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Transurethral Resection of Prostate (TURP)

Postoperative Instructions

DIFT:

You may resume a normal diet as soon as you feel ready after your procedure. It is common for 24 hours after anesthesia to avoid heavy meals and start slowly with clear liquids. Eat plenty of fiber-rich foods for the first 1-2 weeks. Alcoholic beverages are best avoided in the first 24 hours and while taking any narcotic pain medications. Spicy foods, caffeine, and citrus juices may cause bladder irritation in the several days after surgery. It is important to drink plenty of water (6-8 glasses daily) after your prostate surgery.

ACTIVITY:

It is important to avoid strenuous activity and/or exercise for the first 4 weeks after your surgery. This includes avoiding golfing, tennis, and jogging, working out/stretching activities, lawn work such as mowing, raking, shoveling, sexual activity, and any lifting more than 15 lbs. Discuss any specific work-related concerns you have with your urologist.

MEDICATIONS:

Your urologist will likely prescribe a narcotic pain medication-take this as needed per the instructions. Note that these medications can cause upset stomach and be constipating. Not everyone needs this narcotic pain medication and you may try extrastrength acetaminophen (Tylenol) over the counter first (Beware of taking any other medications that contain acetaminophen so as not to take too much). You may also be prescribed additional medications that soothe the urinary tract and/or minimize spasms of the bladder. A preventative antibiotic may be given for a 24-hour period after your surgery.

It is important that if you take a daily blood-thinning/anti-platelet medication (Coumadin/warfarin, aspirin, Advil/Motrin, Lovenox, Pradaxa, Eliquis, Xeralto, Plavix, etc) that you only restart this as instructed by your physicians.

If you were taking medications for BPH prior to surgery, continue these until your postoperative appointment.

BOWELS:

It is important to avoid constipation as you recover from your prostate surgery. Straining with bowel movements can increase the risk of bleeding from the urinary tract. Drink plenty of fluids (especially water). Narcotic pain medication can be constipating and it is important to take an over-the-counter stool softener/laxative to help prevent constipation (Miralax, milk of magnesia, Colace, etc).



FOLEY CATHETER:

You will typically have a Foley catheter for 1-2 days after your TURP. This is typically removed prior to discharge from the hospital. Occasionally, due to effects of anesthesia and other medications, swelling in the urinary tract, or bladder dysfunction, a patient is not able to urinate immediately after the catheter is removed. In these cases, a catheter may be reinserted and then removed later in the office.

See "Foley Catheter Care Instructions."

EXPECTED SYMPTOMS:

It is common to have pain or burning sensation when urinating, urgency to urinate frequently, and blood in the urine for several days after your surgery. Some men have dribbling after urination and mild leakage that will improve with time. When you are able to resume sexual activity, it is normal to not have any fluid with orgasm (retrograde ejaculation). Contact us for worsening/severe pain and/or burning, fevers and chills, severe bleeding with passage of large blood clots, or inability to pass urine.

FOLLOWUP APPOINTMENT:

Our office will contact you to schedule your follow-up appointment. This will typically be in 1-2 weeks.

PATHOLOGY RESULTS:

In some cases samples of prostate tissue is sent to pathology and results will be reviewed with you at your follow-up appointment. These will not be given out over the phone.