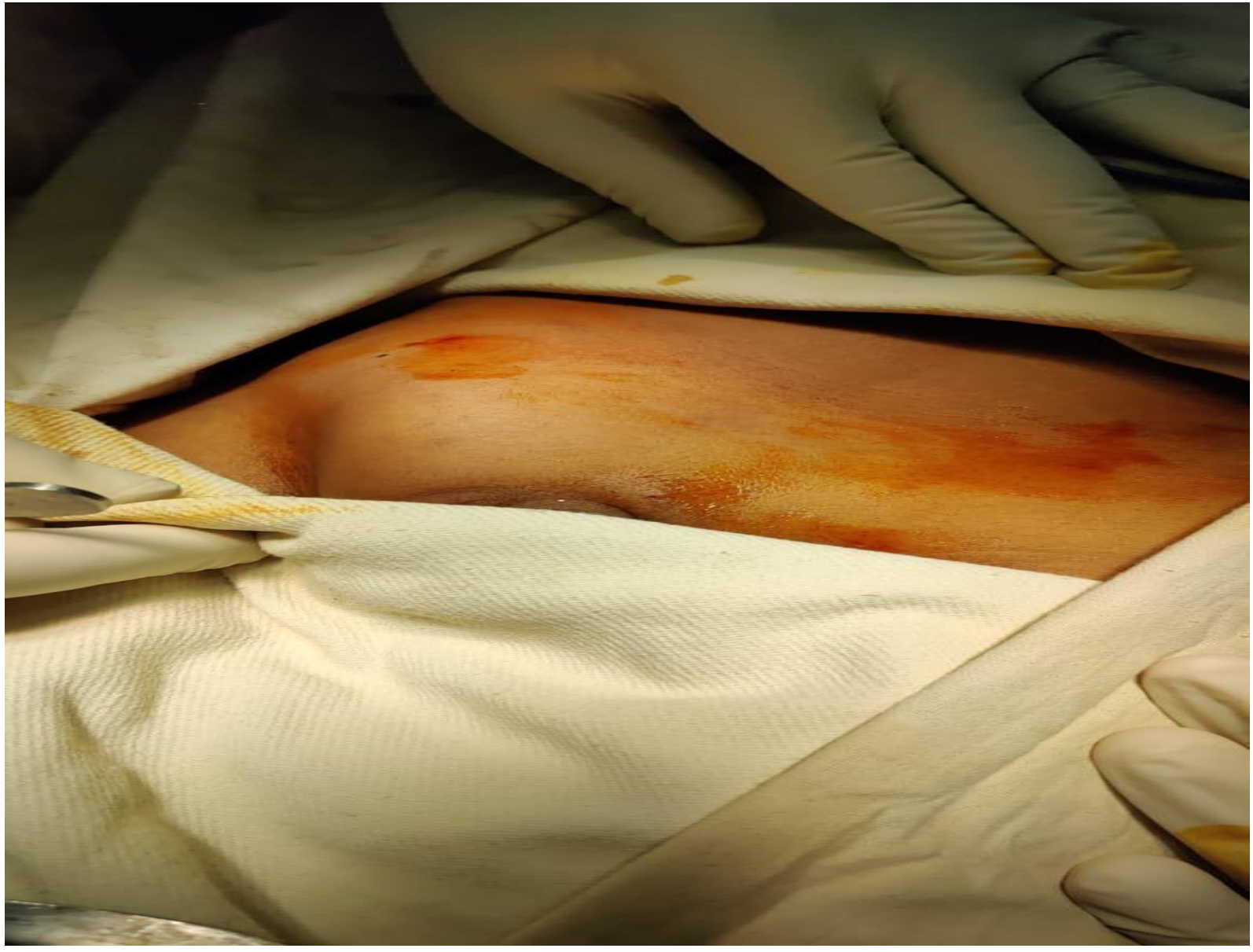
Definitive management

Operation

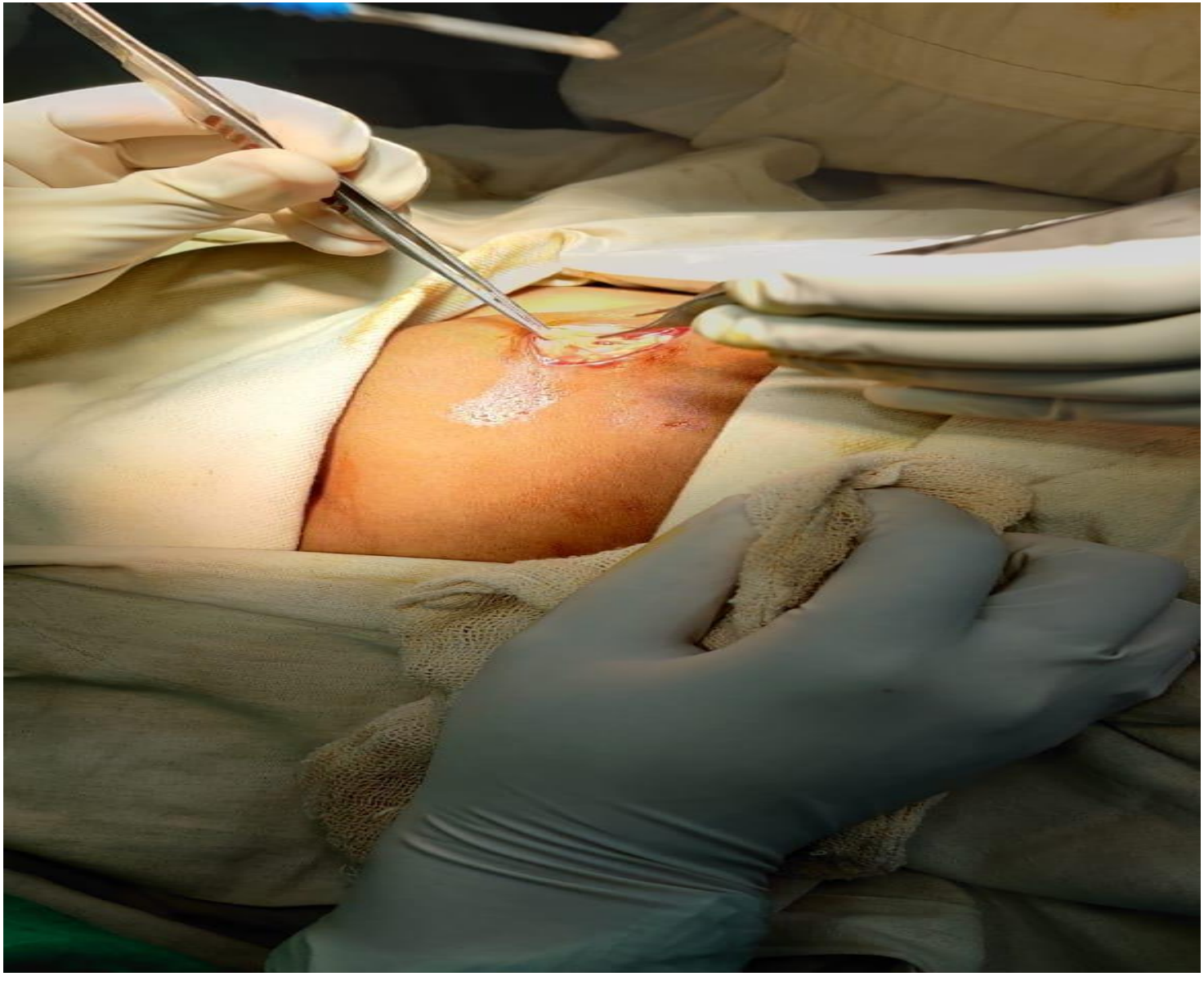
Date of Operation : 12/03/2026

Time of Operation : 11 A.M

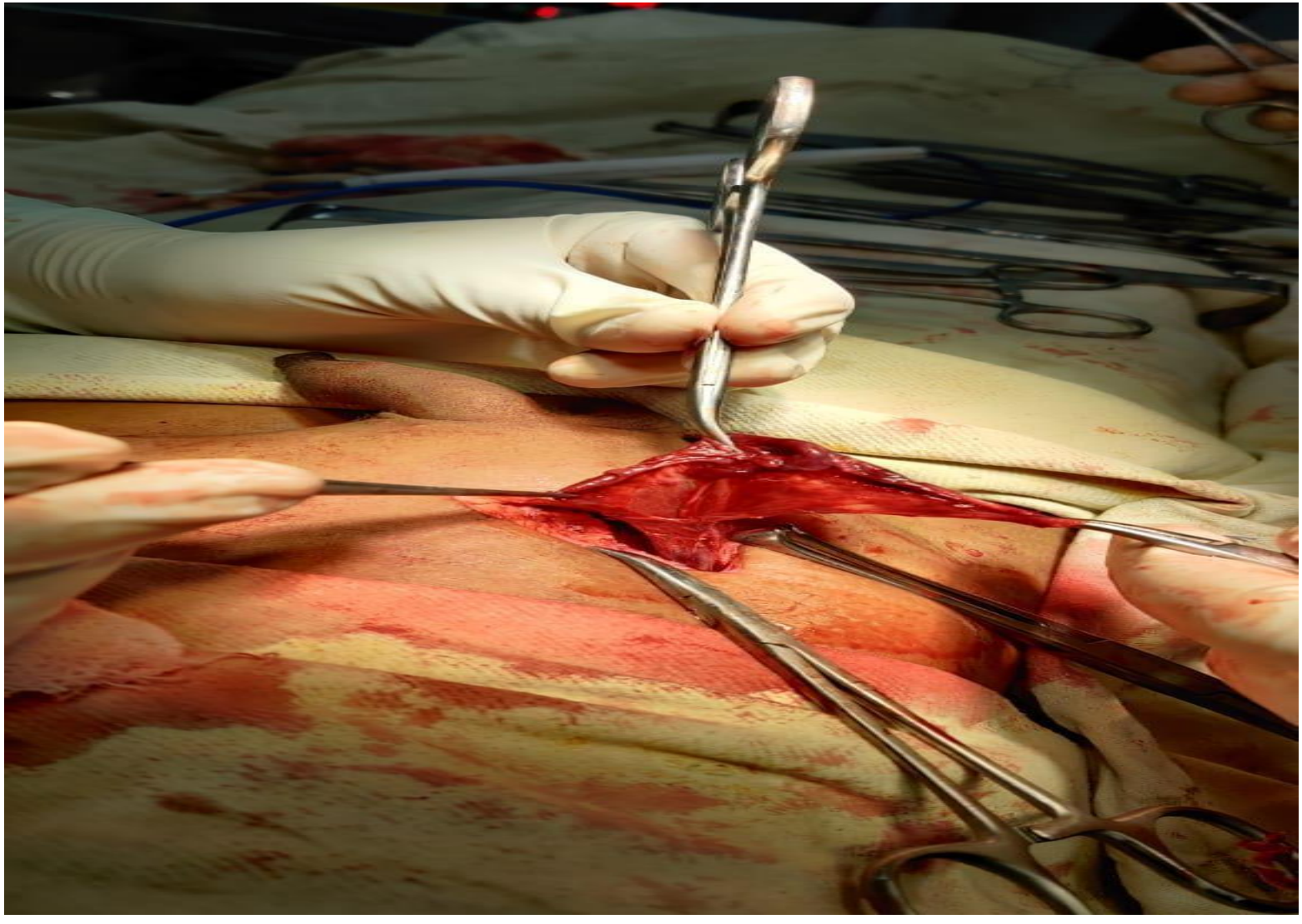
Name of Operation : Right sided orchidectomy
with left sided orchiopexy

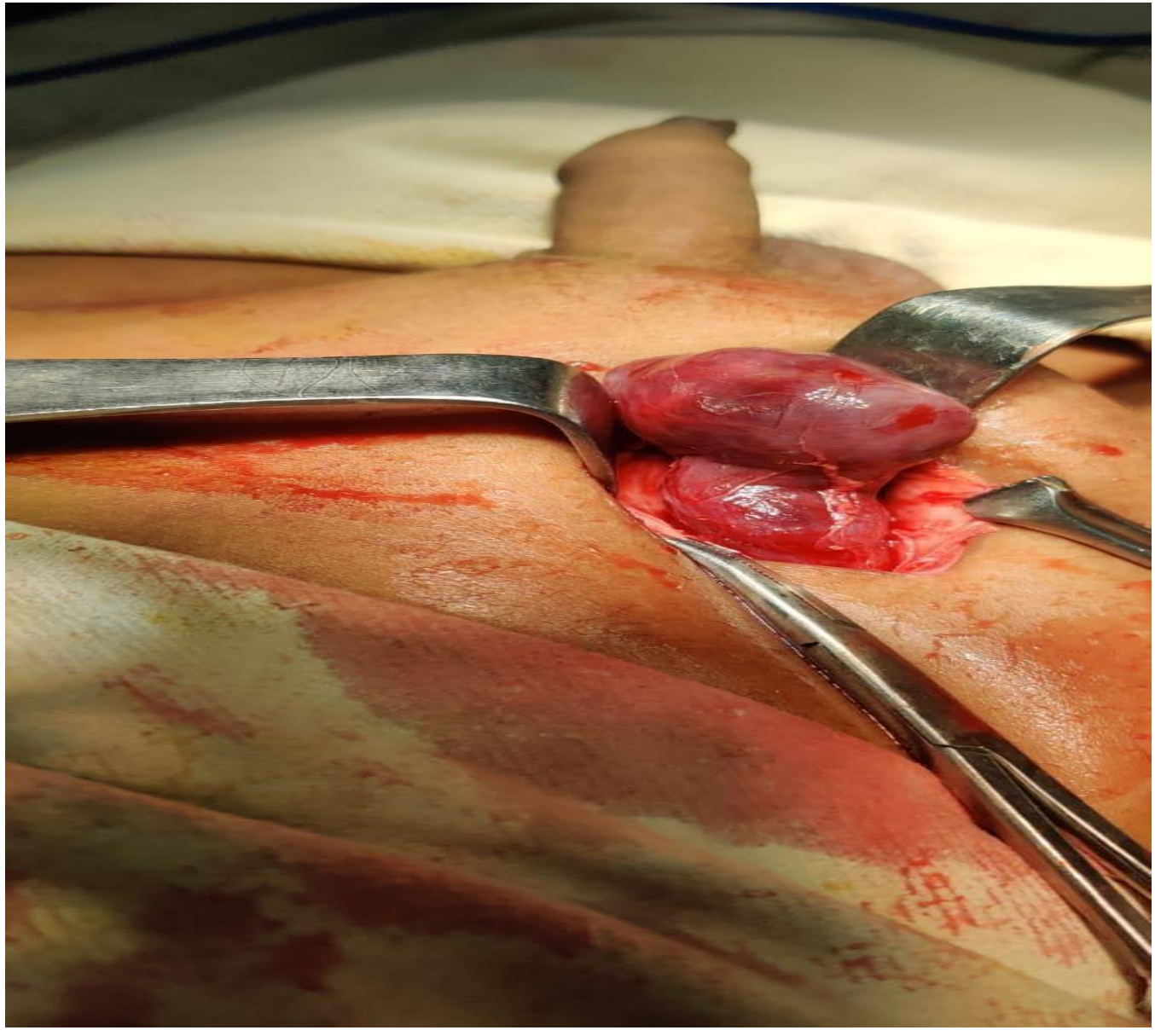


Right sided inferior inguinal crease line incision was given.

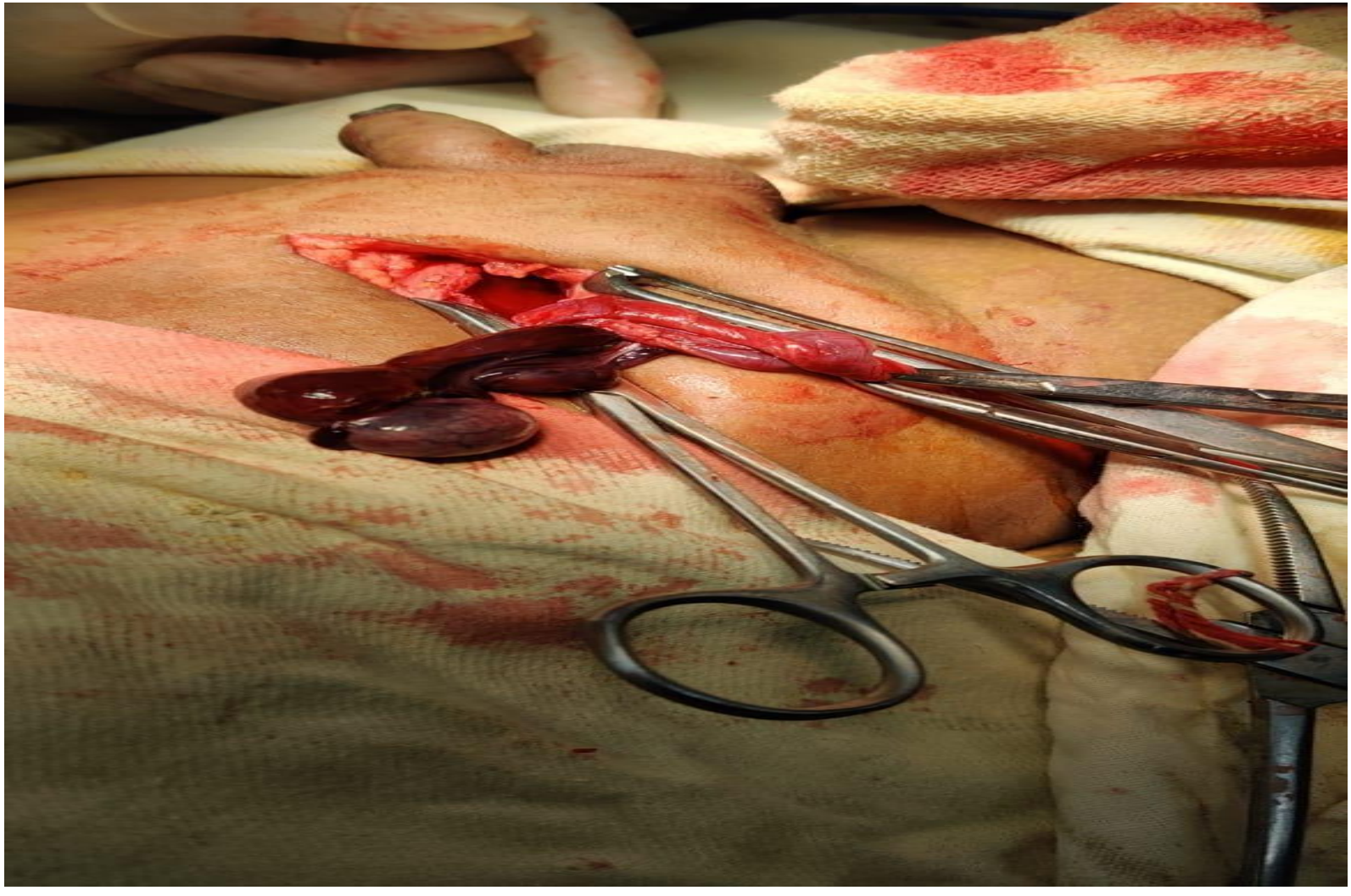


External spermatic fascia ,cremasteric muscle and fascia, internal spermatic fascia were dissected.





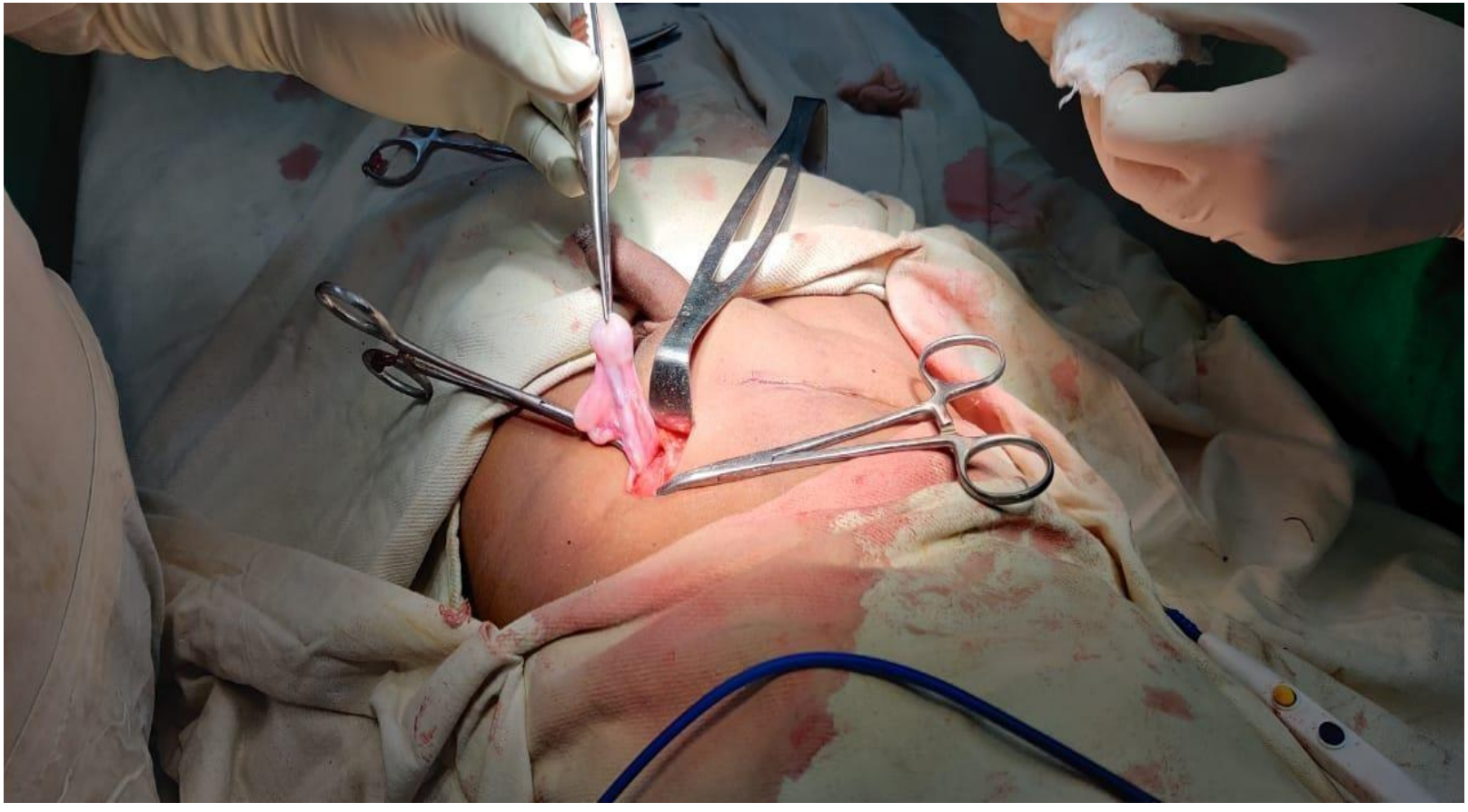
Testis was found gangrenous.



Left sided inferior inguinal crease line incision was given.



Testis was found in left inguinal canal.



Orchiopexy was done by making a sub dartos pouch.







Thank You

