Elevation of the penis and scrotum after scrotal and pelvic surgery has the salutory effects of facilitating the resolution of postoperative swelling while simultaneously preventing the development of dependent edema. Previously, the desired degree of postoperative genital suspension has been achieved by employing an athletic supporter and by placing towel rolls beneath the scrotum. These measures are frequently ineffective and often uncomfortable for the patient. We report the usage of a light-weight, comfortable, rigid, and reusable suspension apparatus for the penis and scrotum named for its primary inventor (AK).

To construct the bridge one need only have on hand 2-inch surgical adhesive tape and tongue depressors. Two strips of tape, 12 inches long, are laid out parallel to each other, approximately 3 inches apart, with the adhesive surface facing up. Tongue depressors are placed perpendicular to the long axis of the tape at intervals of 2–3 inches to form a ribbed network. Two additional 12-inch strips of tape are then placed with the adhesive surface in opposition to the original two pieces of tape. All surfaces are then reinforced with additional tape, completing the bridge. One may then affix the ends of the bridge to the patient’s thighs with additional adhesive tape and elevate the penis and scrotum with the midsection of the suspended bridge (Fig. 1).

The advantages of the bridge are that it is made of readily available, inexpensive materials; in addition, it is easy to fashion, may be removed and reapplied to the patient numerous times without loss of its rigid properties, is quite comfortable, and, unlike the athletic supporter, the bridge does not obscure the penis and scrotum from the view of the examiner. The Kelly scrotal bridge is a useful adjunct to the management of the patient who has undergone pelvic or scrotal surgery, and, provides a superior means of effecting genital suspension in those instances in which scrotal suspension facilitates the patient’s recovery.

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