

## TRANSURETHRAL PROSTATECTOMY (TURP)

### OVERVIEW

This path way has been developed in an effort to streamline the episode of care for your Transurethral Prostatectomy and is intended as a guide only.

Each patient is an individual and responses may vary. Sometimes you may need to initiate treatment by advising nursing staff of your additional needs, such as more rest, sleep or extra pain relief.

### DAY OF SURGERY

#### Admission

- On arrival to hospital, you will be admitted to the Day Procedure Unit.
- Your temperature, pulse and blood pressure will be taken and you will be weighed.
- Your surgeon may visit and your anaesthetist will also see you to discuss the type of anaesthetic you are going to receive.

*Please discuss any concerns you have with any of the health professionals that you see pre-operatively.*

#### Observations

- After surgery, you will be closely monitored in the recovery room.
- On return to your room, a nurse will continue to monitor your observations frequently and then less often as you recover.
- If you are a diabetic, your blood sugar will be taken.

#### Hydration / nutrition

- After surgery, you will have an intravenous drip in your arm for the replacement of fluids.
- You may experience nausea as a result of the anaesthetic, but medication can be given to help relieve this.
- You will be allowed to have fluids and a light meal (as directed by your surgeon).

#### Medications / pain management

- You may require one or two injections for pain relief initially, and then oral pain relief will probably suffice.
- Your normal medications will be recommenced when you are able to eat, unless otherwise ordered by your doctor. Please let your nurse know if your pain is unacceptable so that drug doses can be adjusted accordingly.

#### Hygiene / eliminations

- When you wake up after your procedure, you will have a urethral catheter inserted through the penis and into your bladder, to drain urine. This will be attached to two large bags of saline water (a continuous bladder washout), which will flush your bladder and remove any clots or bits of tissue.
- The colour of your urine may be red, but this is normal.
- You may experience a small bloody discharge from the penis around the catheter and a pad may be taped around the penis.

#### Mobility / safety

- After surgery, it is very important that you practice deep breathing, coughing and limb movements every hour, while you are awake. This will help to prevent complications post-operatively, such as deep vein thrombosis or a chest infection.
- Remain in bed with the buzzer within reach and keep the bed rails up until you are alert.
- **You will be required to remain in bed for 12 hours after your spinal anaesthetic.**

#### Rest and sleep

Initially post-operatively, your nurse will need to interrupt your rest frequently to care for you. The interruptions will become less frequent as you recover.

## DAY ONE

### Observations

- Your observations will continue to be recorded until you are discharged, but less often each day.
- If you are a diabetic, your blood sugar levels will also continue to be checked.

### Hydration / nutrition

- When you are tolerating food and fluids, your intravenous drip will be removed.
- Please tell your nurse if you become nauseated, so that medication can be given to help you.
- You will be required to drink sufficient fluid each day (as instructed) until you go home, to keep your bladder well flushed.

### Medication / pain management

Pain relief and your normal medications can all be taken orally today. If you need more pain relief, please advise your nurse.

### Hygiene / eliminations

- Your bladder washout will likely be removed today, leaving just the catheter remaining.
- Your nurse will assist you to get up for a shower.
- Please ensure that you have a nurse with you when getting out of bed for the first time.
- You must avoid constipation and straining when attempting to open your bowels.

### Mobility / safety

- It is important that you continue to do your deep breathing, coughing and limb movements every hour, while you are awake, for the whole of your stay in hospital.
- Please sit out of bed for meals and take short walks around the ward once your bladder washout is removed.
- You must avoid prolonged sitting.

## DAY TWO (until discharge)

- It is important to maintain sufficient fluid intake (as instructed), until you go home and to also avoid constipation, straining and prolonged sitting.
- If you have not had your bowels open, you will require an aperient.
- Your catheter will be removed overnight, however this time may vary slightly depending on your surgeon's request.

- You will be required to use urinal each time you pass urine so that so that nursing staff can monitor the amount of each sample.
- You may experience some difficulty and discomfort when you go to pass urine.
- You may also have some urgency and loss of control at first, but this will gradually improve.
- The urine will probably appear blood stained.

## DISCHARGE

- A follow up appointment with your doctor and prescriptions for medications will be organised on your behalf.
- Remember to ask for your xrays and own medications to take home with you.
- Further information on your continued recovery at home will be given along with contact details in the event of complications.
- You will be required to drink at least two litres of fluid a day and avoid any heavy lifting or straining.
- Immediately report any difficulty or blockage with passing urine.

Mildura Health Private Hospital  
220-228 Thirteenth Street  
MILDURA VIC 3500

P O Box 751  
MILDURA VIC 3502

T: 03 5022 2611

F: 03 5022 1286

W: [www.milduraprivatehospital.com.au](http://www.milduraprivatehospital.com.au)

E: [reception@mildpriv.com.au](mailto:reception@mildpriv.com.au)

