

Radical Prostatectomy



UHN

Information for patients preparing for this operation

What is a Radical Prostatectomy?

In this operation we take out the prostate gland and the seminal vesicles. We may also take a small sample of your pelvic lymph nodes to see if the cancer has spread.

The prostate is a gland that surrounds your urethra where your urethra meets your bladder. The seminal vesicles are two small fluid-filled sacs above your prostate.

What happens before your operation?

You can prepare for this operation by reviewing the educational materials given to you as well as this care guide. Write down any questions you have and bring them to your preadmission appointment.

Remember:

- Bring someone with you to your appointment.
- Bring your health card with you and any other insurance cards.
You will need the policy number of your extended health insurance if you have any.
- You will have an appointment in the Pre Admission department:
- Pre Admission is located at Toronto General Hospital, Ground floor Eaton Wing.
 - We test your blood and do an ECG (electrocardiogram) and/or a chest x-ray to prepare you for the operation.
 - You meet with the Pre Admission nurse who goes over basic information about the operation with you. She will also review your health history.
 - You will meet the Urology Nurse Coordinator who works with the Urologists and can answer most questions about the surgery.
 - You might also see an anesthetist, and/or a medical doctor during this appointment.

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What to do the day before your operation

1. DO NOT eat anything the full day before your operation.
2. Drink clear fluids **only** for the whole day. NO solid foods or milk products.

Examples of clear fluids you are allowed to drink:

- ✓ Apple juice
- ✓ Orange juice (without pulp)
- ✓ Grape juice
- ✓ Cranberry juice
- ✓ Lemon-aide
- ✓ Beef or Chicken Broth (no noodles or vegetables)
- ✓ Jello / Popsicles
- ✓ Pop (i.e. Ginger ale, 7-Up, coke)
- ✓ Water
- ✓ Coffee / Tea

By drinking warm fluids such as tea and broth you may find you do not feel as hungry.

Do not eat or drink anything after midnight the night before your operation. Your stomach has to be empty.

3. You will need to buy a fleet enema at your pharmacy to be taken the evening before your surgery.
4. You will need to give yourself the enema anytime in the evening before your surgery. Follow the instructions on the package.

What to do the morning of your operation

- Arrive **2 hours before** your scheduled operation time at Surgical Admission Unit 2nd Floor NCSB.
- We will prepare you for surgery.
- We will shave or clip the area for your operation.
- We will give you a small needle with medication Heparin to help decrease the chance of developing blood clots.
- We will give you an intravenous (IV). This is a small needle that we put in a vein in your arm. We use it to give you one or all of the following:
 - fluids
 - antibiotics
 - pain medication

What to expect after the operation

You will wake up in the Patient Anesthetic Care Unit (PACU).
You will stay in PACU for about 1 hour or so.

You will be attached to some or all of these tubes:

- **IV** - We usually take the IV out as soon as you can drink fluids and pass gas.
- **Oxygen** - We usually give patients in this room oxygen to help them breathe. We use either nasal prongs or a clear plastic mask.
- **Jackson Pratt (JP)** - The JP is a drain that we put in your lower abdomen (below your belly button) to drain any extra fluid that you have there after your surgery. We usually take it out in 1-3 days.
- **Staples** - We use staples to close up surgical incisions. The staples go along the line of the incision. They are usually taken out in 7 to 10 days. Some surgeons use sutures (stitches) to close the incision. These will dissolve on their own. You don't need to take them out.
- **Catheter** - This tube goes up the penis to drain urine from your bladder. It stays in for about 2 weeks.
 - The catheter might make you feel like you have to urinate. You might also feel muscle spasms in your bladder that cause discomfort. These spasms can come and go. There is a medication that can help to calm the spasms.
 - It is important to keep the catheter clean. A nurse will show you how to do this before you go home from the hospital.

How will you feel after the operation?

It's normal to feel some pain after surgery. We will make sure that you have the least possible pain.

- The nurses will give you a medication called Toradol through the IV every 6 hours.
- The first dose of this medication is given before you wake up from surgery. If you feel that you need more medication, the nurse can bring in extra medication.
- Once you are eating and drinking we will prescribe pain pills that can be taken as needed.
- You might feel muscle spasms in your bladder because of the catheter. Let the nurse know if you are having pain in your bladder area.
- You might feel gas pain in your stomach area a few days after the operation. Walking will help you get rid of this pain.
- Your scrotum may be swollen and bruised for a few days to one week. This is normal. If your scrotum is swollen, we will show you how to rest your scrotum on towels when you are in bed. When you are out of bed, you can use a scrotal support or wear brief underwear to help support your scrotum.



How to take care of yourself after the operation

- Start some deep breathing and coughing exercises. We'll show you an exercise called Incentive Spirometry. We have information pamphlets on this.
- The day after your operation, you should start walking again. We will help you.
- You will shower while you are in the hospital. Once you are at home, showers are recommended because you should not be soaking in a bath with a catheter.
- Wiggle your toes and move your feet. This helps the blood in your legs to circulate.
- When your catheter is taken out, start doing Kegel exercises. They will strengthen the muscles in your pelvis. We will give you a pamphlet on how to do Kegel exercises.

How long will you stay in the hospital?

You can usually go home in 2 to 3 days.

If you have staples that need to be taken out after you get home, we will arrange for a community care access nurse to come into your home to remove them.

How to take care of yourself when you go home

- Do not strain during bowel movements. Use the stool softeners prescribed for you.
- You may notice your urine in the drainage bag is at times dark red. This is normal. Drink more water to help clear the urine.
- You may find that at times you may leak urine around the catheter. This is normal.
- You can go back to your normal activities when you feel ready. You might get tired easily. Listen to your body and don't do more than you can handle.
- Don't lift heavy things for 6 weeks after your operation. Anything over 5 kilograms or 10 pounds is too heavy.
- If you are instructed, don't take anti-inflammatory medication for 2 weeks after the operation. It may cause bleeding.
- Do not drive yourself for 2 - 3 weeks after surgery.
- Do not take long car trips. If you are driving a distance, stop every 2 hours.

Your follow-up appointments

- Before you leave the hospital we will give you two follow up appointments.
- At your first appointment about 2 weeks after the surgery, you will go to the Cystoscopy department, 2nd Floor NCSB at TGH. Your catheter will be taken out during this appointment. Bring the incontinence pads with you.
- Nurses will reinforce Kegel exercises with you.
- If you live outside the GTA and decide you would like the catheter removed closer to home, you will need to plan this with your family doctor or referring urologist.



At your 7-week appointment:

Test Results

- At your 7-week appointment your surgeon will talk to you about the test results.
- Before coming in for your 7-week appointment, which has been made for you, you need to arrange to have a PSA (prostate specific antigen) test done anytime during week 6.
- We recommend that you do this test at a LifeLabs Medical Laboratory Services. You can find your nearest location by checking their website www.lifelabs.com. We will give you a requisition before you go home.
- If you decide to have the PSA test done at TGH or PMH, you will need to call your surgeon's office to put the order in the computer.

Please watch for these signs and symptoms. Call the 6A west Nursing station if you:

- Bleed heavily and it is bright red blood (not dark old blood) when you urinate. The bleeding does not decrease when you try resting and drinking more water.
- Have a fever, so your temperature goes higher than 38° C, and/or you feel chills.
- Have redness or increased pain where your incision is.
- Have a decrease in the flow of your urine (the urine stream is not as strong as it was) or if you cannot pass urine at all.

Important

Go to the nearest emergency department if there is pain, redness, or swelling in your calf or your leg.

How to contact us

Nursing Unit 6 A West 416-340-3521
Urology Clinical Coordinator, Leah Jamnicky 416-340-4666

The Nurse Coordinator will answer any questions or concerns you have once you get home. If you are calling after hours, call the Nursing Unit 6 A West instead and ask for the nurse in charge.

Urologists

Dr. A. Finelli 416-946-2851
Dr. N. Fleshner 416-946-2899
Dr. M. Jewett 416-946-2909
Dr. M. Robinette 416-340-3855
Dr. J. Trachtenberg 416-946-2100
Dr. A. Zlotta 416-586-3910



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