



Suprapubic Tube Placement Postoperative Instructions

Clothing

After surgery it can be difficult to fit into your regular pants. Wear comfortable pants that have a loose waistband.

Urinary Catheter

- During surgery, you will have a catheter placed in your bladder through the belly wall. A catheter is a tube that carries urine from your bladder to the outside of your body into a bag. This urinary catheter will stay in place. You may have some leakage of urine or blood from the catheter site or at the tip of the bladder tube (urethra). You may also notice some blood or mucous-type sediment in the drainage tube or in the bag. The color of the urine may vary.
- It is very important to make sure the catheter drains well. The bag should always be lower than your bladder. It is also very important that there is no pulling or tugging on the catheter itself.
- At night, the catheter should drain into a large bag. When you want to go out, you can wear a smaller bag under your pant leg. You will receive instructions about the care of your urinary catheter before discharge from the hospital.

Diet

- Drink plenty of water
- Eat lots of vegetables and fiber to avoid constipation.

Dressing

Remove the bandage over your incisions two days after surgery. You may place an over the counter gauze or dressing daily as needed for drainage.

Medications

- Resume your normal medications unless instructed otherwise.
- A pain medication to be taken by mouth will be prescribed for you. Narcotic pain medications are addictive and constipating and therefore should be discontinued as soon as possible.
- Ibuprofen, an anti-inflammatory, helps reduce discomfort after surgery. This may be prescribed or is available at any drug store without a prescription.
- Acetaminophen (Tylenol) helps decrease discomfort after surgery. This is available at any drug store without a prescription. Some narcotic pain medicines also contain acetaminophen. Do not take more than 4000 mg acetaminophen per day to avoid liver problems.
- A stool softener should be taken by mouth twice a day to avoid constipation. Constipation can cause you to strain to have a bowel movement, which puts stress on the surgery site and can impair healing. A stool softener or laxative may be prescribed or is available at any drug store without a prescription (senna or Senokot or SennaGen, Dulcolax or bisacodyl, Milk of Magnesia or magnesium hydroxide). Decrease or hold the stool softener for diarrhea or loose stools. Take stool softeners by mouth only. You may use an over the counter suppository or enema if needed.

Activity Level

- Resume your normal activity level. You may be up and about as much as you like. You may go up and down stairs. Be sure the catheter is well secured at all times without any pulling or tugging. Be sure the drainage bag is lower than the bladder/catheter.
- You may take a shower after surgery. You may allow the water to run over the incision and the catheter. The catheter can be rinsed with water but do not put soap directly on the catheter itself to avoid irritation at the tip of the penis.
- Do not take tub baths or get in a hot tub for 1 week.

Things You May Encounter After Surgery

- Bruises around the incision site: These are common and should not alarm you. They will resolve over time.
- Bloody drainage around the Foley catheter or in the urine: Especially after increased activity or after bowel movement is common. Resting for a short period of time will improve the situation.
- Leaking urine around the catheter: Urine, mucus or blood may leak around the tube. If this happens, wear your underwear with a pad inside for protection/absorption. Most of the urine should drain into the collection bag.
- Bladder spasms: These are common. You may feel mild to severe bladder pain, an urgent need to urinate or a burning sensation. This is from the foley catheter balloon. This may resolve with position change or time. Medication for bladder spasm is available if this persists.
- Sore throat or hoarseness: This is from the breathing tube during surgery and should resolve in a few days.

Follow-up Appointments

The first one to two catheter exchanges are often performed by your surgeon. After this, the catheter can be changed by the patient, caregiver or our office.