Robotic prostatectomy postprocedure instructions

What is it?

Robotic radical prostatectomy is a minimally invasive surgical procedure that removes the prostate and surrounding tissue using a robot-assisted surgery system with specialized instruments and a laparoscope.

After surgery, what should I expect?

You will have a catheter for up to two weeks while your anastomosis heals. At home, your catheter will drain into a large bag. You will also have a small bag that fits under your pant leg if you wish to go out. You can expect red-pink urine for up to six weeks.

You will have four to six small incisions that will have bandages over them. You may remove these 48 hours after surgery. Do not be alarmed if you see a small amount of drainage from the incision sites. There are no staples or stitches to be removed, and any glue will flake off on its own over time.

- Recovery time is approximately six weeks.
- Your surgery will last three to six hours and is sometimes followed by a hospitalization up to 72 hours.
- You will be seen again within two weeks after surgery to determine if the catheter can be removed. We will give you a Depend guard to place in your underwear.
- It is common for men to have difficulty controlling their bladders after catheter removal. Incontinence will improve over time. Your doctor may want to perform an imaging study to check your urethral healing.
- Perineal pain (pain between scrotum and rectum): Try elevating your feet on a small stool during your bowel movements and increasing your fiber and water intake.
- Scrotal/penile swelling or bruising: This is not unusual and no cause for worry. It should disappear within 10 days. You can also try elevating the scrotum with a small towel while you are lying down or seated. We also recommend wearing tight-fitting underwear for support.
- Bruising around incision: This is not uncommon and will heal itself.
- Bloody drainage around the catheter or in urine: This is not uncommon after increasing activity or after a bowel movement. Call if you see clots in the urine or of you have no urine output for two hours.
- Abdominal distention, constipation or bloating: Take a stool softener as directed. If you still have no movement after 24 hours, it is safe to take a Ducolax suppository.
- Bladder spasms: You may feel mild to severe pain or cramping; the sudden, urgent need to urinate; or a burning sensation when you urinate.
- Kegel exercises should be started after the catheter has been removed. These will help to increase bladder control. To learn to use these muscles, practice starting and stopping your urine stream. Repeat flexing and relaxing these muscles when you are not urinating.

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Diet and activity after surgery

- After surgery you will be given clear liquids such as broth, juices or gelatin. As you are able to tolerate it, you may return to a regular diet.
- Do not sit in one place for longer than 45 minutes at a time.
- Walk at least three times a day, gradually increasing your distance.
- You may shower 48 hours after surgery.
- Refrain from sexual activity until the catheter has been removed. Issues regarding sexual function will be discussed by your health care provider at your post-op visits.

If you experience any of the following, please contact our office:

- Catheter is not draining normally.
- Your incision becomes increasingly red, swollen or hot to touch.
- Drainage from the incision site.
- Fever over 100.4° F, uncontrolled pain, nausea or vomiting.
- Large amount of blood clots in urine (red-pink urine on and off for six weeks is normal).
- Bladder spasms or pain not relieved by pain medication.
- Leg swelling.

Please call our office at 503-561-7100 with questions. Office hours are 8 a.m. to 5 p.m. In the event of an emergency, call 911.

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