

Golden State Urology

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Post-Operative Instructions for Robotic Radical Prostatectomy

In an effort to ensure optimal recovery, it is essential that you carefully read and follow the below instructions. While robotic prostatectomy is performed routinely, it is still a relatively major surgery, which will require some time and effort to recover.

Leaving the hospital:

- **Patients will be generally discharged from the hospital approximately 24-36 hours after surgery.**
- **You are not permitted to drive home by yourself, so please coordinate to have someone pick you up upon leaving the hospital. Driving is not permitted until your catheter is removed.**
- **If you have not passed gas the night after you're discharged, you are required to take a 1/2 bottle of Magnesium Citrate. If you have not passed gas 2 hours after, you are to finish drinking the other half of the bottle.**
- **You are not permitted to shower until 48 hours after surgery.**
- **Walking is very important after surgery. You are allowed to climb steps and walk as much as you can tolerate.**
- **If you have a fever above 101°F please call the office**

Diet:

Remain on a clear liquid diet such as Jell-O, broth, apple juice, water, Gatorade and sorbet until you have passed gas rectally.

Once you have passed gas, you can begin to consume a soft diet consisting of: *Cereal, Sweet Potatoes, Oatmeal, Chicken Noodle Soup, Scrambled Eggs and Toast.*

After your first solid bowel movement you can begin a regular diet except the following for one week: *No carbonated drinks such as soda, ginger ale and seltzer in addition to gassy foods such as broccoli, beans, cabbage and spicy foods.*

Restrictions for 6 weeks:

- Avoid straining/pushing during bowel movements
- € Avoid sitting in one position for more than 45 minutes
- € Avoid exercising or any sports activities
- € Avoid taking a bath or swimming
- € Avoid heavy lifting , > 25lbs

Catheter care:

- Each patient will leave the hospital with a urinary catheter in place. This catheter is known as a Foley catheter which is held in place by a balloon inside the bladder. Do not try to remove this catheter on your own.

- € The catheter will remain in place for approximately 7 - 10 days. It will be removed at our office.

- € **If you don't have any urine output for 3 hours and you are feeling discomfort in your lower abdomen**, you must go to your nearest emergency room and contact our office.

- € You are required to change the tape around the catheter every 2 days in an effort to prevent blistering.

- € At the end of the catheter there is a balloon which prevents the catheter from falling out of the penis. You will be provided with a large bag upon leaving the hospital which should be used at home for draining. When you are going out, you can use a smaller bag which is placed under your pants or "Leg Bag."

- € It is normal to have urine and blood leak around the catheter. This is particularly normal when you are experiencing bladder spasms.

- €Blood/blood clots in the urine are also normal. If you see this occurring be sure to hydrate yourself in an effort to flush out any clots.

- €You can use Lidocaine gel or any antibiotic ointment to lubricate the outside of the catheter where it enters the tip of your penis. The ointment will reduce inflammation and discomfort to the urethral. Apply it as needed.

- €Kegel exercises are not permitted while the catheter is in place. Once it has been removed, you can resume doing the exercises.

Things you might encounter after surgery:

- Abdominal Distention, Constipation or Bloating: These are normal reactions to surgery. You may take a stool softener as directed.

- €Bladder Spasms: Bladder spasms are typically associated with a sudden onset of lower abdominal discomfort, a strong urge to urinate or with sudden leakage of urine from around the catheter. Take the *Oxybutinin 5 mg* also known as *Ditropan* which is given at the time of discharge. **It is important to discontinue these medications the day before the catheter is removed.**

- €Bloody Drainage around the Foley catheter or in the urine: Having pink-cranberry tinged urine or the occasional bright red drops at the beginning or end of urination or with a bowel movement is normal for approximately six weeks after surgery even after having clear urine for weeks.

- €Bruising Around the Wound Sites: This is normal and the bruises will heal over time.

- €Lower Leg/ Ankle Swelling: Swelling is normal and should go away within a week or two. Elevating your legs while sitting will help.

Call immediately if swelling is present in only one leg. A blood clot or DVT in your leg can occur with this surgery. You are encouraged to flex your legs. Walking also helps to prevent blood clots.

- €Perineal Discomfort (pain between your rectum and scrotum): This may last for several weeks after surgery, but it should resolve on its own. Use a donut for sitting. This discomfort eventually goes away. If you are feeling significant pain despite pain medication, contact us.

- **Scrotal/ Penile Swelling and Bruising:** This is not abnormal and is not a cause for serious concern. You might notice scrotal/penile swelling any time from immediately after surgery to five days later. It should go away on its own in a week or two. You might try elevating your scrotum on a small rolled up towel when you are sitting or lying down to reduce swelling. Also, wearing supportive underwear (briefs, not boxer shorts) is advisable.

Reportable Signs and Symptoms that require immediate medical attention:

- **€Fever of 101°F, swelling, redness or large amount/smelly drainage from abdominal surgical incisions. A little yellowish/bloody drainage is acceptable.**
 - **€Nausea, vomiting, unrelieved abdominal distention and pain.**
 - **€Significantly large amount of blood with blood clots in urine**
 - **€Significant decrease in urine output and/or inability to urinate.**
 - **€Pain or swelling in one leg or calf.**
 - **€Chest pain or shortness of breathe**
- Discharge Medications:**
- **€Extra Strength Tylenol is suggested to help comfort your pain. In the event that the Tylenol is not helping, an alternative medication will be prescribed upon discharge such as Norco .**
 - **€The below four medications will be prescribed upon your departure:**
 1. ***Oxybutinin/Ditropan:*** (anti bladder spasm). **One tablet is to be taken once a day and stopped one day before catheter removal.**
 2. ***Cipro:*** (antibiotic).(Bactrim- if allergic to penicillin). **One tablet is to be taken twice a day and started one day before catheter removal.**
 3. ***Colace:*** (stool softener). **Take one tablet after a meal, three times a day for the first week after your surgery. If diarrhea occurs stop the Colace.**
 4. **Norco:** (pain medication). **Take one tablet every 4-6 hours as needed for pain control.**