



About Your Prostate Ablation Procedure

This information will help you get ready for your prostate ablation procedure at Memorial Sloan Kettering (MSK). It will also help you understand what to expect after your procedure.

About Your Prostate

Figure 1. Male reproductive system

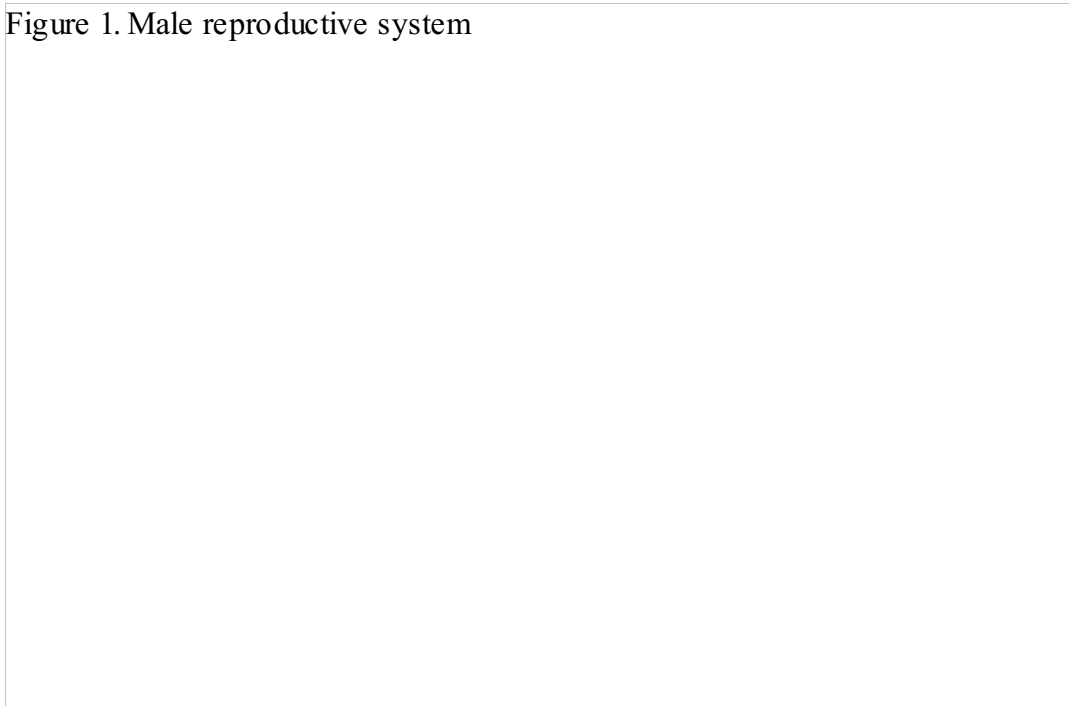


Figure 1. Male reproductive system



[Click here for an interactive image.](#)

- Your **prostate** is a small, firm gland about the size of a walnut. It's in front of your rectum, below your bladder (see Figure 1). Your prostate works with other glands in your body to make semen.
- Your **urethra** is a tube that carries urine (pee) from your bladder, through your penis, and out of your body.
- Your **seminal vesicles** are small glands near your prostate that make the fluid in semen.
- Your **perineum** is the space between your scrotum and anus.

About Your Prostate Ablation Procedure

Prostate ablation is a procedure used to treat prostate cancer. During a prostate ablation procedure, energy (such as heat, cold, lasers, or chemicals) is used to kill the cancer cells. The energy may also destroy some of the surrounding normal prostate tissue.

You'll get anesthesia (medication to make you sleep during your procedure) before your procedure unless your healthcare provider tells you otherwise. Once you're asleep, you'll be positioned on your back with your

legs supported and raised above your hips with your knees bent.

Your healthcare provider may place a cystoscope (small, flexible camera) through your urethra to your prostate and bladder after you're asleep, before your ablation. This is to check for anything that might affect your procedure.

Prostate ablation can be done with a needle ablation or with high-frequency ultrasound energy. Your healthcare provider will talk with you about which type of ablation is best for you.

Needle ablation

If you're having a needle ablation, a small ultrasound probe will be put into your rectum. The ultrasound probe uses sound waves to show your prostate on a video screen. Your healthcare provider will use these images as they guide small needles into your prostate. The needles will be held in place by a template, which is a small, square piece of plastic with many holes in it.

Once the needles are in place, your healthcare provider will use them to deliver the treatment to your prostate. The treatment will take 20 to 30 minutes.

After the treatment is finished, the needles and probe will be taken out and you'll be taken to the recovery room.

Ablation through high-frequency ultrasound energy

If you're having ablation through high-frequency ultrasound energy, a small ultrasound probe will be placed into your rectum so your healthcare provider can see your prostate.

After your treatment is completed, the probe will be taken out and you'll be taken to the recovery room.

Getting Ready for Your Procedure

You and your care team will work together to get ready for your procedure.

Help us keep you safe during your procedure by telling us if any of the following statements apply to you, even if you aren't sure.

- I take a blood thinner, such as:
 - Aspirin
 - Heparin
 - Warfarin (Jantoven[®] or Coumadin[®])
 - Clopidogrel (Plavix[®])
 - Enoxaparin (Lovenox[®])
 - Dabigatran (Pradaxa[®])
 - Apixaban (Eliquis[®])
 - Rivaroxaban (Xarelto[®])

There are others, so be sure your healthcare provider knows all the medications you're taking.

- I take prescription medications (medications my healthcare provider prescribes), including patches and creams.
- I take over-the-counter medications (medications I buy without a prescription), including patches and

creams.

- I take dietary supplements, such as herbs, vitamins, minerals, or natural or home remedies.
- I have a pacemaker, automatic implantable cardioverter-defibrillator (AICD), or other heart device.
- I have sleep apnea.
- I've had a problem with anesthesia (medication to make me sleep during surgery) in the past.
- I'm allergic to certain medication(s) or materials, including latex.
- I'm not willing to receive a blood transfusion.
- I drink alcohol.
- I smoke or use an electronic smoking device (such as a vape pen, e-cigarette, or Juul[®]).
- I use recreational drugs.

About drinking alcohol

The amount of alcohol you drink can affect you during and after your procedure. It's important to talk with your healthcare providers about how much alcohol you drink. This will help us plan your care.

- If you stop drinking alcohol suddenly, it can cause seizures, delirium, and death. If we know you're at risk for these complications, we can prescribe medications to help keep them from happening.
- If you drink alcohol regularly, you may be at risk for other complications during and after your procedure. These include bleeding, infections, heart problems, and a longer hospital stay.

Here are things you can do before your procedure to keep from having problems:

- Be honest with your healthcare providers about how much alcohol you drink.
- Try to stop drinking alcohol once your procedure is planned. If you develop a headache, nausea (feeling like you're going to throw up), increased anxiety, or can't sleep after you stop drinking, tell your healthcare provider right away. These are early signs of alcohol withdrawal and can be treated.
- Tell your healthcare provider if you can't stop drinking.
- Ask your healthcare provider questions about drinking and your procedure. As always, all of your medical information will be kept confidential.

About smoking

If you smoke, you can have breathing problems when you have a procedure. Stopping even for a few days before your procedure can help. Your healthcare provider will refer you to our Tobacco Treatment Program if you smoke. You can also reach the program by calling [212-610-0507](tel:212-610-0507).

About sleep apnea

Sleep apnea is a common breathing disorder that causes you to stop breathing for short periods of time while sleeping. The most common type is obstructive sleep apnea (OSA). With OSA, your airway becomes completely blocked during sleep. OSA can cause serious problems during and after your procedure.

Please tell us if you have sleep apnea or if you think you might have it. If you use a breathing device (such as a CPAP device) for sleep apnea, bring it with you the day of your procedure.

Within 30 Days of Your Procedure

Presurgical testing (PST)

You'll have a PST appointment before your procedure. The date, time, and location will be printed on the appointment reminder from your healthcare provider's office. You can eat and take your usual medications the day of your appointment.

It's helpful to bring the following things to your PST appointment:

- A list of all the medications you're taking, including prescription and over-the-counter medications, patches, and creams.
- Results of any tests done outside of MSK, such as a cardiac stress test, echocardiogram, or carotid doppler study.
- The names and telephone numbers of your healthcare providers.

During your PST appointment, you'll meet with a nurse practitioner (NP). They work closely with anesthesiology staff (specialized healthcare providers who will give you anesthesia during your surgery). Your NP will review your medical and surgical history with you. You may have tests, such as an electrocardiogram (EKG) to check your heart rhythm, a chest x-ray, blood tests, and any other tests needed to plan your care. Your NP may also recommend that you see other healthcare providers.

Your NP will talk with you about which medications you should take the morning of your procedure.

Complete a Health Care Proxy form

If you haven't already completed a Health Care Proxy form, we recommend you complete one now. If you've already completed one or have any other advance directives, bring them to your next appointment.

A health care proxy is a legal document that identifies the person who will speak for you if you can't communicate for yourself. The person you identify is called your health care agent.

Talk with your healthcare provider if you're interested in completing a health care proxy. You can also read the resources *Advance Care Planning* (http://140.163.1.151/pe/advance_care_planning) and *How to Be a Health Care Agent* (http://140.163.1.151/pe/health_care_agent) for information about health care proxies, other advance directives, and being a health care agent.

Exercise

Try to do aerobic exercise every day. Aerobic exercise is any exercise that makes your heart beat faster, such as walking, swimming, or biking. If it's cold outside, use stairs in your home or go to a mall or shopping center. Exercising will help your body get into its best condition for your procedure and make your recovery faster and easier.

7 Days Before Your Procedure

Follow your healthcare provider's instructions for taking aspirin

If you take aspirin or a medication that contains aspirin, you may need to change your dose or stop taking it 7 days before your procedure. Aspirin can cause bleeding.

Follow your healthcare provider's instructions. **Don't stop taking aspirin unless they tell you to.** For more information, read the resource *Common Medications Containing Aspirin, Other Nonsteroidal Anti-inflammatory Drugs (NSAIDs), or Vitamin E* (http://140.163.1.151/pe/common_meds).

Stop taking vitamin E, multivitamins, herbal remedies, and other dietary supplements

Stop taking vitamin E, multivitamins, herbal remedies, and other dietary supplements 7 days before your procedure. These things can cause bleeding. For more information, read the resource *Herbal Remedies and Cancer Treatment* (http://140.163.1.151/pe/herbal_remedies).

2 Days Before Your Procedure

Stop taking nonsteroidal anti-inflammatory drugs (NSAIDs)

Stop taking NSAIDs, such as ibuprofen (Advil[®] and Motrin[®]) and naproxen (Aleve[®]), 2 days before your surgery. These medications can cause bleeding. For more information, read the resource *Common Medications Containing Aspirin, Other Nonsteroidal Anti-inflammatory Drugs (NSAIDs), or Vitamin E* (http://140.163.1.151/pe/common_meds).

Start taking tamsulosin (Flomax[®])

Your healthcare provider will give you a prescription for tamsulosin to help you urinate (pee) after your procedure. Start taking the tamsulosin 2 days before your procedure or as directed by your healthcare provider.

Arrange for someone to take you home

You must have a responsible care partner take you home after your procedure. A responsible care partner is someone who can help you get home safely and report concerns to your healthcare providers, if needed. Make sure to plan this before the day of your procedure.

If you don't have a responsible care partner to take you home, call one of the agencies below. They'll send someone to go home with you. There's usually a charge for this service, and you'll need to provide transportation. It's OK to use a taxi or car service, but you must still have a responsible care partner with you.

Agencies in New York

Partners in Care: [888-735-8913](tel:888-735-8913)

Caring People: [877-227-4649](tel:877-227-4649)

Agencies in New Jersey

Caring People: [877-227-4649](tel:877-227-4649)

1 Day Before Your Procedure

Follow the diet your healthcare provider recommends

Depending on the type of ablation procedure you're having, you may need to follow a light diet or a low residue diet. Your healthcare provider will check the box below next to the diet you should follow. Start following it the morning of the day before your procedure.

- **Light diet**
Follow a light diet, such as small sandwiches, eggs, toast, crackers, soup, or cereal. Limit the amount of dairy products and avoid fried foods and foods with a lot of seasoning.
- **Low-residue diet**
Follow a low residue diet. This diet limits high-fiber foods, such as whole grain breads and cereals,

nuts, seeds, and raw or dried fruits and vegetables. You should also limit the amount of dairy products you have.

Start taking antibiotics, if needed

If your healthcare provider gives you a prescription for antibiotics, start taking them 1 day before your procedure.

Note the time of your procedure

A staff member from the Admitting Office will call you after 2:00 pm the day before your procedure. If your procedure is scheduled for a Monday, they'll call you on the Friday before.

The staff member will tell you what time to arrive at the hospital for your procedure. They'll also remind you where to go. If you don't get a call by 7:00 pm, call [212-639-5014](tel:212-639-5014).

Sleep

Go to bed early and get a full night's sleep.

Instructions for eating and drinking before your procedure

- Do not eat anything after midnight the night before your procedure. This includes hard candy and gum.
- Between midnight and up until 2 hours before your scheduled arrival time, you may drink a total of 12 ounces of water (see figure).
- Starting 2 hours before your scheduled arrival time, do not eat or drink anything. This includes water.

12 ounces of water

The Morning of Your Procedure

Take your medications

If your healthcare provider told you to take certain medications the morning of your procedure, take only those medications with a sip of water. Depending on what medications you take, this may be all, some, or none of your usual morning medications.

Give yourself a saline enema

Give yourself a saline enema (such as a Fleet[®] saline enema) the morning of your procedure. Follow the directions on the box. You can buy this at your local pharmacy.

Things to remember

- Wear comfortable, loose-fitting pants with an elastic waistband.
- Don't put on any lotion, cream, deodorant, makeup, powder, perfume, or cologne.
- Don't wear any metal objects. Remove all jewelry, including body piercings. The equipment used during your procedure can cause burns if it touches metal.

- Leave valuable items (such as credit cards, jewelry, and your checkbook) at home.
- Before you're taken into the operating room, you'll need to remove your hearing aids, dentures, prosthetic device(s), wig, and religious articles.
- If you wear contacts, wear your glasses instead. Wearing contact lenses during your procedure can damage your eyes.

What to bring

- Your breathing device for sleep apnea (such as your CPAP device), if you have one.
- Your Health Care Proxy form and other advance directives, if you have completed them.
- A case for your personal items (such as eyeglasses, hearing aid(s), dentures, prosthetic device(s), wig, and religious articles), if you have one.
- This guide. Your healthcare team will use this guide to teach you how to care for yourself after your procedure.

Once you're in the hospital

You'll be asked to say and spell your name and birth date many times. This is for your safety. People with the same or a similar name may be having a procedure on the same day.

Get dressed for your procedure

When it's time to change for your procedure, you'll get a hospital gown, robe, and nonskid socks to wear.

Meet with a nurse

You'll meet with a nurse before your procedure. Tell them the dose of any medications you took after midnight (including prescription and over-the-counter medications, patches, and creams) and the time you took them.

Your nurse may place an intravenous (IV) line in one of your veins, usually in your arm or hand. If your nurse doesn't place the IV, your anesthesiologist will do it in the operating room.

Meet with an anesthesiologist

You'll also meet with an anesthesiologist before your procedure. They will:

- Review your medical history with you.
- Ask you if you've had any problems with anesthesia in the past, including nausea or pain.
- Talk with you about your comfort and safety during your procedure.
- Talk with you about the kind of anesthesia you'll get.
- Answer your questions about your anesthesia.

Get ready for your procedure

You'll either walk into the operating room or be taken in on a stretcher. A member of the operating room team will help you onto the operating bed. Once you're comfortable, your anesthesiologist will give you anesthesia through your IV line and you'll fall asleep. You'll also get fluids through your IV line during and after your procedure.

After you're fully asleep, a breathing tube will be placed through your mouth and into your windpipe to help you breathe. You'll also have a urinary (Foley) catheter placed to drain urine from your bladder.

Your breathing tube is usually taken out while you're still in the operating room.

After Your Procedure

A nurse will be monitoring your body temperature, pulse, blood pressure, and oxygen levels. You may be getting oxygen through a thin tube that rests below your nose or a mask that covers your nose and mouth.

Managing your pain

For the first 6 to 8 hours after your procedure, apply ice packs to your perineum for 20 minutes on and then 20 minutes off. This helps reduce discomfort, swelling, and bruising. Don't put the ice packs right on your skin.

You'll probably have some pain for about 1 to 2 days after your procedure. You can take an over-the-counter pain reliever such as acetaminophen (Tylenol[®]) or ibuprofen (Advil[®]) to help with any discomfort.

Tubes and drains

You'll have a urinary catheter in your bladder. This is so your care team can keep track of how much urine you're making. You might be discharged with the catheter still in place. If you are, your healthcare provider will tell you when to take it out. They'll give you written instructions. You can also watch the video *How to Remove your Urinary (Foley) Catheter* (http://140.163.1.151/pe/remove_foley).

Leaving the hospital

You'll go home the same day as your procedure. It's important to have a responsible care partner to take you home.

After You Leave the Hospital

- Follow your healthcare provider's instructions for taking your antibiotics and tamsulosin (Flomax).
- Don't shower for the first 24 hours after your procedure. After 24 hours, you can go back to showering as usual. Don't take a tub bath or submerge your lower body in water for 2 weeks after your procedure.
- Don't lift anything heavier than 20 pounds (9 kilograms) for at least 48 hours (2 days) after your procedure. Your healthcare provider will tell you if you need to wait longer than 48 hours.

Changes in urination

- Your urine may be pink tinted or have small amounts of blood in it for a few days after your procedure. If you have any heavy bleeding or blood clots in your catheter, call your healthcare provider.
- You may have a burning feeling when you urinate for 1 to 2 weeks after your procedure. Your healthcare provider will give you a prescription for medication to help with this, if needed.
- Your urine may flow more slowly than usual for about 2 to 3 weeks after your procedure.
- You may urinate more often than usual for up to 6 weeks after your procedure.

Swelling, bruising, or bleeding

- Your scrotum and the skin beneath it may have bruising and swelling after your procedure. This usually goes away within a few days, but it sometimes lasts for 2 to 3 weeks. To help with bruising and swelling, hold an ice pack on your perineum for 20 minutes, then take it off for 20 minutes. Repeat as needed. Don't put the ice pack right on your skin.
- If you had a needle ablation, you may have light bleeding from your puncture sites for 1 to 2 days after your procedure. If you do, apply steady pressure with a clean, dry washcloth or gauze to the area for 5 minutes. If the bleeding becomes heavy or doesn't stop, call your healthcare provider.
- You may have tenderness in your perineum. This may continue for several days after your procedure. If the area becomes very red, tender, or swollen, call your healthcare provider.
- You may have a pink-tinted fluid coming from your urethra for a few days or weeks after your procedure. This is temporary. It's caused by swelling in your prostate from the treatment.

Changes in sexual function

- Your semen may contain a small amount of blood for several weeks.
- You may ejaculate less semen than you did before your procedure. This is permanent.
- You may have changes in erectile function (your ability to get an erection). Your healthcare provider will talk with you about this.

When to Call Your Healthcare Provider

Call your healthcare provider if you have:

- New or worsening shortness of breath
- A fever of 101 °F (38.3 °C) or higher
- Chills
- Heavy bleeding or blood clots in your catheter
- Pain or tenderness in your testicles
- Pain that doesn't get better with your medications
- Any new symptom or physical change

Support Services

MSK Support Services

The following are MSK support services that you may find helpful.

MSK support services

For more online information, visit the [Cancer Types](#) section of www.mskcc.org.

Admitting Office

[212-639-7606](tel:212-639-7606)

Call if you have questions about your hospital admission, including requesting a private room.

Anesthesia

[212-639-6840](tel:212-639-6840)

Call if you have questions about anesthesia.

Blood Donor Room

[212-639-7643](tel:212-639-7643)

Call for information if you're interested in donating blood or platelets.

Bobst International Center

[888-675-7722](tel:888-675-7722)

MSK welcomes patients from around the world. If you're an international patient, call for help arranging your care.

Counseling Center

[646-888-0200](tel:646-888-0200)

Many people find that counseling helps them. We provide counseling for individuals, couples, families, and groups, as well as medications to help if you feel anxious or depressed. To make an appointment, ask your healthcare provider for a referral or call the number above.

Female Sexual Medicine and Women's Health Program

[646-888-5076](tel:646-888-5076)

Cancer and cancer treatments can have an impact on your sexual health. Our Female Sexual Medicine and Women's Health Program can help if you're dealing with cancer-related sexual health challenges such as premature menopause or fertility issues. Call for more information or to make an appointment. We can help you take action and address sexual health issues before, during, or after your treatment.

Food Pantry Program

[646-888-8055](tel:646-888-8055)

The food pantry program provides food to people in need during their cancer treatment. For more information, talk with your healthcare provider or call the number above.

Integrative Medicine Service

[646-888-0800](tel:646-888-0800)

Integrative Medicine Service offers many services to complement (go along with) traditional medical care, including music therapy, mind/body therapies, dance and movement therapy, yoga, and touch therapy.

Male Sexual and Reproductive Medicine Program

[646-888-6024](tel:646-888-6024)

Cancer and cancer treatments can have an impact on your sexual health. Our Male Sexual and Reproductive Medicine Program can help if you're dealing with cancer-related sexual health challenges such as erectile dysfunction (ED). Call for information or to make an appointment. We can help you take action and address sexual health issues before, during, or after your treatment.

MSK Library

library.mskcc.org

[212-639-7439](tel:212-639-7439)

You can visit our library website or speak with the library reference staff to find more information about your specific cancer type. You can also visit LibGuides on MSK's library website at libguides.mskcc.org

Patient and Caregiver Education

www.mskcc.org/pe

Visit the Patient and Caregiver Education website to search our virtual library. There you can find written educational resources, videos, and online programs.

Patient and Caregiver Peer Support Program

[212-639-5007](tel:212-639-5007)

You may find it comforting to speak with someone who has been through a treatment like yours. You can talk with a former MSK patient or caregiver through our Patient and Caregiver Peer Support Program. These conversations are confidential. They may take place in person or over the phone.

Patient Billing

[646-227-3378](tel:646-227-3378)

Call if you have questions about preauthorization with your insurance company. This is also called preapproval.

Patient Representative Office

[212-639-7202](tel:212-639-7202)

Call if you have questions about the Health Care Proxy form or if you have concerns about your care.

Perioperative Nurse Liaison

[212-639-5935](tel:212-639-5935)

Call if you have questions about MSK releasing any information while you're having surgery.

Private Duty Nursing Office

[212-639-6892](tel:212-639-6892)

You may request private nurses or companions. Call for more information.

Resources for Life After Cancer (RLAC) Program

[646-888-8106](tel:646-888-8106)

At MSK, care doesn't end after active treatment. The RLAC Program is for patients and their families who have finished treatment. This program has many services, including seminars, workshops, support groups, counseling on life after treatment, and help with insurance and employment issues.

Social Work

[212-639-7020](tel:212-639-7020)

Social workers help patients, family, and friends deal with issues that are common for cancer patients. They provide individual counseling and support groups throughout the course of treatment and can help you communicate with children and other family members. Our social workers can also help refer you to community agencies and programs, as well as financial resources if you're eligible.

Spiritual Care

[212-639-5982](tel:212-639-5982)

Our chaplains (spiritual counselors) are available to listen, help support family members, pray, contact community clergy or faith groups, or simply be a comforting companion and a spiritual presence. Anyone can request spiritual support, regardless of formal religious affiliation. MSK's interfaith chapel is located near Memorial Hospital's main lobby. It's open 24 hours a day. If you have an emergency, call [212-639-2000](tel:212-639-2000). Ask for the chaplain on call.

Tobacco Treatment Program

[212-610-0507](tel:212-610-0507)

If you want to quit smoking, MSK has specialists who can help. Call for information.

Virtual Programs

www.mskcc.org/vp

MSK's Virtual Programs offer online education and support for patients and caregivers, even when you can't come to MSK in person. Through live, interactive sessions, you can learn about your diagnosis, what to expect during treatment, and how to prepare for the various stages of your cancer care. Sessions are

confidential, free, and led by expert clinical staff. If you're interested in joining a Virtual Program, visit our website at www.mskcc.org/vp for more information.

External support services

The following are services outside of MSK that you may find helpful.

American Cancer Society (ACS)

www.cancer.org

800-ACS-2345 ([800-227-2345](tel:800-227-2345))

Offers a variety of information and services, including Hope Lodge, a free place for patients and caregivers to stay during cancer treatment.

The American Urologic Association Foundation

[866-746-4282](tel:866-746-4282)

www.urologyhealth.org

US TOO

[800-808-7866](tel:800-808-7866)

www.ustoo.org

Provides prostate cancer education and support programs and has a monthly newsletter called Hotsheet. Meetings are open to patients, spouses, significant others, interested medical personnel.

National Association for Continence

www.nafc.org

National Cancer Institute

www.cancer.gov

Prostate Cancer Foundation

www.pcf.org

Prostate Cancer Treatment Guidelines for Patients

www.nccn.org (also available in Spanish)

Tell us what you think

Tell us what you think

Your feedback will help us improve the information we provide to patients and caregivers. We read every comment, but we're not able to respond. If you have questions about your care, contact your healthcare provider.

Survey Questions

Questions **Yes** **Somewhat** **No**

Was this information easy to understand? Yes Somewhat No

What could we have explained better?

Submit

Last Updated

Tuesday, January 5, 2021

If you have any questions, contact a member of your healthcare team directly. If you're a patient at MSK and you need to reach a provider after 5:00 pm, during the weekend, or on a holiday, call 212-639-2000.

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For more resources, visit www.mskcc.org/pe to search our virtual library.

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