

# UCSF survey on male anatomy

Please complete the survey below.

Thank you!

UNIVERSITY OF CALIFORNIA, SAN FRANCISCO CONSENT TO BE IN RESEARCH Study Title: Facebook advertised survey on penile abnormalities. This is a research study, and you do not have to take part. The researchers from the Department of Urology created this survey and are available by email for any questions. The researchers include Dr. Bruce Schlomer, Dr. Michael DiSandro, Dr. Laurence Baskin, Dr. Hillary Copp, and Dr. Benjamin Breyer. You are being asked to take part in this study because you are a male above age 18. In this study, the researchers are doing a survey to learn more about the relationship of male external genital anatomy and outcomes attributed to certain congenital abnormalities. No sponsor is paying for this research. About 10,000 people will participate in this study. What will happen if I take part in this study? If you agree to be in this study, you will complete a survey online. The survey asks about sexual function, sexual satisfaction, urination symptoms, genital anatomy, sexual development, and satisfaction with genital anatomy. It will take you about 20 minutes to complete the survey. Are there any risks to me or my privacy? Some of the survey questions may make you feel uncomfortable or raise unpleasant memories. You are free to skip any question. We will do our best to protect the information we collect from you. Information which identifies you will be kept secure. The survey itself will not include details which directly identify you, such as your name or address. Please do not put this information on your survey. The electronic completed survey results will be kept on a secure server. Only a small number of researchers will have direct access to completed surveys. If this study is published or presented at scientific meetings, names and other information that might identify you will not be used. Are there benefits? There is no benefit to you. The survey results will be used for research and the hope is that the results will improve care for patients. Can I say "No"? Yes, you do not have to complete a survey. If you choose not to be in this study you will not lose any of your regular benefits, and you can still receive medical care from UCSF. Are there any payments or costs? You will not be paid for completing the survey. There are no costs to you. Who can answer my questions about the study? You can talk with the study researcher about any questions, concerns, or complaints you have about this study. You can contact the study researchers at [bruce.schlomer@ucsf.edu](mailto:bruce.schlomer@ucsf.edu). Alternatively you can contact the study researchers at the following address: UCSF urology survey c/o Bruce Schlomer UCSF Medical Center 400 Parnassus Avenue, Suite A-610 San Francisco, CA 94143-0330 Phone: 415-353-2200 Fax: 415-476-8849 If you wish to ask questions about the study or your rights as a research participant to someone other than the researchers or if you wish to voice any problems or concerns you may have about the study, please call the Office of the Committee on Human Research at 415-476-1814. CONSENT PARTICIPATION IN RESEARCH IS VOLUNTARY. Print out a copy of this consent form to keep. If you wish to be in this study, please select "agree to participate" below.

- Agree to participate  
 Do not agree to participate

---

---

**Thank you for agreeing to participate. Taking this survey will help us better understand how to best treat men with certain penile abnormalities.**

**We are first going to ask some general questions about you such as age, race, country of birth, sexual orientation, etc.**

Four number year of birth Example: 1979 \_\_\_\_\_

Are you at least 18 years old?

- Yes  
 No

Gender

- Female  
 Male

What is your race? Check all that apply.

- White (caucasian)  
 Black  
 Asian  
 Pacific Islander  
 Native American  
 Hispanic or Latino  
 Other

What best describes your race? Choose only one.

- White (caucasian)  
 Black  
 Asian  
 Pacific Islander  
 Native American  
 Hispanic or Latino  
 Other

Are you hispanic and/or latino?

- Yes  
 No

What country or area of the world were you born in?

- United States  
 Canada  
 Mexico  
 Central America  
 South America  
 Europe  
 Asia  
 Middle East  
 Africa  
 Australia  
 Other

What state or territory were you born in?

- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Missouri
- Montana
- Nebraska
- Nevada
- New Hampshire
- New Jersey
- New Mexico
- New York
- North Carolina
- North Dakota
- Northern Marianas Islands
- Ohio
- Oklahoma
- Oregon
- Pennsylvania
- Puerto Rico
- Rhode Island
- South Carolina
- South Dakota
- Tennessee
- Texas
- Utah
- Vermont
- Virginia
- Virgin Islands
- Washington
- West Virginia
- Wisconsin
- Wyoming

What was the population size of the city you were born in? Please estimate as best you can.

- Less than 1,000
- 1,000 - 10,000
- 10,000 - 50,000
- 50,000 - 100,000
- 100,000 - 500,000
- Greater than 500,000

Were you born in a hospital?

- Yes
- No
- I do not know

What was the highest education level that your MOTHER reached?

- Did not graduate high school
- Graduated high school
- Some college
- Graduated college
- Some graduate school
- Graduated from graduate school
- I do not know

What was the highest education level that your FATHER reached?

- Did not graduate high school
- Graduated high school
- Some college
- Graduated college
- Some graduate school
- Graduated from graduate school
- I do not know

Did your parents own a home when you were born?

- Yes
- No
- I don't know

What was the highest education level that YOU have reached?

- Did not graduate high school
- Graduated high school
- Some college
- Graduated college
- Some graduate school
- Graduated from graduate school

What is YOUR current household income per year?

- \$0-\$25,000
- \$25,000-\$50,000
- \$50,000-\$75,000
- \$75,000-\$100,000
- \$100,000-\$150,000
- Greater than \$150,000

With which sexual orientation do you most closely identify currently?

- Homosexual (gay, sexually attracted to men)
- Bisexual (sexually attracted to both genders)
- Heterosexual (straight, sexually attracted to women)
- Asexual (not sexually attracted to any gender)
- Queer (prefer not be be classified)

Which gender do you have sex with?

- Women
- Men
- Both
- Neither

---

---

**We are now going to ask you some questions about what you think of your penis.****The first question is a yes/no question.**

Do you think your penis is normal?

- 
- Yes
- 
- 
- No

We will now ask about several aspects of your penis. Please answer how satisfied you are. There are four possible answers: Very satisfied, satisfied, dissatisfied, very dissatisfied. Please choose the answer most appropriate for you. The glans is the head of the penis. The urethral opening is where urine comes out when you urinate. Penile refers to penis. An erection is when your penis gets hard.

Length of penis

- 
- very satisfied
- 
- 
- satisfied
- 
- 
- dissatisfied
- 
- 
- very dissatisfied

Position and shape of your urethral opening (where urine comes out of penis)

- 
- very satisfied
- 
- 
- satisfied
- 
- 
- dissatisfied
- 
- 
- very dissatisfied

Shape of your glans (head of penis)

- 
- very satisfied
- 
- 
- satisfied
- 
- 
- dissatisfied
- 
- 
- very dissatisfied

Shape of your penile skin

- 
- very satisfied
- 
- 
- satisfied
- 
- 
- dissatisfied
- 
- 
- very dissatisfied

Penile axis (straightness upon erection)

- 
- very satisfied
- 
- 
- satisfied
- 
- 
- dissatisfied
- 
- 
- very dissatisfied

General appearance of penis

- 
- very satisfied
- 
- 
- satisfied
- 
- 
- dissatisfied
- 
- 
- very dissatisfied

---

---

**We are now going to ask a series of questions about how satisfied you are with how your sexual function.**

**An erection is when your penis gets hard. Sexual intercourse is defined as penetration of the partner (you entered your partner).**

**Choose the best answer.**

Over the past 6 months, how do you rate your confidence that you could get and keep an erection?

- Very low
- Low
- Moderate
- High
- Very high

Over the past 6 months; when you had erections with sexual stimulation, how often were your erections hard enough for penetration (entering your partner)?

- No sexual activity
- Almost never or never
- A few times (much less than half the time)
- Sometimes (about half the time)
- Most times (much more than half the time)
- Almost always or always

Over the past 6 months, during sexual intercourse, how often were you able to maintain your erection after you had penetrated (entered) your partner?

- Did not attempt intercourse
- Almost never or never
- A few times (much less than half the time)
- Sometimes (about half the time)
- Most times (much more than half the time)
- Almost always or always

Over the past 6 months; during sexual intercourse, how difficult was it to maintain your erection to completion of intercourse?

- Did not attempt intercourse
- Extremely difficult
- Very difficult
- Difficult
- Slightly difficult
- Not difficult

Over the past 6 months; when you attempted sexual intercourse, how often was it satisfactory to you?

- Did not attempt intercourse
- Almost never or never
- A few times (much less than half the time)
- Sometimes (about half the time)
- Most times (much more than half the time)
- Almost always or always

Over the past 6 months; during sexual intercourse, how difficult did the curvature of your penis make intercourse?

- Did not attempt intercourse
- Extremely difficult
- Very Difficult
- Difficult
- Slightly Difficult
- Not difficult

---

---

**We will now ask a few questions related to your fertility (your ability to get someone pregnant).****Choose the best answer.**

Have you ever attempted to cause a pregnancy?

- Yes  
 No

How many pregnancies have you caused?

- None  
 1  
 2  
 3 or more

How long were you trying to cause a pregnancy even though you have not?

- Less than 6 months  
 6 months to 12 months  
 12 months to 18 months  
 18 months to 24 months  
 More than 24 months

In an attempt to conceive, was assisted reproductive technology used such as in vitro fertilization, intra-uterine insemination, testicular sperm extraction, etc?

- Yes  
 No

How long did it take you and your partner to conceive for the first pregnancy you caused?

- Less than 6 months  
 6 months to 12 months  
 12 months to 18 months  
 18 months to 24 months  
 More than 24 months

How long did it take you and your partner to conceive for the second pregnancy you caused?

- Less than 6 months  
 6 months to 12 months  
 12 months to 18 months  
 18 months to 24 months  
 More than 24 months

How long did it take you and your partner to conceive for the third pregnancy you caused?

- Less than 6 months  
 6 months to 12 months  
 12 months to 18 months  
 18 months to 24 months  
 More than 24 months

In order for you and your partner to conceive, did assistive reproductive technology have to be used such as in vitro fertilization, intra-uterine insemination, testicular sperm extraction, etc.

- Yes  
 No

Have you ever been told by a physician that you and have problems causing a pregnancy (infertility)?

- Yes  
 No

What is your perception of the reason you were given for infertility?

- My female partner was diagnosed with infertility  
 Problems with sperm production (low sperm count, low sperm quality, etc)  
 Problems with sperm delivery during intercourse  
 Problems with erectile function  
 Problems with ejaculation  
 Varicocele  
 Unknown or other

---

---

**We will ask some questions about your social and sexual experiences.**

Have you ever kissed anyone?

- Yes  
 No

How old (in years) were you when you first kissed someone

\_\_\_\_\_

Have you ever been in love?

- Yes  
 No

How old (in years) were you when you first fell in love?

\_\_\_\_\_

Have you ever had sexual intercourse (penetrated your partner)?

- Yes  
 No

Please choose one or more reasons why you have not had sexual intercourse.

- No opportunity  
 Curvature of penis makes sex difficult  
 I have difficulty getting/maintaining erection  
 Embarrassed about penis appearance  
 Other

How old (in years) were you when you first had sexual intercourse (penetrated your partner)?

\_\_\_\_\_

How many sexual partners have you had?

\_\_\_\_\_

Have you ever masturbated?

- Yes  
 No

How old (in years) were you when you first masturbated?

\_\_\_\_\_



---

---

**We will now ask some questions about how you urinate (pee).**

When you go to the restroom just to urinate, how often do you sit down on the toilet to do so?

- Almost never or never
- A few times (much less than half the time)
- Sometimes (about half the time)
- Most times (much more than half the time)
- Almost always or always

When you urinate standing up, how often to you have difficulty aiming your stream?

- I only sit to urinate
- Almost never or never
- A few times (much less than half the time)
- Sometimes (about half the time)
- Most times (much more than half the time)
- Almost always or always

When you urinate standing up, how often does your stream spray and make a mess?

- I only sit to urinate
- Almost never or never
- A few times (much less than half the time)
- Sometimes (about half the time)
- Most times (much more than half the time)
- Almost always or always

When you urinate standing up, how often do you have difficulty because your stream is weak?

- I only sit to urinate
- Almost never or never
- A few times (much less than half the time)
- Sometimes (about half the time)
- Most times (much more than half the time)
- Almost always or always

When you go to the bathroom just to urinate, why do you sit down on the toilet?

- Difficulty aiming stream
- Urine stream sprays and makes a mess
- Other

When you go to the bathroom just to urinate, how much does it bother you to sit down on the toilet?

- Not at all bothered
- Very little bothered
- Moderately bothered
- Significantly bothered
- Extremely bothered

---

---

**Now we are going to ask questions about urination symptoms.**

Over the past month, how often have you had a sensation of not emptying your bladder completely after you finish urinating?

- Not at all
- Less than 1 time in 5
- Less than half the time
- About half the time
- More than half the time
- Almost always

Over the past month, how often have you had to urinate again less than two hours after you finished urinating?

- Not at all
- Less than 1 time in 5
- Less than half the time
- About half the time
- More than half the time
- Almost always

Over the past month, how often have you found you stopped and started again several times when you urinated?

- Not at all
- Less than 1 time in 5
- Less than half the time
- About half the time
- More than half the time
- Almost always

Over the last month, how difficult have you found it to postpone urination?

- Not at all
- Less than 1 time in 5
- Less than half the time
- About half the time
- More than half the time
- Almost always

Over the past month, how often have you had a weak urinary stream?

- Not at all
- Less than 1 time in 5
- Less than half the time
- About half the time
- More than half the time
- Almost always

Over the past month, how often have you had to push or strain to begin urination?

- Not at all
- Less than 1 time in 5
- Less than half the time
- About half the time
- More than half the time
- Almost always

Over the past month, how many times did you most typically get up to urinate from the time you went to bed until the time you got up in the morning?

- None
- 1 time
- 2 times
- 3 times
- 4 times
- 5 times or more

If you were to spend the rest of your life with your urinary condition the way it is now, how would you feel about that?

- Delighted
- Pleased
- Mostly satisfied
- Mixed - about equally satisfied and dissatisfied
- Mostly dissatisfied
- Unhappy
- Terrible

---

---

**We will now ask you some questions about your penile anatomy.**

**First we will ask if you are circumcised or not. A circumcision removes the foreskin and is usually done in the first few days of life for a boy. The foreskin is skin that covers the head of the penis.**

Are you circumcised?

- Yes
- No
- I don't know

[Inline Image: "meatus location 4.jpg"]

Which of the above sketches is most like where your urethral opening is located? The urethral opening is where urine exits when you urinate. Choose the best answer.

- A
- B
- C
- D
- E
- F

[Inline Image: "curvature 2.jpg"]

Which of the above sketches is most like the curvature of your penis when you have an erection (penis gets hard)? We are only asking about up/down curvature not left/right curvature. Choose the best answer.

- A
- B
- C
- D
- E

[Inline Image: "foreskin 2.jpg"]

Which of the above sketches is most like the appearance of your penis and foreskin? The foreskin is the fold of skin that covers the head of your penis which is removed by a circumcision. Choose the best answer.

- A
- B
- C
- D
- E

---

---

**We are now going to ask some widely used general questions about your health.**

Would you say that in general your health is:

- Excellent
- Very good
- Good
- Fair
- Poor
- Don't know/Not sure

Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

- None
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20
- 21
- 22
- 23
- 24
- 25
- 26
- 27
- 28
- 29
- 30
- Don't know/Not sure

Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 was your mental health not good?

- None
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20
- 21
- 22
- 23
- 24
- 25
- 26
- 27
- 28
- 29
- 30
- Don't know/Not sure

During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?

- None
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20
- 21
- 22
- 23
- 24
- 25
- 26
- 27
- 28
- 29
- 30
- Don't know/Not sure

During the past 30 days, for about how many days did PAIN make it hard for you to do your usual activities, such as self-care, work or recreation?

- None
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20
- 21
- 22
- 23
- 24
- 25
- 26
- 27
- 28
- 29
- 30
- Don't know/Not sure

During the past 30 days, for about how many days have you felt SAD, BLUE, or DEPRESSED?

- None
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20
- 21
- 22
- 23
- 24
- 25
- 26
- 27
- 28
- 29
- 30
- Don't know/Not sure



During the past 30 days, for about how many days have you felt WORRIED, TENSE, or ANXIOUS?

- None
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20
- 21
- 22
- 23
- 24
- 25
- 26
- 27
- 28
- 29
- 30
- Don't know/Not sure

During the past 30 days, for about how many days have you felt you did NOT get ENOUGH REST or SLEEP?

- None
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20
- 21
- 22
- 23
- 24
- 25
- 26
- 27
- 28
- 29
- 30
- Don't know/Not sure

During the past 30 days, for about how many days have you felt VERY HEALTHY AND FULL OF ENERGY?

- None
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20
- 21
- 22
- 23
- 24
- 25
- 26
- 27
- 28
- 29
- 30
- Don't know/Not sure

---

---

**We are now going to ask you about the type of penile abnormality we are studying with this survey.**

Have you ever heard of hypospadias?

- Yes  
 No

Do you think that you might have hypospadias?

- Yes  
 No

Have you ever had surgery on your penis other than for circumcision?

- Yes  
 No

Have you had surgery on your penis for hypospadias?

- Yes  
 No

---

**This survey is studying hypospadias. Hypospadias is a penis abnormality that boys are born with and is usually fixed surgically when they are young.**

**The abnormalities that come with hypospadias include:**

- 1. The urethral opening is not at the tip of the penis. The opening can be anywhere from near the tip of the penis to very far away.**
- 2. The penis may be curved downward. This can range from mild to severe.**
- 3. In uncircumcised boys, the foreskin may not wrap fully around the head of the penis.**

**Reasons given to surgically fix hypospadias include:**

- 1. Cosmetic concerns**
- 2. Difficulty standing to urinate**
- 3. Possible problems with fertility**
- 4. Possible sexual problems**
- 5. Possible negative self image**

**The problems that hypospadias can cause are much more likely in men with severe hypospadias. Some believe that mild hypospadias may not cause any problems at all.**

How many hypospadias surgeries have you had?

- 1  
 2  
 3  
 4  
 5  
 more than 5

How many YEARS old were you at your last hypospadias surgery? Answer the best you can.

\_\_\_\_\_

Based on the below picture, where was your urethral meatus approximately located prior to your hypospadias surgeries (if you know)?

- A  
 B  
 C  
 D  
 E  
 F  
 I don't know

Urethral meatus location

[Inline Image: "meatus location 4-1.jpg"]

Do you think that you might have hypospadias?

- Yes  
 No

Would you have surgery to fix your hypospadias?

- Yes  
 No

Why would you NOT have surgery? Choose all that apply.

- I am afraid of surgery  
 The appearance of my penis doesn't bother me  
 No health insurance/I cannot afford it  
 I have no problems even though I might have hypospadias  
 Other

Why would you have surgery? Choose all that apply.

- The appearance of my penis bothers me
- I have problems standing to urinate
- I am concerned about my fertility
- I have difficulty with sexual relationships because of the appearance of my penis
- I think the hypospadias may be causing bothersome urination symptoms
- I think the hypospadias may be causing bothersome problems with sexual function
- The curvature of my penis bothers me
- Other

---

---

**To help us understand how well this survey identified men with normal anatomy and those with potential abnormal anatomy, please upload a picture of your penis that shows where your urethral opening is located and what it looks like. This will help us determine how best to treat males with hypospadias.**

**Please consider doing this even if you think your penis is normal.**

**Because we are not collecting any personal information, we can not contact you about your picture even if it looks abnormal. The pictures are for research purposes only.**

**The sketch below demonstrates at what angle to take picture so the urethral opening is demonstrated.**

[Inline Image: "camera example 2.jpg"]

Upload picture here.

---

**We will now give you some results from the survey. The results will only be accurate if you answered honestly and answered all of the questions.**

**If you thought our survey was interesting please "like" us at:**

**<http://www.facebook.com/Male.research.survey>**

### Thanks!

The IPSS questionnaire is a survey that asks questions about urination. It gives you a score from 0-35 with higher numbers indicating worse urination symptoms. 1-7 mild symptoms 8-19 moderate symptoms 20-35 severe symptoms

IPSS score \_\_\_\_\_

The IIEF-5 survey asks questions about erectile function. It gives you a score between 5 and 25 with higher scores meaning better erectile function. 22-25: No erectile dysfunction 17-21: Mild erectile dysfunction 12-16: Mild to moderate erectile dysfunction 8-11: Moderate erectile dysfunction 5-7: Severe erectile dysfunction

IIEF score \_\_\_\_\_

Is there a possibility you could have hypospadias based only on your answers to the survey? 1 = yes, there is a possibility 0 = no NOTE: not diagnostic, only based on survey answers \_\_\_\_\_

Please enter any comments you may have about this survey at this time. \_\_\_\_\_

How were you directed to this survey?

- Facebook advertisement  
 Someone sent me the link  
 Other

If you thought our survey was interesting, please go to: <http://www.facebook.com/Male.research.survey> Please "like" our page to help increase number of participants. Thanks!

If you are interested in learning more about hypospadias, feel free to visit any one of these following websites.

<http://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0002265/>

<http://www.webmd.com/parenting/baby/tc/hypospadias-topic-overview>

<http://urology.ucsf.edu/clinicalRes/CRhypo.html> If you are concerned about your results on the IIEF-5, here are some websites with information regarding erectile dysfunction. <http://www.webmd.com/erectile-dysfunction/default.htm>

<http://www.nlm.nih.gov/medlineplus/erectiledysfunction.html> <http://urology.ucsf.edu/patientGuides/neuroMale.html>

If you are concerned about your results on the IPSS, here are some websites with information regarding lower urinary tract symptoms and prostate diseases. <http://www.webmd.com/prostate-cancer/enlarged-prostate>

<http://www.webmd.com/urinary-incontinence-oab/tc/urinary-problems-and-injuries-age-12-and-older-topic-overview>

<http://kidney.niddk.nih.gov/kudiseases/pubs/prostateenlargement/> If you are interested in learning more about the

CDC Health Related Quality of Life Healthy Days measures please visit: <http://www.cdc.gov/hrqol/methods.htm/#1>

[http://www.cdc.gov/hrqol/hrqol14\\_measure.htm](http://www.cdc.gov/hrqol/hrqol14_measure.htm) In addition, feel free to email questions to the investigators for this study at [bruce.schlomer@ucsf.edu](mailto:bruce.schlomer@ucsf.edu) or ask your local primary care physician or urologist.

Thank you very much for completing this survey. Results from this survey will be made available on the website <http://urology.ucsf.edu/clinicalRes/CRhypo.html> in 2013.