Affix Patient Label



Patient Name:	Date of Birth:

This information is given to you so that you can make an informed decision about having **Transurethral** resection of the prostate (TURP)/Transurethral incision of the prostate (TUIP).

Reason and Purpose of the Procedure:

This surgery is done to remove part of the prostate. A special scope called a "cystoscope" is placed in the urethra (the tube through which you urinate) and guided up to the center of the prostate. The obstructing portion of the prostate is removed through the scope. This is called a Transurethral Resection of the Prostate, or TURP.

If the prostate is small, a more limited procedure is done that involves an incision into the tissue rather than a complete resection or removal. This is called a Transurethral Incision of the Prostate, or TUIP.

Benefits of this surgery:

You might receive the following benefits. Your doctor cannot promise you will receive any of these benefits. Only you can decide if the benefits are worth the risk.

- May reduce lower urinary tract symptoms such as difficulty urinating, frequent or urgent need to urinate.
- To decrease complications from benign prostatic hyperplasia such as bladder stones or kidney damage from urinary retention.

Risks of Surgery:

No procedure is completely risk free. Some risks are well known. There may be risks not included in the list that your doctor cannot expect.

General risks of surgery:

- Small areas of the lungs may collapse. This would increase the risk of infection. This may need antibiotics and breathing treatments.
- Clots may form in the legs, with pain and swelling. These are called DVTs or deep vein thrombosis. Rarely, part of the clot may break off and go to the lungs. This can be fatal.
- A strain on the heart or a stroke may occur.
- Bleeding may occur. If bleeding is excessive, you may need a transfusion.
- Reaction to the anesthetic may occur. The most common reactions are nausea and vomiting. In rare cases, death may occur. The anesthesiologist will discuss this with you.

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Risks of this surgery:

- Erectile dysfunction: A change may be noted in getting or keeping an erection.
- **Hematuria** (**Blood in the urine**): Bleeding may darken the urine color. This usually clears over a few days. In patients with continuous irrigation (a catheter in your bladder) we will increase fluids to flush the urine to prevent clots. If this is not successful, you may need more surgery.
- **TURP syndrome**: If there is excessive absorption or irrigating fluid during the procedure, the blood can become somewhat diluted. The changes in the blood could affect the blood pressure, heart, and in severe instances, the brain. Current surgical techniques make TURP syndrome rare. You may require further treatment.
- Urethral Stricture/Bladder Neck Contracture: A stricture is scar tissue that can form anywhere in the urethra. This can occur weeks to months after the procedure. Scar tissue can also form at the exit of the bladder, and is called a contracture. If this occurs you may need more surgery.
- **Urinary Retention**: The bladder may not be able to fully empty. The risk depends on how long you have had an obstruction, if you have had very large amounts of urine in the bladder, or have a history of diabetes which can cause the bladder to lose some ability to contract. *You may have to go home with a catheter*.
- Urinary Tract Infection or Urosepsis (Bloodstream infection): Bacteria may get into the bladder or bloodstream. More treatment with antibiotics may be needed.

Risks associated with smoking:

Smoking is linked to an increased risk of infections. It can also lead to heart and lung complications and clot formation.

Risks associated with obesity:

Obesity is linked to an increased risk of infections. It can also lead to heart and lung complications and clot formation.

Risks specific to you:		
		_

Alternative Treatments:

• Do nothing. You can decide not to have the procedure.

If you choose not to have this treatment:

You could continue to have one or more of the following:

- Difficulty urinating
- Frequent or urgent need to urinate

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General Information:

During this procedure, the doctor may need to perform more or different procedures than I agreed to.

During the procedure the doctor may need to do more tests or treatment.

Tissues or organs taken from the body may be tested. They may be kept for research or teaching. I agree the hospital may discard these in a proper way.

Students, technical sales people and other staff may be present during the procedure. My doctor will supervise them.

Pictures and videos may be done during the procedure. These may be added to my medical record. These may be published for teaching purposes. My identity will be protected.

Affix Patient Label Patient Name: Date of Birth: By signing this form I agree: I have read this form or had it explained to me in words I can understand. I understand its contents. I have had time to speak with the doctor. My questions have been answered. I want to have this procedure: Transurethral resection of the prostate (TURP)/Transurethral incision of the prostate (TUIP)_

I understand that my doctor may ask a partner to do the surgery.

I understand that other doctors, including medical residents or other staff may help with surgery. The tasks will be based on their skill level. My doctor will supervise them.

Patient Signature				Date	Time
Relationship	☐ Patient	☐ Closest relat	ive (relationship)	☐ Guardian	
Interpreter's State closest relative of			sent form and the do	ctor's explanation t	to the patient, a pare
Interp	reter (if applica	ble)	 Date	Time	
For provider use	e only:				
•	•	rpose, risks, benefi	its, possible conseque	ences of non-treatn	nent, alternative
			effects of the intende		
questions and pa	atient has agree	d to procedure.			
Provider Signat	ure:		Date:	Time	:
Teach Back					
Patient shows u	understanding b	y stating in his or	her own words:		
Benefit(s)) of the procedu	ıre:			
Risk(s) of	f the procedure:	' <u></u>			
Alternativ	ve(s) to the prod	edure:			
or					
Patient el	ects not to proc	eed:		(patient signatur	re)
Validated/Witn	iecc.		Date:	Time	٠.