

POST TRANSURETHRAL SURGERY INSTRUCTION SHEET

Your recent prostate surgery requires very special post hospital care. Despite the fact that no skin incisions were used, the area around the prostate is quite raw and is covered with a large scab to promote healing and prevent bleeding. Certain precautions are needed to insure that this scab is not disturbed over the next 6 (six) weeks while the healing proceeds.

Because of the raw surface around your prostate and the irritating effects of urine you may expect frequency of urination and/or urgency (a stronger desire to urinate) and perhaps even more getting up at night. This will usually resolve or improve slowly over the healing period. You may see some blood in your urine over the first six weeks. Do not be alarmed, even if the urine was clear for a while. Stay in bed and drink lots of fluids until clearing occurs.

DIET:

You may return to your normal diet immediately. Because of the raw surface, alcohol, spicy foods and drinks with caffeine may cause some irritation or frequency and should be used in moderation. To keep your urine flowing freely and to avoid constipation, drink plenty of fluids during the day (8 - 10 glasses).

ACTIVITY:

Your physical activity is to be restricted, especially during the first two weeks. During this time use the following guidelines:

- a. No lifting heavy objects (anything greater than 10 lbs).
- b. No driving a car and limit long car rides.
- c. NO strenuous exercise, limit stair climbing to minimum.
- d. NO sexual intercourse until okayed by one of your doctors.
- e. No severe straining during bowel movements - take a laxative if necessary.

BOWELS:

It is important to keep your bowels regular during the post-operative period. The rectum and the prostate are next to each other and any very large and hard stools that require straining to pass can cause bleeding. You will be given stool softeners (usually) but these are not laxatives. A bowel movement every other day is reasonable. Use a mild laxative if needed and call if you are having problems. (Milk of Magnesia 2-3 Tablespoons, or 2 Dulcolax tablets for example).

MEDICATION:

You should resume your pre-surgery medication unless told not to. In addition you will often be given an antibiotic to prevent infection and stool softeners. These should be taken as prescribed until the bottles are finished unless you are having an unusual reaction to one of the drugs.

PROBLEMS YOU SHOULD REPORT TO US:

- a. Fevers over 100.5 Fahrenheit.
- b. Heavy bleeding, or clots (See notes above about blood in urine).
- c. Inability to urinate.
- d. Drug reactions (Hives, rash, nausea, vomiting, diarrhea).
- e. Severe burning or pain with urination that is not improving.

FOLLOW-UP:

You will need a follow-up appointment to monitor your progress. Call for this appointment at the number above when you get home or from the phone in your hospital room before leaving. Usually the first appointment will be about 7 - 14 days after your surgery.