

Penile inversion vaginoplasty

9 steps, each one the authored title and caption from the interactive animation, with the frame captured from that step. Read it before the case, or print it and work through the steps in order.

Teaching only, not for diagnosis or treatment decisions. The text on this sheet is the animation's own step copy, reproduced verbatim.

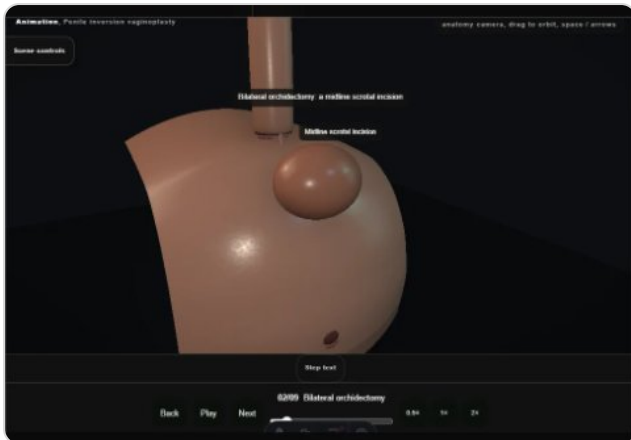
UrOops3D · UroRef · © Nity G

01 Assessment and the plan



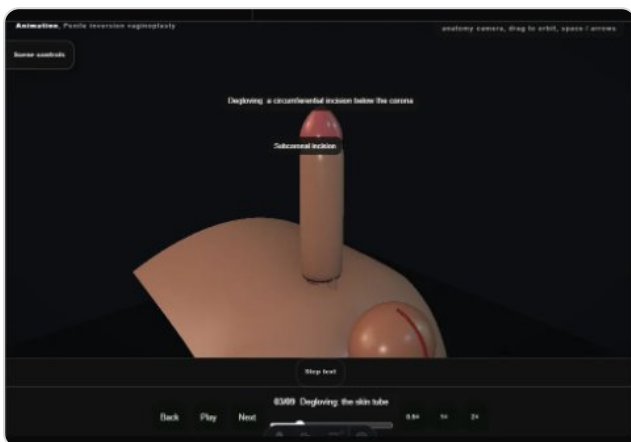
- After assessment by the gender service and a multidisciplinary team, the goals are agreed: depth or no canal, sensation, voiding sitting.
- Drawn through the skin: the **prostate**, which stays, and behind it the **rectum**.
- The **space** is planned between them.

02 Bilateral orchidectomy



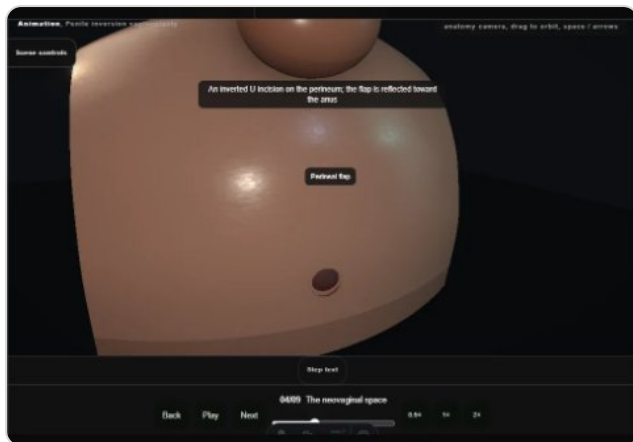
- Through a **midline scrotal incision** each testis is delivered, its **cord** clamped, tied at the external ring and divided.
- The scrotal skin is kept: it becomes the labia.

03 Degloving: the skin tube



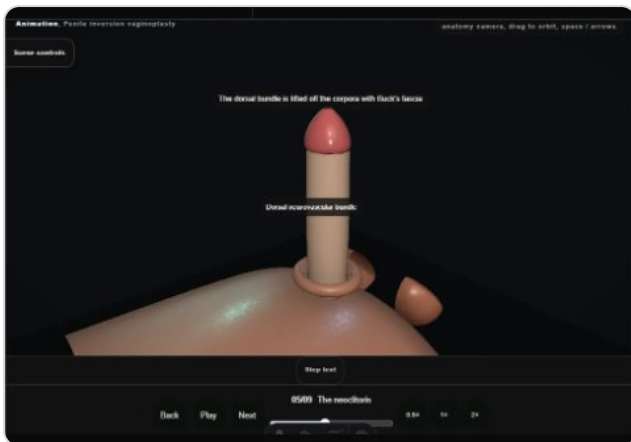
- A **circumferential subcoronal incision**, and the penile skin is rolled back to the base as a **tube** with its blood supply.
- Buck's fascia stays on the shaft over the **dorsal bundle**.

04 The neovaginal space



- An inverted U on the perineum, the flap reflected.
- The space is opened **between the prostate in front and the rectum behind**, up to the bladder base.
- The **rectum** is the next layer; the **sphincter** at the apex is spared.

The neoclitoris



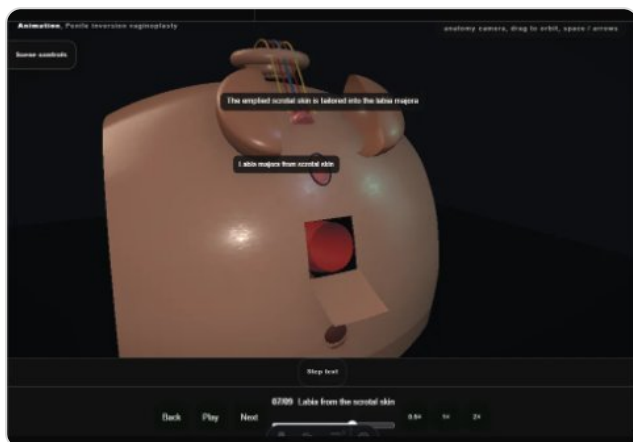
- The **dorsal neurovascular bundle** is lifted off the corpora with Buck's fascia; the corpora are excised to the crura.
- A **dorsal wedge of glans** stays on the bundle and is folded down to the clitoral position.

06 Urethra shortened and spatulated



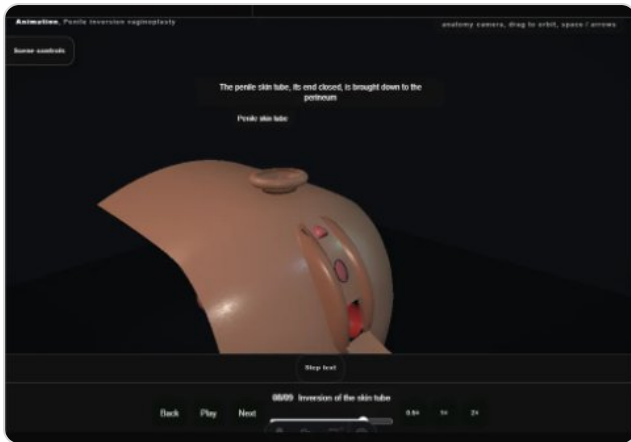
- The urethra is **shortened**, then opened on its ventral side and **spatulated** to make a wide new meatus, sewn to the vestibule.
- Too long or too tight here gives **spraying** and **meatal stenosis**.

07 Labia from the scrotal skin



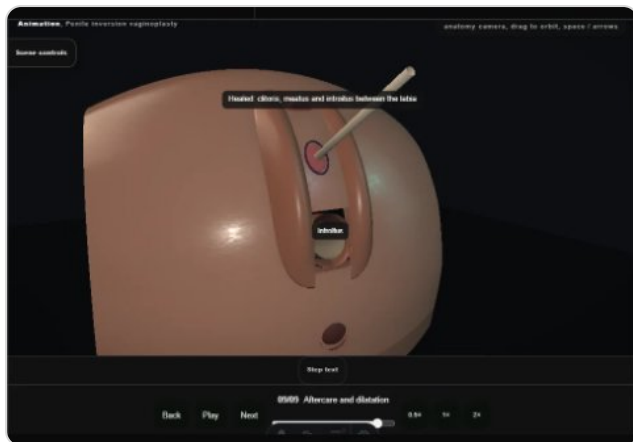
- The emptied **scrotal skin** is tailored into the **labia majora** either side of the vestibule, from beside the clitoris to the back of the introitus.

08 Inversion of the skin tube



- The **penile skin tube**, its end closed, is brought down and **inverted into the space** so that skin lines the canal; scrotal skin graft extends it when it is short.
- A **pack** holds it; the perineal flap goes into the back wall; a **catheter** drains the bladder.

09 Aftercare and dilatation



- Pack and catheter out after some days.
- **Dilatation** starts at once and continues for life, less often with time; without it the canal shortens.
- The **prostate remains** in front of the canal.

Derived from genital/VaginoplastyScene.tsx at build time: every step title and caption above is the authored ProcedureDef text, reproduced verbatim, and this page shares its readable-points renderer with the animation itself. 9 of 9 steps have a captured frame. Text fingerprint e07d1ff6f72b4709. A caption edit without a re-capture fails the production check, so the sheet and the animation cannot drift apart silently.

Read before the case.
Debrief after it.

[About](#) [UrOops Cards](#) [Curriculum](#) [Operative notes](#) [Departments](#) [Progress](#)
[Governance](#) [Disclaimer](#) [Privacy](#) [Terms](#) [Support](#)

Teaching only, not for diagnosis or treatment decisions.

A UroRef project. Explore [UroRef](#), [ProstateView](#), [CalyxView](#) and [CystoSight](#).

