PREOPERATIVE DIAGNOSIS: , Bilateral inguinal hernias.,POSTOPERATIVE DIAGNOSIS:, Bilateral inguinal hernias.,OPERATION PERFORMED: ,Bilateral inguinal herniorrhaphy.,ANESTHESIA: , General.,INDICATIONS: , This 3-1/2-year-old presents with bilateral scrotal swellings, which both reduce and are consistent with bilateral inguinal hernias. He comes to the operating room today for the repair.,OPERATIVE PROCEDURE: ,After the induction of general anesthetic, the abdomen and perineum were prepped and draped in usual manner. Transverse right lower quadrant skin fold incision was made and carried down through skin and subcutaneous tissue with sharp dissection. The external oblique fascia identified upon course of its fibers. The hernia sac was identified and brought into the operative field. Hernia sac was grasped with hemostat and the cord structures were carefully stripped away from it until the entire circumference of the sac could be identified. The sac clamped and divided. The distal sac was then dissected down to where the large hydrocele with the testicle would be brought up and the sac opened, the fluid drained, and a portion of the sac removed. The testicle was returned to the scrotum. The proximal sac was then dissected free of the cord up to the peritoneal reflection at the internal ring where it was ligated with a #3-0 Vicryl stick tie and a #3-0 Vicryl free tie. The excess removed. The cord returned to the inguinal canal and external oblique fascia closed with interrupted sutures of #3-0 Vicryl and subcutaneous tissue with the same, skin closed with #5-0 subcuticular Monocryl. Sterile dressing applied. Attention was

then turned to the left side where an identical procedure was carried out for his left hernia, although the only difference being with the sac was somewhat smaller and did not have the large hydrocele around the testicle. Otherwise the procedure was carried down in identical manner. Sterile dressings were then applied to both sides. The child awakened and taken to the recovery room in satisfactory condition.