

PATIENT NAME: _____

FOLLOWUP APPOINTMENT: _____



DISCHARGE INSTRUCTIONS & FREQUENTLY ASKED QUESTIONS

How do I reach you if I have a question or problem?

For any urgent concerns please call the UNM Hospital Operator at 505-272-2111 and **ask to page the urologist on call (NOT the nurse)**. Identify yourself as a patient of Dr. Shah with prostate cancer who just underwent robotic surgery. We are available 24 hours a day, 7 days a week. For non-urgent questions, please call Dr. Shah's nurse Patricia (Trish) Seeber at 505-925-0246. Trish is off on Fridays but you can reach Roselynn Mendoza at 505-925-0248.

How do I take care of the foley catheter?

You will be discharged with 2 types of catheter collection bags – 1) a large, overnight foley bag, and 2) a small leg bag. Generally, we recommend using the large bag at all times which is easier to work with. The bags do not need to be changed unless visually dirty. We recommend letting soapy water fall on the catheter and the bag in the shower to keep it clean.

If you do use the small leg bag, wait at least 3 days after the surgery, and only use the small bag during the day. It is very important to empty the leg bag at least every 1-2 hours or when $\frac{1}{2}$ full – if you do not, urine can back up into the bladder which puts unnecessary stress on the connection we made between the bladder and urethra. You must go back to the larger overnight bag when you go to bed. Wash your hands before changing the collection bag to prevent infection.

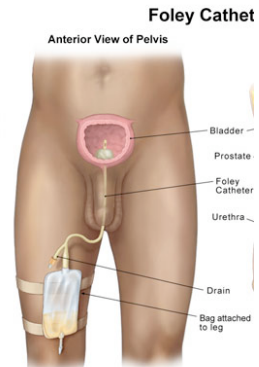
The catheter is **CRITICAL** to proper healing after surgery; please be careful with it at home. It **cannot** get accidentally pulled, stepped on, etc. It should be secured to your leg at all times in two locations – 1) on your upper thigh using the Stat-Lock device, and 2) on your mid thigh using tape, as instructed to do so by Dr. Shah. This gives you an extra level of security. It is important to make sure the collection bag is always below the level of your bladder and that the tubing doesn't get kinked. The idea is to let urine flow freely via the direction of gravity. For the large bag, some patients may find it convenient to where loose fitting clothing and cut a hole in the side of their pants to allow the bag to exit there. Or you can thread it all the way down the leg.



Overnight bag



Stat-Lock holds catheter



Leg bag

If there are any problems with the catheter, it stops draining, or it becomes dislodged call us **IMMEDIATELY**. Only Dr. Shah, his nurse, or one of our UNM Urology physicians can manipulate the catheter. Do not let any other physician or nurse manipulate or remove your catheter.

The catheter is bothering me. What do I do? (Bladder Spasms)

The foley catheter can sometimes cause discomfort by irritating the bladder. You may feel a strong urge to urinate or have pain at the tip of the penis. This can be normal. First, try standing up and walking around which will allow more urine to drain out of the bladder.

If the discomfort persists, **and as long as urine is draining well**, you are probably experiencing bladder spasms and can take Ditropan. However, try to minimize usage of this drug because it will cause dry mouth and cause constipation. If you are not having much catheter discomfort, do not take Ditropan at all.

What about blood in the urine?

You may see blood in the urine periodically, especially after walking. This is normal. Try to drink more water so that the urine becomes more clear. If there are blood clots or the catheter is not draining, call us immediately.

Urine leaks around the catheter.

A small amount of urine may leak around the catheter, especially when you are having a bowel movement. This is normal, as long as most of the urine is still passing through the catheter.

We recommend buying a package of Depend Guards for Men (www.depend.com/products) or Assurance Guards for Men which will be useful now, and for the initial time period of incontinence after catheter removal. After catheter removal, some patients like brief (underwear type) guards, while other men prefer just a panty-liner type guard.

When can I shower or bathe?

You may shower and get the incisions and foley catheter wet as soon as you get home. Do not scrub the incisions. Do not soak in a tub! Also, avoid hot tubs, swimming pools which can predispose you to infection. Do not remove the pieces of tape over the incisions (the Steri-strips) – allow them to fall off naturally. Do not scrub the incisions which can cause them to separate.

What can I eat and drink after surgery?

Start with liquids, broth, jello until you are able to pass gas regularly. Thereafter, you may eat solid food, especially soft and easily digestible foods such as mashed potatoes, yogurt, and soup. Make sure to drink at least 8 glasses of water daily. Avoid sodas and other carbonated beverages. Water, fruits, and vegetables will also help prevent constipation, which can put unnecessary stress on your body.

What if I have pain at home?

You will be discharged with oral pain medications (Vicodin or Percocet) which should be used primarily for abdominal and incisional pain. Try to switch to extra strength Tylenol after a few days which is easier on your stomach and less constipating.

What medications can I take? What medications do you give me?

You may now resume your regular medications, except blood thinners such as Aspirin, Coumadin, or Plavix.

You will be discharged with 4 medications 1) Vicodin (hydrocodone) or Percocet (oxycodone) 2) Colace (docusate), 3) Ditropan (oxybutinin), and 4) Cipro (ciprofloxacin). The colace is a stool softener. Ditropan is for bladder spasms (see below). The Cipro is an antibiotic that you will start the evening prior to catheter removal. Over the counter medications that are sometimes helpful include Gas-X (simethicone), Milk of Magnesia, Tylenol extra-strength, and Dulcolax suppository.

I'm not able to pass gas or have a bowel movement.

You may have some gas pain for 1-2 days after discharge. Walking and taking Gas-X may help. If you haven't passed gas by day 3, you may need to take an over-the-counter Dulcolax suppository. However, check with Dr. Shah before you take a suppository.

It may take several days for you to have a bowel movement. This is normal. You may take over the counter milk of magnesia in addition to the colace. Please call us if the problem persists.

Sex

We recommend waiting at least 4-6 weeks before resuming sexual intercourse. You will be able to climax but there should be very little or no ejaculate. The recovery of erectile function is variable for each patient – some have immediate return (while the catheter is still in place), while others can take years to recover this function. Dr. Shah will discuss the recovery of erectile function and treatments with you during your follow up visits.

When can I start walking?

Walking is **CRITICAL** after surgery and encouraged when you are at home since it prevents blood clots and helps you recover faster.

How about exercise and lifting?

We recommend no lifting more than 10 lbs for at least one month. Absolutely no vigorous exercise (running, weight lifting, bicycling, horseback riding, skiing) until 6 weeks after your surgery. Also avoid swimming and hot tubs which can predispose you to infection.

When can I go back to work?

Most people are able to resume work on a light duty basis within 2-3 weeks. Some can go back to work much sooner as long as it is on light duty with no heavy lifting.

When can I drive?

We recommend waiting until you no longer require pain medication. If possible, wait until after your catheter has been removed.

How do I care for my incisions?

The sutures used in your incisions will dissolve on their own. The dressing over your incisions will be removed prior to discharge. Underneath are white pieces of tape (steri-strips) which should remain in place until they fall off on their own. Do not remove the steri-strips yourself. You may notice some drainage or blood on these – this is normal. Some bruising or discoloration of the area around the incisions is normal and should resolve within a few weeks. Do NOT apply any ointments such as neosporin to your incisions.

It is difficult to sit for long periods. I have discomfort between the scrotum and anus.

This can be normal. Try a soft doughnut shaped pillow. This may take a few weeks to resolve.

I have swelling in the scrotum.

This is normal after surgery and should resolve within a few weeks. We recommend wearing brief type supportive underwear rather than boxers. This will provide support and compression.

What do I need to buy or have available for my recovery at home?

PRESCRIPTIONS	OVER THE COUNTER MEDS	INCONTINENCE	COMFORT
Vicodin or Percocet (pain)	Tylenol extra-strength	Depend Guards for Men or Assurance Guards for Men	Doughnut shaped pillow
Ditropan (catheter)	Gas-X		
Colace (stool softner)	Milk of Magnesia		
Antibiotic	Dulcolax suppository		

When will I know if Dr. Shah removed all the cancer (pathology)?

After surgery, the prostate is carefully examined by our pathologists. This takes about 1 week. Dr. Shah will review the pathology report with you when you return for the 1st postoperative visit.

Questions? Please call Patricia (Trish) Seeber, R.N. at 505-925-0246 or visit www.roboticsurgeryNM.com