

MALE GENITAL EXAM 2023 RUBRIC

Computer Number: _____ Group: _____
 Examiner's Name: _____ Total Score: _____ /44 = _____ %

	Not Done(0)	Incomplete (1)	Complete (2)
Introduce self and greet patient, verifies identity			
Explains procedure, obtain verbal consent, ensures privacy and asks for chaperone.			
Gathers supplies. Wash hands and wear non sterile gloves. Exposes adequately – umbilicus and below.			
Standing position: Inspect skin, pubic hair (pattern distribution), penis (warts, ulcers mass, discoloration, and piercings), inguinal areas (lymphadenopathy) and scrotum (anterior and posterior).			
Patient to retract foreskin for inspection (for phimosis, epispadias/hypospadias, adhesion, other abnormalities) and then replace over glans afterwards (paraphimosis) (if not circumcised).			
Asks for pain before palpation. Palpation of shaft of penis (root to glans), note any masses, tenderness and penile discharge.			
Palpate each testis individually and gently noting any nodules or tenderness (with index finger and thumb). Cryptorchidism or retractile testis.			
Palpate epididymis, spermatic cord and vas deferens on each side			
Palpates inguinal areas for lymph nodes.			
Observes for changes in inguinal areas during Valsalva maneuver/bearing down.			
Palpates inguinal rings and assesses for tapping during bearing down/coughing. <i>Explain locations of rings.</i>			
Digital Rectal Examination: Positions patient appropriately (Sims position)			
DRE: Changes glove and lubricates finger. Inspects the external area for tags, fissures, warts, bleeding, hemorrhoids or other swellings.			
DRE: Inserts the finger and assesses for tone/wall contour.			
Prostate: Palpates prostate for size, tenderness and irregularity in texture.			
DRE: Remove gloved finger and note color of stool and send sample to lab for occult blood as needed.			
Covers patient, provides tissue and allows to dress up.			
Explains Testicular Self-Exam (TSE)			
Explains findings, asks if any questions. Thanks patients and documents.			
SPECIAL TESTS			
Trans-illumination Test (presence of scrotal mass): in a dark room and gives interpretation.			

Prehn's Test: scrotal pain relieved by elevation suggestive of epididymitis rather than testicular torsion.			
Cremasteric Reflex: loss suggests testicular torsion			
COMMENTS			TOTAL: _____/44

Further Reading:

- Differences between epididymitis and testicular torsion on clinical examination
- Location of the deep and superficial inguinal rings
- List causes of phimosis and paraphimosis