

Arthur L. Burnett, M.D.

SUMMARY SCHEDULE-POST SURGERY
RADICAL RETROPUBIC PROSTATECTOMY

Week

- 1** **SHOWER** You may shower after discharge – cover tape with plastic wrap or a “baggie” to keep it from getting wet.
- 1-3** **EXERCISE** Take short (5 minute) walks six to eight times a day. After catheter removal there is no limitation on walking. **SEE WEEK 8 FOR VIGOROUS EXERCISE!**
- 1-3** **WOUND** The steri-strips holding only the skin edges together may be removed entirely when they come loose after about one week.
- 2** **CATHETER** Your catheter should be removed after 2 weeks from the day of surgery. Take the prescribed antibiotics the day before, day of, and the day after the removal. Call me for a phone conversation one week after catheter removal.
- 3** **DRIVING** You may drive your car several days after catheter removal.
- 4** **SUPPORT STOCKINGS** You may remove the support stocking 4 weeks after surgery.
- 4** **SITTING** During the first 4 weeks at home, do not sit upright in a firm chair for more than 1 hour. Use soft, reclining, or pillowed, chairs with footstool.
- 4-6** **CLOTS IN THE LEGS** Up to 6 weeks after surgery take special care to prevent blood clots. **SEE INSTRUCTIONS!**
- 8** **VIGOROUS EXERCISE** You must avoid heavy lifting (more than 10 pounds), and all vigorous exercise such as calisthenics, golf, tennis, vigorous walking for a total of 8 weeks after surgery.
- 12** **ENEMA** Do not have an enema before 3 months after surgery.
- 3 months** **PSA MEASUREMENT** Have a PSA measurement done at 3 months, either at the time of your clinic visit or with your local physician, prior to arranging for a telephone consultation with me. **SEE INSTRUCTIONS.**
- 3 months** **URINARY CONTROL** Recovery of urinary control takes time and varies between individuals. Complete continence should not generally be expected prior to this interval. Kegel exercises should be performed regularly after catheter removal.
- 1 year** **SEXUAL FUNCTION** Improvement of erections occur over the long-term after the operation and may be gradual. Usually, visual and psychogenic stimuli will be less effective and tactile sensation will be more effective.