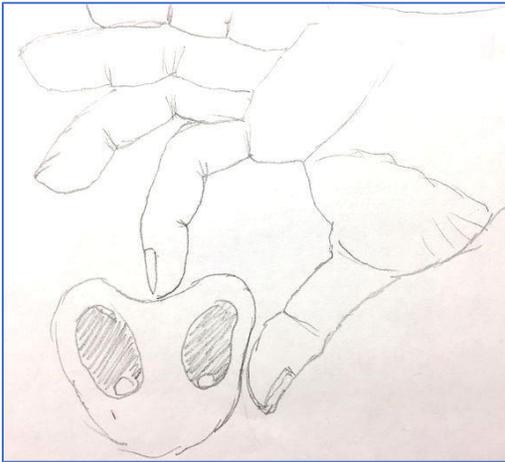
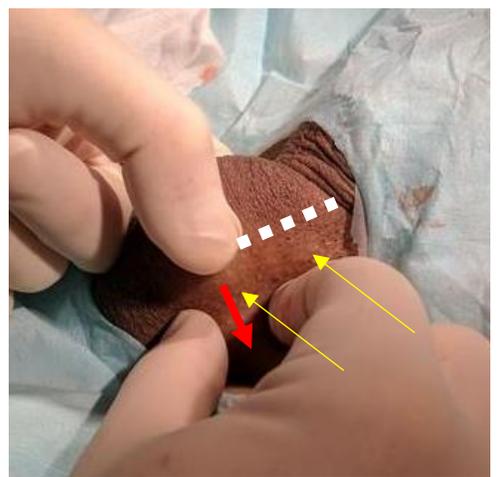
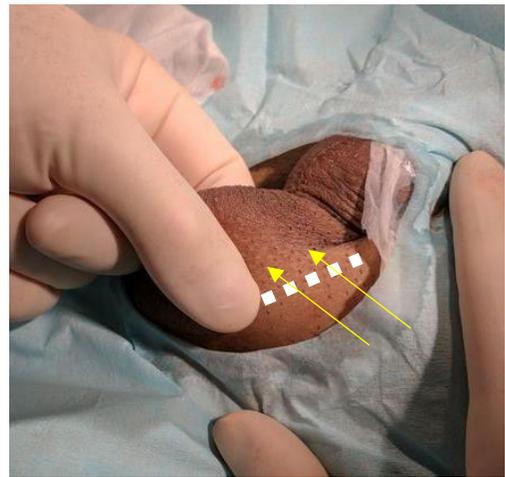
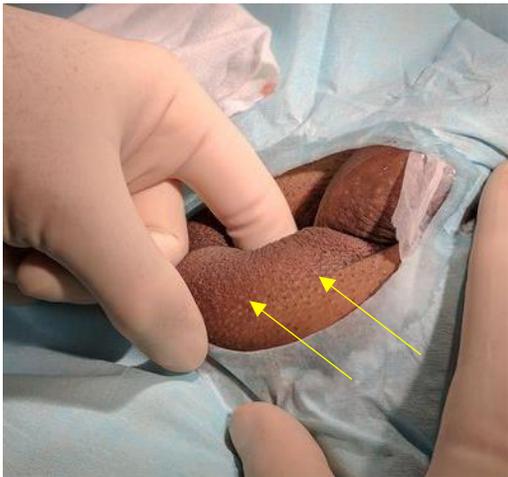


One Technique to Secure the Ipsilateral Vas with the NSV Ring Clamp in a Patient with a Thick Scrotum and Spermatic Cord:  
Left-handed Operator

Doug Stein, MD

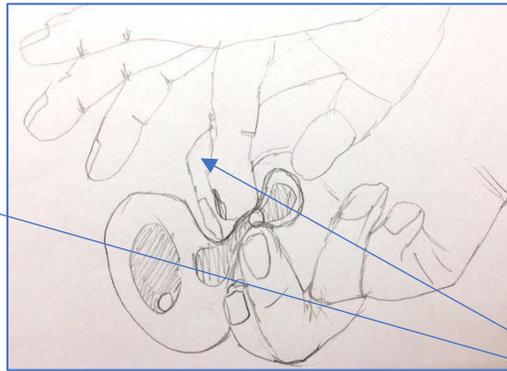
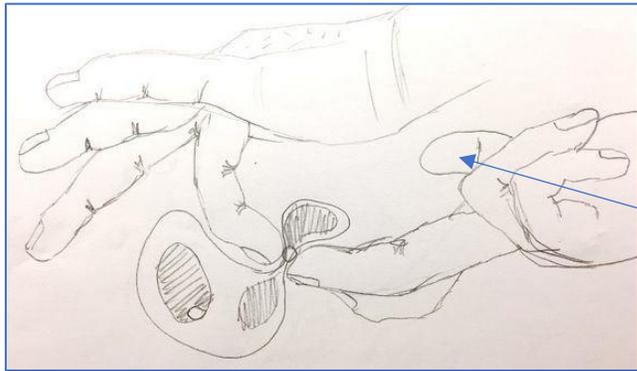


Thick Para-scrotal Skin

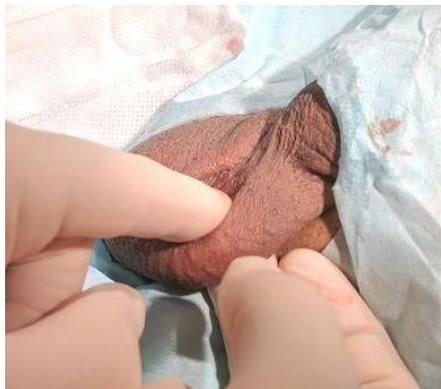


Hatched areas in the diagrams represent the spermatic cord. The dotted line represents the position of the vas deferens. The yellow arrows point to the line of demarcation between thin scrotal skin and thick para-scrotal skin. It is easier for me to “hook” the ipsilateral (right) vas with my left index finger than with my right thumb because I can curl my left index finger (into a “hook”) more easily than I can curl my right thumb. As the vas is held between the left thumb and index finger, the skin of the lateral scrotal wall is pushed back (red arrow) with the right thumb and index finger, thereby “lifting” the vas forward from a position under thick para-scrotal skin to a position under thinner scrotal skin. At this point, the vas is held between the left index finger and the left thumb.

The vas is then “transferred” to the right third finger. That is, the right third finger replaces the left thumb. Then the right thumb comes forward to replace the left index finger, securing the vas between the right thumb and third finger in the classic 3-finger NSV position.



Right thumb



If the skin and cord are thick, “pockets” are created medial and lateral to the vas with the NSV dissecting clamp. The tips of the NSV ring clamp can now fall into these pockets to encircle the vas while the vas is pushed into the ring clip with the tip of the right third finger, a maneuver facilitated by contraction of the flexor digitorum profundus muscle to bend the right third DIP joint (green lines and arrows).

