Hospitalisation—Radical Prostatectomy

Frequently Asked Questions

This information leaflet is designed to let you know what you can expect during your stay This is however, only a guide and your progress may vary from this outline. Please read this information and if you have any questions or concerns at any time, please discuss these with Dr Campbell.

Going to Hospital, and in particular being admitted for a procedure can be a threatening and stressful situation. We appreciate the anxiety that you might be feeling and in order to make the situation less stressful we have designed these leaflets which hopefully will give you a better understanding of what to expect when you have a procedure.

How long will I be in hospital?

The estimated length of stay is 3-5 nights

If you have any concerns about your ability to cope after your surgery, please discuss this with the nursing staff on admission to hospital.

Community services can be arranged if required, but please note they are not always readily available and not all patients are eligible for funded services

Please bring your medications and any x-rays relevant to your surgery into hospital

After surgery your pain will be controlled effectively with medication

Prior to discharge, your wound will be clean and dry and continuing to heal, and you will have resumed your normal

What happens after I get to hospital?

You will be taken to the Day of Surgery Lounge where a Nurse will complete a medical history if this was not completed prior to your admission.

Your temperature, pulse, blood pressure and weight will be

If you take regular medication, you will continue to do so throughout your stay unless otherwise instructed by Dr Campbell.

If you have any questions about your surgery or hospitalisation please ask your Nurse or Dr Campbell.

What happens before the procedure?

You should not eat or drink for six hours prior to surgery

You should have showered prior to coming into hospital. Please advise your Nurse if you have not done so

If you have been taking blood-thinning or anti-inflammatory medication (such as warfarin, aspirin, or alternative medicines), please advise your Nurse

You will be dressed in a theatre gown and disposable underwear. Compression stockings will be applied to your

You may have a blood test, heart tracing or x-ray taken before your surgery

The Anaesthetist may visit you before you go into surgery

Dr Campbell will visit you before the procedure.

What happens after the procedure?

If requested Dr Campbell will ring a family member to notify them of the outcome of your procedure. You will be taken to the ward on your bed

- ~ Your Nurse will check your temperature, pulse, blood pressure, wound dressing, pain level, and urine regularly
- ~An intravenous drip inserted during surgery will keep you
- ~ A urinary catheter inserted into your bladder during surgery, will help you pass urine easily
- ~ Your pain will be controlled with regular medication that your Nurse will monitor closely. Nursing staff will educate you on how to best manage your pain. You will have an infusion that provides continuous local anaesthetic to assist

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with your wound pain. This will be removed after 48 hours

- ~ A drain inserted into your wound will assist to remove excess fluid and there will be a dressing covering the wound
- ~You will be required to rest in bed
- ~ Nursing staff will help you with your hygiene and toileting needs
- ~ You may be able to have sips of water/ice after surgery, as instructed by Dr Campbell.

Please check with your Nurse before you have anything to eat or drink

What happens the following day?

~ The urology team will visit you today

Please remain in your room and attend to your daily morning hygiene after this morning ward round.

- ~ Nursing staff will check your temperature, pulse, blood pressure, wound dressing, pain level and urine regularly.
- ~ Regular pain medication will continue for 2-3 days after your operation, until your pain is able to be controlled with tablets
- ~ You will commence a light diet today. You will progress to a normal diet when your Dr Campbell says it is safe to do so. Please check with the Nursing staff before you eat or drink anything
- ~ The Physiotherapist will meet with you to assist you to mobilise
- ~ Early progression of your walking and regaining your independence in daily activities is essential to a good recovery. To do this it is important to tell your Nurse if you have pain and take regular pain relief
- ~ Nursing staff will help you with your hygiene needs, as required

What happens the days following surgery until discharge?

- ~ The urology team will visit you daily.
- ~ Nursing staff will continue to check your temperature, pulse, blood pressure, wound, urine and pain level regularly.
- ~ You can have regular medication for pain. It is important that you tell Nursing staff if you have pain
- ~You will be encouraged to drink about 2 litres of fluid per day
- ~ Your drain will be removed as instructed by Dr Campbell.
- ~ You will be discharged with the urinary catheter in place. An

- appointment will be made for catheter removal soon after discharge in the continence clinic. Continence advise will be given prior to discharge and on review in the continence clinic.
- ~ The Physiotherapist will continue to meet with you to ensure you are mobilising and continuing with exercises that will help improve your recovery. You will be required to sit out of bed each day
- ~ Nursing staff will help you with your hygiene and toileting needs, as required
- ~ Normal bowel habits are sometimes disrupted after surgery. If you are concerned, your Nurse can offer advice on ways to resolve this common problem

If you have any concerns about how you will manage at home, please discuss this with your Nurse. You may be referred to the Care Coordinator who will assess your situation for any eligibility and availability of postdischarge services.

What happens on the day of discharge?

~ The urology team will visit you today.

Dr Campbell may visit you today

- ~ Medication will be dispensed by the Pharmacist, if required
- ~ If you have a drip in your arm it will be removed before you go home
- ~ Arrangements for a follow-up appointment and wound care instructions will be explained to you before you go home
- \sim Discharge time is 10am. Please arrange for someone to collect you by this time

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Discharge Advice Following Prostate Surgery

You should

Take medication to control any discomfort, as prescribed.

Contact Dr Campbell if you begin to feel unwell or start to experience increasing pain, fever, swelling or bleeding around your wound, or have difficulty passing urine. You may see blood in your urine for up to six weeks after your surgery

Shower as usual unless instructed otherwise. Your wound may have a dressing applied. You can remove this as instructed by Dr Campbell.

Wear continence pads at all times after removal of your catheter.

Continue with the exercises that the Physiotherapist has shown you

Remember that you may feel tired easily for the first few weeks after you go home, so get plenty of rest and eat a well balanced diet

You should avoid, for six weeks after discharge

Heavy lifting or straining, for example shopping, gardening, playing golf

Recommence driving when you feel that you can perform the emergency brake procedure normally.

What else should I look out for?

If you develop a fever, severe pain on passing urine, inability to pass urine or worsening bleeding, you should contact Dr Campbell on (o₇) 3367-1608, or your family doctor since you may require treatment with antibiotics and/or the temporary passage of a catheter. For after hours emergencies Dr Campbell can be contacted on (o₇) 33671608.

The Wesley Hospital Emergency Centre (\circ 7) 3232-7333, and The Greenslopes Private Hospital Emergency Centre on (\circ 7) 3394-7111 are other resources that are also available.

Are there any other specific points?

Your referring doctor will be sent a report of the procedure and the results of all biopsies. You will be asked to make a follow-up appointment after discharge to discuss any further treatments. Additional or alternative treatment may, however, be recommended prior to discharge.

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Who can I contact for more help or information?

Dr Peter Campbell

Suite 9, level 9, Evan Thomson Building, The Wesley Hospital, Chasely St, Auchenflower, QLD 4066 (07) 3367 1608, www.campbellurology.com.au

The Wesley Hospital, Urology Ward

451 Coronation Drive, Auchenflower, QLD 4066 (07) 3232 7168 www.uhc.com.au/wesley

The Wesley Emergency Centre

451 coronation Drive, Auchenflower, QLD 4066 (07) 3232 7333

Greenslopes Private Hospital, Continence Advisor

Newdgate St, Greenslopes, QLD 4120 (07) 3394 7978 www.greenslopesprivate.com.au

Greenslopes Private Hospital Urology Ward

Newdgate St, Greenslopes, QLD 4120 (07) 3394 7261 www.greenslopesprivate.com.au

Greenslopes Private Hospital Emergency Centre

Newdgate St, Greenslopes, QLD 4120 (07) 3394 6777 www.greenslopesprivate.com.au

The Queen Elizabeth II Jubilee Hospital, **Urodynamics Department**

Kessels Rd, Coopers plains, QLD 4108 (07) 3275 6346

American Urological Association Foundation

1000 Corporate Blvd, Suite 410, Linthicum, MD 21090 1800 828 7866 www.UrologyHealth.org

Thank you for taking the trouble to read this information sheet. If you are satisfied with the explanation of the test, please sign below and this leaflet will be filed in your chart.

If you wish to retain a copy for you own records, one will be provided.

I have read this information sheet and I accept the information it provides.

Signature Date