

Carefully inspect the **urethral meatus** for location and evidence of discharge. Normally it is centered at the tip of the glans. Also note hair distribution. Normally, before puberty, no pubic hair is present. Soft, downy hair at the base of the penis is an early sign of pubertal maturation. In older adolescents, hair distribution is diamond-shaped from the umbilicus to the anus.

Note the location and size of the **scrotum**. The scrota hang freely from the perineum behind the penis, and the left scrotum normally hangs lower than the right. In infants, the scrota appear large in relation to the rest of the genitalia. The skin of the scrotum is loose and highly rugated (wrinkled). During early adolescence the skin normally becomes redder and coarser. In dark-skinned boys, the scrota are usually more deeply pigmented.

Palpation of the scrotum includes identification of the testes, epididymis, and, if present, inguinal hernias. The two **testes** are felt as small, ovoid bodies about 1.5 to 2 cm (0.6 to 0.8 inch) long—one in each scrotal sac. They do not enlarge until puberty (see [Chapter 15](#)). Pubertal testicular development usually begins in boys between 9 and 13 years old. Record early (precocious) or delayed pubertal development, as well as evidence of any other secondary sexual characteristics.

When palpating for the presence of the testes, avoid stimulating the **cremasteric reflex**, which is stimulated by cold, touch, emotional excitement, or exercise. This reflex pulls the testes higher into the pelvic cavity. Several measures are useful in preventing the cremasteric reflex during palpation of the scrotum. First, warm the hands. Second, if the child is old enough, examine him in a tailor or “Indian” position, which stretches the muscle, preventing its contraction ([Fig. 4-39, A](#)). Third, block the normal pathway of ascent of the testes by placing the thumb and index finger over the upper part of the scrotal sac along the inguinal canal (see [Fig. 4-39, B](#)). If there is any question concerning the existence of two testes, place the index and middle fingers in a scissors fashion to separate the right and left scrota. If, after using these techniques, you have not palpated the testes, feel along the inguinal canal and perineum to locate masses that may be undescended testes. Although undescended testes may descend at any time during childhood and are checked at each visit, report any failure to palpate the testes.