

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?**
 - a. Enlarged prostate gland associated with age that can cause urination difficulty
- 2. Document J.R.'s subjective and objective findings.**
 - a. **Subjective:** difficulty with initial urination, followed by a slow stream. Intermittent urine flows during every void with dripples to finish the stream. Nocturia. Chronic signs and symptoms that have increasingly worsened.
 - b. **Objective:** 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
- 3. Identify abnormal lab values. What do they mean?**
 - a. Post void residual scan.
 - b. His bladder is not fully emptying immediately after urination.
- 4. What are some medications that are used to treat BPH?**
 - a. Doxazosin, tamsulosin
 - b. Alpha blockers
- 5. What preoperative nursing care do you anticipate prior to J.R.'s TURP surgery?**
 - a. Drink fluids and follow Dr. order for when to be NPO
 - b. Educate on the process of the procedure
- 6. What nursing care after a TURP do you anticipate in the initial postoperative period?**
 - a. Monitor for post-op bleeding
 - b. Bladder injuries
 - c. Blood in urine
 - d. Pain level
- 7. What teaching should J.R. receive prior to discharge home?**
 - a. Follow medication management
 - b. Contact provider if any symptoms become worse
 - c. Do not hold urine/do not rush urinating to allow for everything to empty.