

Beebe Healthcare
Margaret H. Rollins School of Nursing
N102- Nursing Care of Adults

Benign Prostatic Hyperplasia

Patient Profile:

J.R. is a 69-year-old male who goes to see his healthcare provider because he has been having difficulty urinating and dribbling for the past year, and it has gradually gotten worse. He has a history of hypertension and a myocardial infarction five years ago. He is currently taking the following medications:

Hydrochlorothiazide 25 mg po every morning
Metoprolol 50 mg po BID
Potassium chloride 20 mEq po daily
Aspirin 81 mg po daily

Subjective data:

Has difficulty starting to urinate and when the urine flow does start, it is a slow stream, the urine flow stops and starts several times while voiding, and there is dribbling at the end; gets up at least twice per night to void; has been going on for about one year and has increasingly worsened

Objective data:

PE:

98.4-72-18-138/78-98% RA; H: 5'8'' W: 255 lb
Penis circumcised, no lesions or discharge noted
Scrotum symmetric, no masses, descended testes
No inguinal hernia
Digital rectal exam- prostate enlarged symmetrically, firm and smooth

Dx:

UA with cx:

Color: amber yellow
Odor: aromatic
Protein: trace
Glucose & Ketones: none
Specific gravity: 1.018
pH: 6.2
RBCs: 3/hpf; WBCs: 0; bacteria: none

PSA: 3ng/mL

Post void residual scan: 175 mL

Collaborative Care:

Transurethral resection of the prostate (TURP) for benign prostatic hyperplasia (BPH).

Discussion Questions:

1. What is benign prostatic hyperplasia? Fast growing cells of soft tissue in the prostate causing enlargement to the gland but is noncancerous
2. What are J.R.'s clinical manifestations of BPH? Impeded flow of urine, frequent night time urination, hematuria: amber colored urine containing RBC, weak stream, hesitancy, dribbling after urinating, progresses gradually, enlarged prostate
3. What are some medications that are used to treat BPH? Alpha adrenergic receptor blockers: relaxes prostate muscle to improve urination, 5 Alpha reductase inhibitors: decrease prostate size
4. What preoperative nursing care do you anticipate prior to J.R.'s TURP surgery? Confirm Signed consent is there, Ensure fears are addressed and procedure information and questions are clarified by the doctor/surgeon, will be receiving anesthesia need allergy list,
5. What nursing care after a TURP do you anticipate in the initial postoperative period? Hematuria for a few days postoperative, Continuous Bladder infusion that cannot be d/c without an order, monitor for s/s of water intoxication, monitor I&O, monitor for pain and administer analgesics as needed, prevent VTE with TEDs or EPC

What teaching should J.R. receive prior to discharge home? Sexual activity can be resumed in 4-8 weeks postoperative, hemorrhage: bright red urine after a few days is not normal and may be a sign of internal bleeding, Avoid heavy lifting for 4-6 wks, Don't strain when trying to have a BM, Avoid long periods of sitting, Hydrate

6.