## Patient Case Table 70.1 Patient's Prostate Symptom Questionnaire

(Adapted with permission from Barry MJ et al. The American Urological Association symptoms index for benign prostatic hyperplasia. J Urol 1992;148:1549.)

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QUESTION Over the past month	NOT AT ALL (0)	LESS THAN 1 TIME IN 5 (1)	LESS THAN HALF THE TIME (2)	ABOUT HALF THE TIME (3)	MORE THAN HALF THE TIME (4)	ALMOST ALWAYS (5)						
How often have you had a sensation of not emptying your bladder completely after you finish urinating?			X									
2. How often have you had to urinate again less than 2 hours after you finished urinating?				X								
3. How often have you found you stopped and started again several times when you urinated?				X								
4. How often have you found it difficult to postpone urination?				Х								
5. How often have you had a weak urinary stream?						X						
6. How often have you had to push or strain to begin urination?			X									
7. How many times do you most typically get up to urinate from the time you go to bed at night until you get up in the morning?	None	1 time	2 times	3 times	4 times	5 times X						

8. If you were to spend the rest of your life	Delighted	Pleased	Mostly satisfied	Mixed	Mostly dissatisfied	Unhappy	Terrible X
with your urinary condition just the way it is now, how would you feel about it?							

## PE and Lab Tests

## Gen

- Elderly, overweight, white male in NAD
- Well groomed and well dressed
- Alert, friendly, courteous, and conversant

## VS

See Patient Case Table 70.2