

**HISTORY OF PRESENT ILLNESS:** , The patient is a 62-year old male with a Gleason score 8 adenocarcinoma of the prostate involving the left and right lobes. He has a PSA of 3.1, with a prostate gland size of 41 grams. This was initially found on rectal examination with a nodule on the right side of the prostate, showing enlargement relative to the left. He has undergone evaluation with a bone scan that showed a right parietal lesion uptake and was seen by Dr. XXX and ultimately underwent an open biopsy that was not malignant. Prior to this, he has also had a ProstaScint scan that was negative for any metastatic disease. Again, he is being admitted to undergo a radical prostatectomy, the risks, benefits, and alternatives of which have been discussed, including that of bleeding, and a blood transfusion.,**PAST MEDICAL**

**HISTORY:** , Coronary stenting. History of high blood pressure, as well. He has erectile dysfunction and has been treated with Viagra.,**MEDICATIONS:** , Lisinopril, Aspirin, Zocor, and Prilosec.,**ALLERGIES:**, Penicillin.,**SOCIAL**

**HISTORY:**, He is not a smoker. He does drink six beers a day.,**REVIEW OF SYSTEMS:** , Remarkable for his high blood pressure and drug allergies, but otherwise unremarkable, except for some obstructive urinary symptoms, with an AUA score of 19.,**PHYSICAL EXAMINATION:**,**HEENT:**

Examination unremarkable.,**Breasts:** Examination deferred.,**Chest:** Clear to auscultation.,**Cardiac:** Regular rate and rhythm.,**Abdomen:** Soft and nontender. He has no hernias.,**Genitourinary:** There is a normal-appearing phallus, prominence of the right side of prostate.,**Extremities:**

Examination unremarkable.,Neurologic: Examination nonfocal.,IMPRESSION:,1. Adenocarcinoma of the prostate.,2. Erectile dysfunction.,PLAN: ,The patient will undergo a bilateral pelvic lymphadenectomy and radical retropubic prostatectomy. The risks, benefits, and alternatives of this have been discussed. He understands and asks that I proceed ahead. We also discussed bleeding and blood transfusions, and the risks, benefits and alternatives thereof.