Male Health: Testicular Cancer

Teachers Guide

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The lesson introduces students to signs & symptoms related to the male reproductive organs, specifically the testicles. The students will have an understanding of the signs & symptoms related to testicular cancer and what preventative-care measures they can take.

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The lesson introduces students to a real person who was diagnosed with testicular cancer. Discussion will include the myths and perceptions of a young person and having cancer. Students will be able to hear how the diagnosed younger person found out they had testicular cancer, what steps they took, and what the outcome.

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The lesson introduces students to an action plan for health. Discussion will include where to get help if they have a sign and/or symptom that something is not normal with their male reproductive organs.
LESSON 1: “Knowing my Body”

SUMMARY

The first lesson introduces students to the male anatomy, specifically the assigned male reproductive organ. Discussion will include introducing the students to the assigned male reproductive organ and all its parts.

GOAL(S)

To increase student understanding of male anatomy, specifically the assigned male reproductive organ. To understand:

OBJECTIVE(S)

1. By the end of this lesson, students will be able to identify the different parts of assigned male reproductive organ
2. By the end of this lesson, students will be able to describe the functions of the parts of the assigned male reproductive organ

Materials

• Teacher resources: Assigned Male Reproductive Organ (Also, provided graphic for PPT)
• Handout: Assigned Male Reproductive Organ (Fill in the blank)

Procedures

Distribute handout and worksheet
Students are introduced to assigned male reproductive organ through the picture/graphic handout Assigned Male Reproductive Organ throughout the lecture

Health Standards

G1. Describe the physical, social, and emotional changes associated with being a young adult.
G10. Recognize that there are differences in growth and development, body image, gender roles, and sexual orientation.
G18. Analyze the validity of health information, products, and services for reproductive and sexual health.
ACTIVITY
1. Begin by introducing the goals and objective of lesson.
2. Distribute the handout on assigned male reproductive organ.
3. Lecture (Express Lesson – Male Reproductive System)*: Introduce vocabulary. Identify and describe each of the parts of the assigned male reproductive organ. Describe the function of the testicles (see note). *Alternate Lesson: Lifetime Health – Chapter 18, Section 1 Male Reproductive System
4. Have students fill in the blanks as you move through the lecture.
5. Independent Activity: Have the students color the different parts of the assigned male reproductive organ using colored pencils.
6. Students can complete at home, if not completed in class.
7. Media Activity: Introduce students to Project U Los Angeles. Explain that they have the option to create a profile and gain access to more information on health. Explain that they have options for push messaging on male health and other health issues that may interest them.
8. Quiz (optional): Implement a short quiz of the previous lecture on male anatomy.

VOCABULARY
<table>
<thead>
<tr>
<th>Bladder</th>
<th>Scrotum</th>
<th>Glans of Penis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seminal Vesicle</td>
<td>Testicles/Testis</td>
<td>Urethra</td>
</tr>
<tr>
<td>Prostate Gland</td>
<td>Epididymis</td>
<td>Vas Deferens</td>
</tr>
<tr>
<td>Ductus Deferens</td>
<td>Blub</td>
<td>Epididymis</td>
</tr>
</tbody>
</table>

NOTE: WHAT IS THE FUNCTION OF THE TESTICLES?
The testicles are a part of a man’s reproductive system. Each man has two testicles, and they are located under the penis in a sac-like pouch called the scrotum. The testicles make sperm and testosterone, a hormone that plays a role in the development of a man’s reproductive organs and other characteristics specific to men.
GRAPHIC - LIFETIME HEALTH (HOLT) – EXPRESS LESSON (PG. 522)
ASSIGNED MALE REPRODUCTIVE ORGAN
LESSON 2: “Here are the FACTS!”

SUMMARY
This lesson introduces students to the facts about male reproductive health, in particular testicular cancer. Discussion will include the number of cases/statistics of male cancer (testicular cancer) in the United States.

Health Standards
P1. Examine the value for teenagers in actively managing their personal health behaviors
P9. Identify the importance of medical screenings, including melanoma, breast and testicular examinations, and testing necessary to maintain reproductive health.

GOAL(S)
To increase student understanding of good reproductive health. The students will be discussing male cancer (testicular cancer), the survival rates, and how to get help.

OBJECTIVE(S)
1. By the end of this lesson, students will be able to describe how testicular cancer affects young people in the U.S. and the survival rates
2. By the end of this lesson, students will have an understanding of why it is important to know if they have a testicular cancer or issues related to assigned male reproductive organ

Materials
• Handout: Fact Sheet - Testicular Cancer in the United States

Procedures
Distribute U.S. fact sheet testicular cancer
Students are introduced to the issue of male health and how it relates to testicular cancer
Form groups of 3-4 students
Students will create a story ending
ACTIVITY

1. Begin a KWL chart on male reproductive health with the class. This will gauge the knowledge level of your students.

2. Distribute the U.S. fact sheet on testicular to every student in class. Have them read and reflect for a 5 minutes.

3. Host a discussion with students on if the facts on the sheet were surprising. Ask if they every thought about this cancer before? How would they feel if it affected them and/or a relative/parent/guardian?

4. Watch video: Rugby Player – Cancer Survivor - [link]

5. Literacy Activity: Form groups of 3-4 students. If you need to make them smaller or larger, that is OK. Provide each group with the comic strip handout. They have the option to cut out the strips and tape together to make one long strip for the story.

6. Now that they have heard one story, introduce the students to Sackman. He is a Project U character and will be representing male reproductive health for us. Let the students know that they will be creating a comic strip/story about Sackman. They must describe in their story who they think Sackman is and what his life could be like.

7. Give the groups about 15-20 minutes to discuss Sackman with their groups and come up with the storyline that they will be presenting to the entire class. They must represent the story with pictures.

8. Once completed, the students will share the comic strip/stories they created on Sackman.

9. Process with the students how they come up with the story they created. Ask how the stories were different? Realistic? Happy? Sad? Action-oriented?

10. Have the students imagine that they were Sackman. Tell them to think about themselves being told they had cancer.

   Process the discussion with these prompts:
   - Would you be scared?
   - What are some things you enjoy that you could miss out on?
   - What are some decisions that you have to make?
   - Who would you want to talk to?
HANDOUT (EXAMPLE):
Cancer Statistics KEY STATS – Testicular Cancer (US version)

1. CANCER
   For men ages 20-35

When detected early, testicular cancer is the most curable of all cancers (95%)

1 OUT OF 270
   Men will be diagnosed with testicular cancer

Approximately
   9,000 new cases will arise annually

Almost
   400 men will die annually from testicular cancer

11. Introduction to Project U:
Either projected in your classroom or have the students go on their mobile device and enter the URL www.ProjectULA.org. This will take them to the Project U Los Angeles Website. Let them know that Sackman is a Project U character and they can find other characters in the Website. The Website was designed in partnership with LAUSD and the Art Center College of Design. We used LAUSD students to help the designers come up with ideas and concepts from what they told them how they wanted to hear about sexual health information. There are several other health topics they can read about and it is age-restrictive for teens, so no adults are allowed to sign up. The information is medically accurate, current, and bias-free (inclusive). They can get text messages sent to them, look up articles, videos and get free condoms. It is just another tool in the toolbox for them to have available to them that is safe space.
VOCABULARY

Benign: A tumor that is not cancerous.

Biopsy: Removal of a tissue sample that is then examined under a microscope to check for cancer cells.

Chemotherapy: Drugs that destroy cancer cells.

Lymph node: A tiny, bean-shaped organ that fights infection.

Malignant: A tumor that is cancerous.

Metastasis: The spread of cancer from where it began to another part of the body.

Oncologist: A doctor who specializes in treating cancer.

Prognosis: It is a prediction of whether or not the patient survives.

Radiation therapy: The use of high-energy x-rays to destroy cancer cells.

Radical inguinal orchietomy: Removal of a testicle through an incision in the groin.

Retropertitoneal lymph node dissection: Surgery to remove the lymph nodes from the back of the abdomen.

Tumor: An abnormal growth of body tissue.

Urologist: A doctor who specializes in treating conditions of the reproductive and urinary tract.
Step 1
FACTSHEET: TESTICULAR CANCER

Testicular Cancer
Cancer of the testicles is relatively rare (only 1% of all cancers in men). Although cancer is generally more common in older people, testicular cancer is most common in young and middle-aged men, usually between 20-34. Testicular cancer has the highest cure rates among all cancers, but like all cancers, it can recur.

Spotting cancer early can save lives, that’s why it is important to get to know your body and what is normal for you. That way you will be more likely to spot any changes. If you do notice changes, see your doctor. With early treatment, most men with testicular cancer can be cured.

We don’t know what causes testicular cancer, but we do know that some people have a higher risk of developing the disease. If one or both of a boy’s testicles hasn’t descended, he has a greater chance of developing testicular cancer later in life. Your risk is higher if a close member of the family has been diagnosed with the disease. White men are more likely to develop testicular cancer than black or Asian men.

What is testicular cancer?
Testicular cancer begins when normal cells in one or both testicles change and grow uncontrollably, forming a tumor. Most testicular tumors develop in germ cells, which produce sperm. These tumors are called germ cell tumors and are divided into two types: seminomas or non-seminomas. Non-seminomas grow more quickly and are more likely to spread than seminomas, but both types need immediate treatment.

Test for testicular Cancer?
You can have your doctor explain the which tests they are going to do on you. The doctor can provide more information on what each tests can do and how to prepare for them.

- Blood Tests
- CT scan of your chest or abdomen
- Ultrasound of your testicles
- MRI Scan

TIP: It can take several days before getting results of your test type.

What does stage mean?
The stage is a way of describing where the cancer is located, if or where it has spread, and whether it is affecting other parts of the body. There are three stages for testicular cancer:

- Stages of testicular cancer range from Stage I to Stage III:
  - Stage I indicates that the cancer is limited to the testicle.
  - Stage II cancer has spread to the lymph nodes in the back of the abdomen.
  - Stage III cancer has spread to other parts of the body. This type of cancer commonly spreads to the lungs, liver, brain, and rarely bone.

How is testicular cancer treated?
The treatment of testicular cancer depends on the type of tumor (seminoma versus non-seminoma), the stage, the amount of certain substances called tumor markers in the blood, and the man’s overall health. Testicular cancer is almost always curable if found early and is often curable even at later stages.
The three main treatment options are surgery, chemotherapy, and radiation therapy. Treatment usually starts with surgery to remove the testicle with cancer. Your doctor may then recommend active surveillance (watchful waiting) to closely monitor for any return of the disease. Some men may also have surgery to remove lymph nodes from the back of the abdomen. Chemotherapy may be given to lower the risk of the cancer returning or to treat cancer that has spread or come back after treatment. Surgery may be done after chemotherapy to remove any remaining tumors. Radiation therapy is used in specific situations for a seminoma. When making treatment decisions, men may also consider a clinical trial. Talk with your doctor about all treatment options and any concerns about how your treatment may affect your sexual functioning and fertility before treatment begins. The side effects of testicular cancer treatment can often be prevented or managed with the help of your health care team. This is called supportive care and is an important part of the overall treatment plan.

How can I cope with testicular cancer?
Absorbing the news of a cancer diagnosis and communicating with your health care team are key parts of the coping process. Seeking support, organizing your health information, making sure all of your questions are answered, and participating in the decision-making process are other steps. Talk with your health care team about any concerns. Understanding your emotions and those of people close to you can be helpful in managing the diagnosis, treatment, and healing process.

Questions to ask the doctor
Regular communication is important in making informed decisions about your health care. Consider asking the following questions of your health care team:

- What type of testicular cancer do I have?
- Can you explain my pathology report (laboratory test results) to me?
- What stage is the testicular cancer? What does this mean?
- Would you explain my treatment options? What clinical trials are open to me?
- What treatment plan do you recommend? Why?
- What is the goal of each treatment? Is it to eliminate the cancer, help me feel better, or both?
- Who will be part of my treatment team, and what does each member do?
- How will this treatment affect my daily life? Will I be able to work, exercise, and perform my usual activities?
- Could this treatment affect my sex life? If so, how and for how long?
- Will this treatment affect my ability to have children? Should I discuss sperm banking before treatment begins?
- What long-term side effects may be associated with my cancer treatment?
- If I’m worried about managing the costs related to my cancer care, who can help me with this concern?
- Where can I find emotional support for me and my family?
- Whom should I call for questions or problems?
- Is there anything else I should be asking?
LESSON 3: “How to Stay Male Healthy”

SUMMARY
This lesson introduces students to signs & symptoms related to the assigned male reproductive organ, specially the testicles. The students will have an understanding of the signs & symptoms related to testicular cancer and what preventative-care measures they can take.

GOAL(S)
To increase student understanding of the signs & symptoms that are related to assigned male reproductive organ and how to determine the need for linking to medical services.

OBJECTIVE(S)
1. By the end of this lesson, students will be able to describe the signs & symptoms related to assigned male reproductive organ that can specifically with testicles/testicular cancer.
2. By the end of this lesson, students will be knowledgeable on how to do a testicular self-exam.
3. By the end of this lesson, students will be able to determine the need for medical services relating to assigned male reproductive organ.

Materials
• Handout: 10 Signs and Symptoms
• Handout: How to do a Testicular Self-Exam

Procedures
Hand out the ‘Signs and Symptoms’
Hand out the ‘How to do a Testicular Self-Exam’
Present the video of rugby players (NZ) doing a testicular exam and getting ultrasound
ACTIVITY
1. Distribute handout ‘Signs and Symptoms’.
2. Display the image of male genitals. Remind student of past lesson on male anatomy. 3. Explain you will be revisiting the lesson, but will now be focused on the signs and symptoms to look out for that may be of concern, in particular testicular cancer.
3. Use the board to great a T-chart. Label one side of T-chart ‘visible’ and the other side with ‘not visible’. Ask the students what they think would be visible and not visible when dealing with things that may not be normal with genitals (e.g. lump versus pain)
4. Provide the students with handout ‘Testicular Self-Exam’. Go through the description of how to do a testicular self-exam, as described in the handout.

REMEMBER: Make sure that you explain to the females in the room that this is just as important for them to understand. For those who choose to enter into a committed relationship with a male or plan to have children one day, that this will can come up and they need to be aware of how to have the conversation and how to respond appropriately.

5. IMPORTANT: Make the statement that sometimes we may not be able to always be 100% sure of what the signs and/or symptoms we may feel or see are. It is important not to overreact. The ONLY sure way of knowing is by seeing a medical doctor and getting an ultrasound to determine what it may be. It could be something perfectly normal.
6. Media activity (optional): Use the video of rugby team from New Zealand of playing being walked through a testicular exam. Shows exam and ultrasound being done.
7. Video: https://www.youtube.com/watch?v=_Ifg3Vx4tZg&oref=https%3A%2F%2Fwww.youtube.com%2Fwatch%3Fv%3D_Ifg3Vx4tZg&has_verified=1

NOTE: One of the signs of testicular cancer is often a lump or swelling in the testes. The U.S. Preventive Services Task Force (USPSTF) recommends against routine screening for testicular cancer in asymptomatic adolescent and adults including routine testicular self-exams.[10] However, the American Cancer Society suggests that some men should examine their testicles monthly, especially if they have a family history of cancer, and the American Urological Association recommends monthly testicular self examinations for all young men.[11][12]
HANDOUT: CHECK’EM
Lecture notes: Testicular self examination
The American Cancer Society suggests that some men
should examine their testicles monthly, especially if they
have a family history of cancer. For men over the age of
14, a monthly self-exam of the testicles is an effective way
of becoming familiar with this area of the body and thus
enabling the detection of testicular cancer at an early --
and very curable -- stage.
Video - https://vimeo.com/tcancer/animated

Why do you need to do it monthly? Because the point of
the self-exam is not to find something wrong today. The
point is to learn what everything feels like when things are
normal, and to check back every month to make sure that
nothing has changed. If something HAS changed, you will
know it and you can do something about it.

The testicular self-exam is best performed after a warm
bath or shower. (Heat relaxes the scrotum, making it
easier to spot anything abnormal)

Here is how to do the self exam:
• If possible, stand in front of a mirror or use a hand
  mirror. Check for any swelling on the scrotal skin.
• Examine each testicle with both hands. Place the index
  and middle fingers under the testicle with the thumbs
  placed on top. Roll the testicle gently between the
  thumbs and fingers -- you shouldn’t feel any pain when
  doing the exam. Don’t be alarmed if one testicle seems
  slightly larger than the other, that’s normal.
• Find the epididymis, the soft, tube-like structure behind the testicle that collects and carries
  sperm. If you are familiar with this structure, you won’t mistake it for a suspicious lump.
  Cancerous lumps usually are found on the sides of the testicle but can also show up on the
  front. Lumps on or attached to the epididymis are not cancerous.
• If you find a lump on your testicle or any of the other signs of testicular cancer listed below,
  see a doctor, preferably a urologist, right away. The abnormality may not be cancer, but if it
  is testicular cancer, it will spread if it is not stopped by treatment. Even if it is something else
  like an infection, you are still going to need to see a doctor. Waiting and hoping will not fix
  anything. Please note that free floating lumps in the scrotum that are not attached in any way
to a testicle are not testicular cancer. When in doubt, get it checked out - if only for peace of
mind!
Other signs of testicular cancer to keep in mind are:
- Any enlargement of a testicle or firmness of the testicle
- A significant loss of size in one of the testicles
- A feeling of heaviness in the scrotum
- A dull ache in the lower abdomen, scrotum, or in the groin
- A sudden collection of fluid in the scrotum
- Pain or discomfort in a testicle or in the scrotum
- A unusual difference is noted between testicles
- Enlargement or tenderness of the breasts

You should be aware that the following symptoms are not normally signs of testicular cancer:
- A pimple, ingrown hair or rash on the scrotal skin
- A free floating lump in the scrotum, seemingly not attached to anything
- A lump on the epididymis or tubes coming from the testicle that kind of feels like a third testicle
- Pain or burning during urination
- Blood in the urine or semen

\[ \text{REM EMBER} \]

ONLY a physician can make a positive diagnosis
- Know what is normal for you
- Know what changes to look out for
- Report any changes without delay
HANDOUT:

10 TESTICULAR CANCER SYMPTOMS AND SIGNS

Testicular cancer is a potentially deadly disease. Although it accounts for only 1.2% of all cancers in males, cancer of the testis accounts for about 11%-13% of all cancer deaths of men between the ages of 15-35. It is the #1 cancer for males ages 20-35.

Testicular cancer has two peaks according to age. The first peak occurs before the age of 45 and accounts for about 90% of cases of testicular cancer. A second much smaller peak affects men over 50.

Testicular cancers are often (90%-95%) curable even if they are metastatic. The first sign of testicular cancer is most commonly a little ("pea-sized") lump on the testis (testicular lump).

There may be no real pain, at most just a dull ache in the lower abdomen or groin, perhaps a sensation of dragging and heaviness. To summarize the signs and symptoms of cancer of the testicle, they include:

1. A lump in or on a testicle (testicular lump) is the most common sign;
2. Any enlargement or swelling of a testicle;
3. Shrinking of a testicle;
4. A feeling of heaviness in the scrotum (scrotal heaviness);
5. A dull ache in the lower abdomen or in the groin;
6. A collection of fluid in the scrotum;
7. Discomfort or pain in a testicle or in the scrotum;
8. Enlargement or tenderness of the breasts;
9. Back pain due to retroperitoneal disease spread;
10. Enlarged lymph nodes or masses due to disease spread.

The best hope for early detection of testicular cancer is a simple three-minute self-examination once a month. Of all cancers, when detected early, testicular cancer is the most curable of cancers.
CHECK 'EM
THE BEST TIME TO CHECK YOUR TESTICLES IS IN THE SHOWER

JUST FOLLOW THESE EASY STEPS:

1. Check one testicle at a time.

2. Hold the testicle between your thumbs and fingers of both hands & roll it gently between your fingers.

3. If you notice any of these symptoms...
   • hard lumps
   • smooth or rounded bumps
   • changes in size, shape, or consistency...don’t panic but see your GP straight away.
GRAB YOUR GONADS!

1. MAKE A DATE WITH YOUR TESTICLES
   take the date
   examine your scrotum monthly.

2. KNOW WHEN TO HELP 'EM
   check your family jewels after showering, when the sac is soft and relaxed.

3. CHECK YOUR BALLS!
   using both hands, gently roll the testicles between your fingers.
   notice the size, shape and feel of your balls. Normal testicles will feel soft and move freely inside the scrotum.

   **NUTTY NUGGET**
   testicles move around on their own with help from a muscle called the cremaster.

4. TALK TO YOUR DOC
   any lumps or swelling should be reported to your doctor ASAP.
   other testicular cancer warnings include a dull ache in the abdomen or groin, or blood in your semen.

   **NUTTY NUGGET**
   according to an unscientific poll, 45% of men touch their testicles six or more times a day!

   **DON'T LET CANCER MESS WITH YOUR TESTS**
   this self-exam should not replace the examination and advice of a trained doctor.

   www.iheartguts.com
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GUARDAR TUS GÓNADAS!

1. HAZ UNA CITÁ CON TUS TESTÍCULOS
   examina tu escroto mensualmente.

2. TIEMPO PARA TOCAR
   chequea estas joyas familiares
   luego de ducharte,
   cuando el saco se encuentra suave y
   relajado.

3. ¡VALÉN COMO GEMAS PRECIOSAS!
   usando
   ambas manos,
   haz rodar tus testículos entre
   tus dedos.

4. HABLÁ CON TU DOCTOR
   cualquier bulto o hinchazón
   debe ser reportado a tu
   doctor lo antes posible.

Hechos del Huevo:
- Los testículos se mueven con
  la ayuda de un músculo denominado cremáster.
- Los testículos normales se sienten suaves y se
  mueven libremente dentro del escroto.
- Localiza la epidífismo, un
  trozo de piel en espiral
  arriba y detrás de los
  testículos, revisa en
  busca de bultos
  debajo de la piel
  del escroto.
- No dejes que el cáncer
  juegue con tus
  testículos.

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LESSON 4: “The Face of Survival: A Los Angeles Story”

SUMMARY
The lesson introduces students to a real person who was diagnosed with testicular cancer. Discussion will include the myths and perceptions of a young person and having cancer. Students will be able to hear how the diagnosed younger person found out they had testicular cancer, what steps they took, and what the outcome.

Health Standards
P3 Identify symptoms that should prompt individuals to seek health care.
P9. Identify the importance of medical screenings, including melanoma, breast and testicular examinations, and testing necessary to maintain reproductive health.
P38. Describe steps involved in breast or testicular self-exams.

GOAL(S)
To increase student identify with a young person and what similar myths and perceptions they may have about being healthy. The lesson will help young people take initiative in becoming more empowered to check their bodies for things may or may not be always noticeable, but important to get checked out by a doctor.

OBJECTIVE(S)
1. By the end of this lesson, students will be able to describe how Jonathan felt as young person and how that changed once he realized he had some signs and symptoms of testicular cancer.
2. By the end of this lesson, students will be able to describe how he coped with the treatment during and after his journey with testicular cancer.

Materials
• Teacher Resource: Story of Cancer Survivor
• Handout: Template - Letter to Patient

Procedures
Read aloud Jonathan’s Story (before diagnosis)
Distribute handout Letter to Survivor
Process the story with students
Students will write a letter the survivor
Read aloud Johnathan’s Story (after diagnosis)
ACTIVITY

1. Explain the goals and objectives of the lesson.
2. Distribute the handout or read aloud the Story of a Cancer Survivor Jonathan's Story. Read ONLY the BEFORE DIAGNOSIS section.
3. Host a discussion with students on the story. Ask the students:
   - What did they think of the story?
   - What were things they remembered about the story that resonated with them?
   - Did he seem, like somebody who would had cancer? Did he feel healthy?
   - Can cancer happen to anybody?
   - What did he notice? What action did he take? Not take?
4. Distribute the template Letter to a Cancer Survivor.
5. Have the students write a letter to Jonathon. Students must talk about what emotions they felt while hearing/reading about the story. Students must discuss what precautions they would take to be more aware. Note: Female students can do this from the perspective of having a brother/son/friend who is male.
6. Students can complete letter at home (optional).
7. Students who completed the letter can present and reveal the letter the class (optional). Ask for at least one or two volunteers.
8. Process with the students at closing. Ask if the true story surprised them.
   - Do you think be more aware of your body is important?
   - What are some things that you think about now when it comes to male health?
   - What are some actions you would take?
9. Remind students that they do not have to do this alone and that there are support groups for patients and survivors that can be very helpful.
10. Read the Cancer Survivor Jonathan's Story AFTER DIAGNOSIS section as a closing.
It’s painfully quiet. There’s a quiet hiss from the incandescent lighting. My shoes squeak on the freshly bleached linoleum floor. My feet move but I can’t seem to control them. The hallway from the doctor’s office to the waiting room seems endless as nurses and technicians peek their head from various examination rooms. I was lifeless because thirty seconds earlier, all the life in me was sucked out when I heard, “you appear to have testicular cancer.”

Snap to two hours later, I was a normal guy living in Los Angeles trying to build my future. I landed a job in the entertainment industry; I had an apartment; I had great friends and a girlfriend. I would go to the gym three times a week and frequently played lacrosse. I was a former college lacrosse player and worked on the weekends as a youth lacrosse coach. Other than the annual cold, I was the picture of good health. Between work, my social life and where I was in life, everything was in harmony. Things were falling in place.

One day I was in the shower and as I noticed something that felt like a hard vein on my testicle. I didn’t put any thought into it. A couple of days later, I was showering and felt the hard vein again but this time, it was larger. Almost like a tiny hard bump but I didn’t pay it any attention. I had no reason to because everyone has some abnormality that eventually just goes away. I knew it would go away in time and everything would be fine. The bump became increasingly larger by the day. I immediately became insecure and assured myself that it was nothing. I said it was nothing because I didn’t know it could really be something and if it was something, I sure did not want to know what it was.

At the same time, the dad of one of the kid’s I coach is a doctor and when I told him that I have not had a check up in years. He suggested I come in for one. After weeks of stalling, I finally agreed to make an appointment for that Thursday. Not because I was concerned about that inconvenient lump on my testicle but more that he could finally leave me alone.

I planned on going to the doctor during my lunch hour. The appointment was terribly uneventful and frankly, felt like a waste of time. I was eager to leave and get back to the office. I was ready to leave when I remembered the lump and said, “Oh, there is this lump on my testicle but I am sure it is nothing.” And that is when the doctor said, “Well, let me take a look.” It was somewhat awkward to have a person I know examine my balls but if a woman can go to a gynecologist, hey, I can do this.

After he finished the examination, he said I should I get an ultrasound of the testicle. Somewhat concerned now, I cracked an uncomfortable joke about the ultrasound to de-stress the tension in the room. He didn’t laugh. In fact, the doctor kept coming into the room while I was getting the ultrasound and that’s when I thought something might be wrong. I asked the technician if something was wrong. She said she wasn’t at liberty to say. That’s when I knew something was terribly wrong.

Back in the doctor’s office, I was sitting across the desk from a man who looked pensive, remorseful, like someone that has to tell a friend some really bad news and I heard, “Jonathan, you appear to have testicular cancer.” That’s the exact moment my life changed. I was no longer some normal guy. I was a guy with cancer and in for the fight of his life.
When I came to, I was void. Soon the tears came, followed by the denial, and gut-wrenching calls to loved ones. The hardest call of them was to my parents when I had to tell my mom, a cancer survivor, that their son has cancer. I lied and told them that everything was going to be OK but I didn’t know that to be true. It just felt like the right thing to say. The truth was I was not OK. I needed to come up with a game plan and, to the advice of my doctor, contact a Urological Oncologist – whoever that is.

The next day was filled with appointments at three different hospitals and various doctors. All of them said the same thing, ‘testicular cancer is widely treatable when caught early and if there was a cancer I needed to get, this is the one I wanted’. That sure didn’t make me feel any better. I went from one appointment to the next, to some technician needing to do another ultrasound, or a phlebotomist needing to draw my blood to measure something called ‘tumor markers’. I remember watching the needle piercing my bruised veins, the multiple attempts at sticking me by now required them to draw blood from my arm, and I’ll never forget watching the blood slowly seep into the veins. Seeing my cancerous blood coming from my arm and crying, asking to some higher being to please take this blood and the cancer with it. I am too young for this and too tired to fight.

At my breaking point, I received a call to meet with one more doctor. He was leaving a conference on a Friday afternoon to meet me at the hospital at 5:00p.m. This was it; this was the last doctor I wanted to talk to. So I went, and as I drove up to the hospital, I received a phone call from the hospital that I was booked for surgery that Monday morning. It had to be some mistake. I did not even meet with the doctor… how am I having surgery? What is the surgery? How did they know my name and number?

I walked into the office and there was the doctor, the Urology Chair of the hospital, waiting for me. Freaked out, I wanted answers. He calmly ushered me to an examination room. With a soothing smile and paternal tone he said, “Jonathan, I know you won’t remember everything from today but remember two things. You have cancer and you will live because when we catch testicular cancer early, we can treat it. I know this because I am a survivor and I dedicated my career to helping men like you.” That is all I needed to hear. I broke down and cried in his arms. Based on my initial test results, the doctor thought I would be a good candidate for an orchiectomy and preemptively booked the surgery for Monday morning. It is this calming yet aggressive approach that confirmed I was in great hands.
The only way to determine what specific type of testicular cancer I had and how far the cancer spread is by the removal of the testicle. With testicular cancer, the tumor starts in the testicle and then rapidly uses the lymphatic system to spread throughout the body. It’s one of the fastest growing malignancies, but thankfully due to medical advances, we know exactly how and where the malignancy spreads. It is because of this, early detection is the difference between being diagnosed in stage 1 and 2 or 3 and 4. The type of testicular cancer I had is called non-seminomious and I was diagnosed early with stage 1 cancer. I was given three options for treatment. All of them would result me in being cancer free, the question was which therapy would be best for me. After much thinking, counseling, praying and crying, I decided to have the retroperitoneal lymph node dissection. In the surgery, the doctor would remove the lymph nodes where the cancer would spread next; essentially cutting the ‘bridge’ and preventing it from spreading and thus assuring I was cancer free.

I agreed to a very invasive, long and complex surgery, because I wanted to be cancer free. I didn’t want this surgery but if I needed to have it to be healthy, I was going to do it. Despite how scary, painful, isolating and debilitating it would be. I was ready to fight. Whatever it took, I was going to do it. Even if that meant changing how I viewed my life.

The morning after the surgery, I had various tubes coming out of my body. There was stillness amongst the beeps and bops of the machines. By now, I was oblivious to the IV’s, the tube down my nose sucking fluids from my stomach, bloody bandages covering a 10-inch incision down my abdomen. I was at peace and introspective while outside my window, the sun rose over Los Angeles. What was this experience going to mean to me? How could something as terrible as cancer actually be an agent for something profoundly enriching? That’s when I realized I had the incredible opportunity to begin again and this time, with a purpose. Yes, I was uncomfortable in that moment but it could have been much worse if I was diagnosed in stage 3 or 4. In fact, if I never saw that doctor, I probably wouldn’t be here to tell my story.

I have realized from that there is a double standard in our society when it comes to health. Women openly discuss their health. They are educated and encouraged to examine their breasts for lumps. Mentioning a regular gynecologist check up comes with zero inhibition. While us men will proudly wear pink clothing and apparel – the NFL has pink month where all players wear pink to support breast cancer research – yet the male gender on a whole, refuses to have a serious dialogue about our own medical issues. Especially sensitive issues relating to our reproductive system (penis, testicles, etc.) beyond the dated narrative of chest-pounding rhetoric intended to bolster ones assumed alpha status. But what if we changed that? What if we dropped the façade and entertained the idea that true strength comes from ownership of our own bodies and knowledge of self? Maybe true strength is acknowledging when one is facing a problem bigger than themselves and asking for help? If this should happen, then men could start having productive conversations about our health and living into the distant a long, healthy and purposeful life.
CANCER SURVIVOR LETTER

Name: ____________________________________________________________

Dear Johnathan,

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________
GOAL(S)
To increase student knowledge of where they can link to health to be an empowered patient for themselves.

OBJECTIVE(S)
1. By the end of this lesson, students will be able to describe where they can get help in Southern California for issues around male reproductive health, specifically testicular cancer.
2. By the end of this lesson, students will have an action plan on what steps they would take, if they have a sign and/or symptom of testicular cancer.

Materials
- LAUSD Community Provider Guide
- Handout: Action Plan for My Health

Procedures
Distribute the handout ‘Action Plan for My Health’
Distribute the LAUSD Community Provider Guide
ACTIVITY
1. Explain the goals and objectives of this lesson.
3. Host a discussion with students on what an action plan is and why it is important.
4. Form groups of 3-4 students. If you need to make them smaller or larger, that is OK.
5. Have the students reflect on the past lessons regarding male reproductive health, specifically testicular cancer. Have them think about what they did not know when they started and what they know now.
6. Have the group complete an action plan for their reproductive health. Provide 15-20 minutes for this. Provide assistance where needed on past lessons for facts they may want refreshed.
7. Students will present the action plan to the group.
8. Process the action plan presentations with these prompts:
   • Were the action plans different from one another? Anything missing?
   • Why do you think we created an action plan?
   • Are you familiar with all these steps? Your doctor’s name? How to make an appointment?
   • Do you feel more confident with what steps to take to become more empowered as a patient?
   • Do you think this important only for males? females? parents/guardians?
9. Distribute LAUSD Community Provider Guide for providers in your local area for sexual health services.
MY HEALTH ACTION PLAN

“Helping me stay healthy and well makes me an empowered patient”

“Health Knowledge is useless without positive health behavior. You must put what you know into action for it to work!”

My name: _____________________________

Date completed: ________________

My health issue: ____________________________________________________________

___________________________________________________________

Specifiable signs and/or symptoms: __________________________

___________________________________________________________

Health action I am taking: ____________________________________________________

___________________________________________________________

Did I investigate this online? What Website? _________________________________

___________________________________________________________

Where and who I plan to specifly see about my signs and/or symptoms? ______________

___________________________________________________________

When will this happen? _____________________________________________

___________________________________________________________