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

- Your **prostate** is a small, firm gland about the size of a walnut. It’s in front of your rectum, below your
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’re not 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 problems, we can prescribe medications to help keep them from happening.

• If you drink alcohol regularly, you may be at risk for other problems 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. Tell your healthcare provider right away if you:
  ○ Get a headache.
○ Feel nauseous (like you’re going to throw up).
○ Feel more anxious (nervous or worried) than usual.
○ Cannot sleep.

These are early signs of alcohol withdrawal and can be treated.

• Tell your healthcare provider if you cannot stop drinking.
• Ask your healthcare provider questions about drinking and your procedure. As always, all your medical information will be kept private.

About smoking
If you smoke, you can have breathing problems when you have a procedure. Stopping for even a few days before your procedure can help.

MSK has specialists who can help you quit smoking. For more information about our Tobacco Treatment Program, call 212-610-0507. You can also ask your nurse about the program.

About sleep apnea
Sleep apnea is a common breathing problem. It causes you to stop breathing for short lengths of time while you’re asleep. The most common type is obstructive sleep apnea (OSA). With OSA, your airway becomes fully
OSA can cause serious problems during and after a procedure. Please tell us if you have or think you might have sleep apnea. If you use a breathing device (such as a CPAP machine), bring it on 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 these things to your 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 procedure). Your NP will review your medical and surgical history with you. You may have tests to plan your care. Examples are:

- An electrocardiogram (EKG) to check your heart rhythm.
- A chest X-ray.
- Blood tests.

Your NP may recommend you see other healthcare providers. They’ll also talk with you about which medications to take the morning of your procedure.

**Fill out a Health Care Proxy form**

If you have not already filled out a Health Care Proxy form, we recommend you do now. If you already filled one out or have any other advance directives, bring them to your next appointment.

A health care proxy is a legal document. It says who will speak for you if you cannot communicate for yourself. This person is called your health care agent.

- To learn more about health care proxies and other advance directives, read *Advance Care Planning* ([www.mskcc.org/pe/advance_care_planning](http://www.mskcc.org/pe/advance_care_planning)).
• To learn more about being a health care agent, read *How to Be a Health Care Agent* ([www.mskcc.org/pe/health_care_agent](http://www.mskcc.org/pe/health_care_agent)).

• If you have more questions about filling out a Health Care Proxy form, talk with your healthcare provider.

**Exercise**

Exercising will help your body get into its best condition for your procedure and make your recovery faster and easier.

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.

**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. **Do not stop taking aspirin unless they tell you to.**

For more information, read *Common Medications*
Containing Aspirin, Other Nonsteroidal Anti-inflammatory Drugs (NSAIDs), or Vitamin E (www.mskcc.org/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.

If your healthcare provider gives you other instructions, follow those instead.

For more information, read Herbal Remedies and Cancer Treatment (www.mskcc.org/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 procedure. NSAIDs can cause bleeding.

If your healthcare provider gives you other instructions, follow those instead.

For more information, read Common Medications Containing Aspirin, Other Nonsteroidal Anti-
inflammatory Drugs (NSAIDs), or Vitamin E (www.mskcc.org/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. They should be able to contact your care team if they have any concerns. 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 a charge for this service, and you’ll need to provide transportation. It’s OK to use a taxi or car service, but you still need a responsible care partner with you.

**Agencies in New York**

VNS Health: 888-735-8913

**Agencies in New Jersey**

Caring People: 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 p.m. the day before your procedure. If your procedure is scheduled for a Monday, they’ll call you on the Friday before. If you do not get a call by 7 p.m., call 212-639-5014.

The staff member will tell you what time to arrive for your procedure. They’ll also remind you where to go.

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.

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 and the time you took them. Make sure to
include prescription and over-the-counter medications, patches, and creams.

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

**Meet with an anesthesiologist**

You will also meet with an anesthesiologist (A-nes-THEE-zee-AH-loh-jist). An anesthesiologist is a healthcare provider with special training in anesthesia. They will give you anesthesia during your procedure. They will also:

- Review your medical history with you.
- Ask you if you’ve had any problems with anesthesia in the past. This includes nausea (feeling like you’re going to throw up) 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 questions you have about 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* ([www.mskcc.org/pe/remove_foley](http://www.mskcc.org/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

Visit the cancer types section of MSK’s website at www.msk.org/types for more information.

Admitting Office

212-639-7606
Call if you have questions about your hospital admission, such as asking for a private room.

**Anesthesia**
212-639-6840
Call if you have questions about anesthesia.

**Blood Donor Room**
212-639-7643
Call for information if you’re interested in donating blood or platelets.

**Bobst International Center**
888-675-7722
We welcome patients from around the world and offer many services to help. If you’re an international patient, call for help arranging your care.

**Caregivers Clinic**
[www.msk.org/caregivers](http://www.msk.org/caregivers)
646-888-0200
At MSK, the Caregivers Clinic provides support specifically for caregivers who are having difficulty coping with the demands of being a caregiver. For more information, call Dr. Allison Applebaum’s office at 646-888-0200.

**Counseling Center**
Many people find that counseling helps them. Our Counseling Center offers counseling for individuals, couples, families, and groups. We can also prescribe 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.

**Food Pantry Program**
646-888-8055
We give 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**
[www.msk.org/integrativemedicine](http://www.msk.org/integrativemedicine)
Our 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. To schedule an appointment for these services, call 646-449-1010.

You can also schedule a consultation with a healthcare provider in the Integrative Medicine Service. They will work with you to come up with a plan for creating a
healthy lifestyle and managing side effects. To make an appointment, call 646-608-8550.

**MSK Library**
library.mskcc.org
212-639-7439
You can visit our library website or call to talk with the library reference staff. They can help you find more information about a type of cancer. You can also visit the library’s [Patient and Health Care Consumer Education Guide](https://library.mskcc.org/).

**Nutrition Services**
www.msk.org/nutrition
212-639-7312
Our Nutrition Service offers nutritional counseling with one of our clinical dietitian nutritionists. Your clinical dietitian nutritionist will talk with you about your eating habits. They can also give advice on what to eat during and after treatment. To make an appointment, ask a member of your care team for a referral or call the number above.

**Patient and Caregiver Education**
www.msk.org/pe
Visit our Patient and Caregiver Education website to search for educational resources, videos, and online
programs.

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

**Perioperative Nurse Liaison**  
212-639-5935  
Call if you have questions about MSK releasing any information while you’re having surgery.

**Private Duty Nurses and Companions**  
917-862-6373  
You can request private nurses or companions to care for you in the hospital and at home. Call for more information.

**Rehabilitation Services**  
[www.msk.org/rehabilitation](http://www.msk.org/rehabilitation)  
Cancers and cancer treatments can make your body feel weak, stiff, or tight. Some can cause lymphedema (swelling). Our physiatrists (rehabilitation medicine
doctors), occupational therapists (OTs), and physical therapists (PTs) can help you get back to your usual activities.

- **Rehabilitation medicine doctors** diagnose and treat problems that affect how you move and do activities. They can design and help coordinate your rehabilitation therapy program, either at MSK or somewhere closer to home. To learn more, call Rehabilitation Medicine (Physiatry) at 646-888-1929.

- An **OT** can help if you’re having trouble doing usual daily activities. For example, they can recommend tools to help make daily tasks easier. A **PT** can teach you exercises to help build strength and flexibility. To learn more, call Rehabilitation Therapy at 646-888-1900.

**Resources for Life After Cancer (RLAC) Program**
646-888-8106
At MSK, care does not end after your treatment. The RLAC Program is for patients and their families who have finished treatment.

This program has many services. We offer seminars, workshops, support groups, and counseling on life after treatment. We can also help with insurance and employment issues.
Sexual Health Programs
Cancer and cancer treatments can affect your sexual health, fertility, or both. MSK’s sexual health programs can help you before, during, or after your treatment.

- Our **Female Sexual Medicine and Women’s Health Program** can help with sexual health problems, such as premature menopause or fertility issues. For more information or to make an appointment, call 646-888-5076.
- Our **Male Sexual and Reproductive Medicine Program** can help with sexual health problems, such as erectile dysfunction (ED). For more information or to make an appointment, call 646-888-6024.

Social Work
[www.msk.org/socialwork](http://www.msk.org/socialwork)
212-639-7020
Social workers help patients, families, and friends deal with common issues for people who have cancer. They provide individual counseling and support groups throughout your treatment. They can help you communicate with children and other family members.

Our social workers can also help refer you to community agencies and programs. They also have information about financial resources, if you’re having trouble
paying your bills.

**Spiritual Care**
212-639-5982
Our chaplains (spiritual counselors) are available to listen, help support family members, and pray. They can contact community clergy or faith groups, or simply be a comforting companion and a spiritual presence. Anyone can ask for spiritual support. You do not have to have a religious affiliation (connection to a religion).

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. Ask for the chaplain on call.

**Tobacco Treatment Program**
www.msk.org/tobacco
212-610-0507
MSK has specialists who can help you quit smoking. For more information about our Tobacco Treatment Program, call 212-610-0507. You can also ask your nurse about the program.

**Virtual Programs**
www.msk.org/vp
Our Virtual Programs offer online education and support for patients and caregivers. These are live sessions
where you can talk or just listen. You can learn about your diagnosis, what to expect during treatment, and how to prepare for your cancer care.

Sessions are private, free, and led by experts. Visit our website for more information about Virtual Programs or to register.

**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)
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
www.urologyhealth.org

**US TOO**
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)

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

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

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