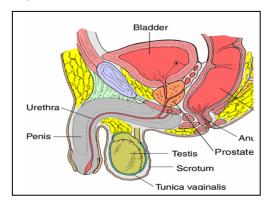
RADICAL PROSTATECTOMY

PATIENT/FAMILY INFORMATION SHEET

What is a radical prostatectomy?

A radical prostatectomy is the surgical removal of the entire prostate gland, the seminal vesicles, the ampullae of the vas and surrounding tissues (including the bladder neck). The bladder is then surgically connected to the urethra.



How do I care for myself after radical prostatectomy?

Care after radical prostatectomy includes paying close attention to the following:

- **1. Activity:** Limit physical activity for the first two weeks after surgery to allow your body to rest and heal. Consult with your surgeon before resuming your normal activity level. Keep in mind the following recommendations:
- No heavy lifting (do not lift anything greater than 10 pounds, i.e. two gallons of milk).
- No driving. Limit long car rides.
- No strenuous exercise, limit stair climbing.
- **2. Bowels:** The rectum and the prostate are situated next to each other (see above). Very large or hard stools that require straining to pass, may be painful and cause bleeding. Take stool softeners each day as prescribed by your physician. A bowel movement every other day is reasonable. A mild laxative or a diet high in fiber may be used if recommended by your physician.
- 3. Catheter Care: Your catheter is very important to allow for healing after surgery.
- You will use a leg bag during the day and a large external (straight drainage) bag at night.
- Empty the bag when it is half full.
- As long as the catheter is draining well, a little blood is normal and does not required treatment.
 Heavy bleeding or clots in the drainage bag should be reported to your surgeon.
- The tip of the penis may get sore from the catheter rubbing or pulling. Keep the catheter relaxed and well-secured to your thigh. You may use plain soap and water to wash this area daily or more often if needed.

How do I care for myself after radical prostatectomy (continued)?

- 1. Diet: You may return to your normal diet. To keep your urine flowing freely, drink plenty of fluids during the day (8-10 glasses). Water is best, but juices, coffee, tea, and soda are also acceptable. Alcohol, spicy foods and drinks with caffeine may cause irritation or a sense of the need to void despite the fact that the catheter is draining the bladder. If these foods are not irritating, they may be consumed in moderation.
- 2. *Hygiene:* You may shower and bathe as usual.
- 3. **Medication**: You should resume your pre-surgery medication, unless told differently by your physician; and take pain medications and antibiotics as prescribed by your physician.

What Do I Need To Report to My Physician?

Report the following problems to your surgeon:

- 1. Fever over 100.5 degrees Fahrenheit.
- 2. Heavy bleeding, or clots.
- 3. Severe pain or increase in pain.
- 4. Call **IMMEDIATELY** if the catheter falls out or stops draining.

What Do I Need To Do For Follow-Up?

1. Take your medications as prescribed (see discharge instruction

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2.	Call your surgeon, <u>Dr.</u>	at		
	denerally your surgeon would like to surgery to monitor your progress and sotheter will be removed in approximately	see you one to remove y	e week aft our staple	er youi
	catheter will be removed in approxima	alely two weer	NS.	

- ♦ Bring a small supply of urinary shield guards to your follow-up appointment. Most individuals do not have good urinary control when the catheter is first removed. Urinary control will gradually improve as you recover.
- 3. Some patients experience a period of impotence after this surgery. It is best to discuss this with your doctor.

For more Patient Education Fact Sheets, see the Greenwich Hospital web site at www.greenhosp.org and click on Patients & Visitors, then Patient Education