CLINICAL PATHWAY:
Testicular Torsion

THIS PATHWAY SERVES AS A GUIDE AND DOES NOT REPLACE CLINICAL JUDGMENT.

Inclusion Criteria: concern for testicular torsion

Signs/Symptoms of testicular torsion:

- Scrotal/testicular pain (may be intermittent if torsion/detorsion)
- Redness or swelling of scrotum
- High riding, hard, tender testicle with absent cremasteric reflex
- Consider in an inconsolable infant without other causes

If patient is transferred from outside hospital with an ultrasound concerning for torsion:

- Upload images upon arrival to the Emergency Department
- Obtain TWIST score[1]
- Proceed with pathway based on TWIST score

YES

Ultrasound (US) tech in house?

YES

NO

Obtain scrotal ultrasound with doppler

If US done at outside hospital: repeat US

If US tech not in house:

- Place order for scrotal ultrasound with doppler (will trigger ultrasound tech to come in)
- If US done at outside hospital: contact on-call Urology resident to review images while awaiting ultrasound tech arrival

May proceed to ultrasound immediately from triage.

Obtain TWIST score[1] (supervising attending or fellow must perform exam and calculate score)

TWIST < 5

TWIST 5-7

Ultrasound consistent with testicular torsion (wet or final read)?

YES

Contact on-call Urology resident

NO

ED Care

- Place peripheral IV if not already done
- Ensure patient registration complete in case of urgent transport of patient to OR
- ED/One Call to ensure outside imaging uploaded into EPIC

Urology Resident Care

- Repeat exam
- Review images and repeat if indicated
- Discuss with Urology attending

Proceed with surgery?

NO

Consider an alternative diagnosis.

If clinical concern for torsion/detorsion (severe pain and swelling that resolved prior to ultrasound, ultrasound with hyperemia or reactive hydrocele): refer for Urology outpatient follow-up and provide strict return precautions

YES

Urology Resident Responsibilities:

- Contact OR staff
- Contact Anesthesia attending

Goal is patient to OR < 4 hours from presentation

[1]TWIST Score

Sign/Symptom	Score
Testicular swelling	2 points
Hard testicle	2 points
Absent cremasteric reflex	1 point
Nausea/vomiting	1 point
High riding testis	1 point

Interpretation:

- 0-2 points: Low risk. Consider ultrasound if clinically indicated.
- 3-4 points: Intermediate risk. Recommend ultrasound imaging.
- 5-7 points: High risk. Surgical exploration recommended if ultrasound imaging is not immediately available.

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