

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 condition that causes the flow of urine to be blocked due to an enlarged prostate gland.

2. Document J.R.'s subjective and objective findings.

prostate enlarged

PSA: 3ng/mL, Post void residual of 175 mL

difficulty urinating and dribbling past year, gotten worse

difficulty starting to urinate, slow stream, stop and go stream, urinating at night

3. Identify abnormal lab values. What do they mean?

RBC in urine- bleeding (due to the enlarged prostate)

Amber color urine with an aromatic odor to it- highly concentrated

PH level of 6.2- urine is more acidic

PSA- prostate cancer

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

Alpha Blockers: relax the bladder neck muscles and prostate muscles for easier urination
some examples of those meds are: Tamsulosin or Doxazosin

5-alpha reductase inhibitors: prevent hormonal changes and shrink the prostate some of these
meds are: Finasteride

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

Stop taking blood thinners such as warfarin, or clopidogrel

Stop taking aspirin, ibuprofen, or Aleve

Prophylactic antibiotic to prevent a UTI

Foley placed- left in for 24-48 hrs. after or until swelling lessens

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

Foley care, measure urine, I&O, education

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

Drink plenty of water to flush out then bladder

Stay away from strenuous activity such as heavy lifting for 4-6 wks.

Don't have sex for 4-6 wks. post-op

Do not drive until your catheter is removed and no longer taking pain medications

Call the doctor if you are not able to urinate, notice bright red blood or clots in urine, or if you notice that your urine isn't becoming clearer after drinking more fluid.