

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?

Benign prostatic hyperplasia is an abnormal increase in the number of cells and overgrowth of smooth muscles and connective tissue/glandular tissue around the prostate area.

2. What are J.R.'s clinical manifestations of BPH?

Urinary stream lacks force, hesitancy/dribbling at the end of the stream, nocturia

3. What are some medications that are used to treat BPH?

Alpha adrenergic receptor blockers (terazosin, tamsulosin), 5 alpha-reductase inhibitors (finasteride, dutasteride)

4. What preoperative nursing care do you anticipate prior to J.R.'s TURP surgery?

Empty bowels using an enema or laxative, possibly stop anticoagulant therapy, NPO 6 hours prior to procedure

5. What nursing care after a TURP do you anticipate in the initial postoperative period?

Continuous bladder irrigation, I&O, pain relief.

6. What teaching should J.R. receive prior to discharge home?

Tissue sloughing (hemorrhage), perineal exercises, avoid heavy lifting for 4-6wks, no straining, avoid long periods of sitting, hydration, follow up care: recurrent hyperplasia or cancer