Memorial Sloan Kettering Cancer Center

PATIENT & CAREGIVER EDUCATION

About Your Prostate Ablation Procedure

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

About your prostate

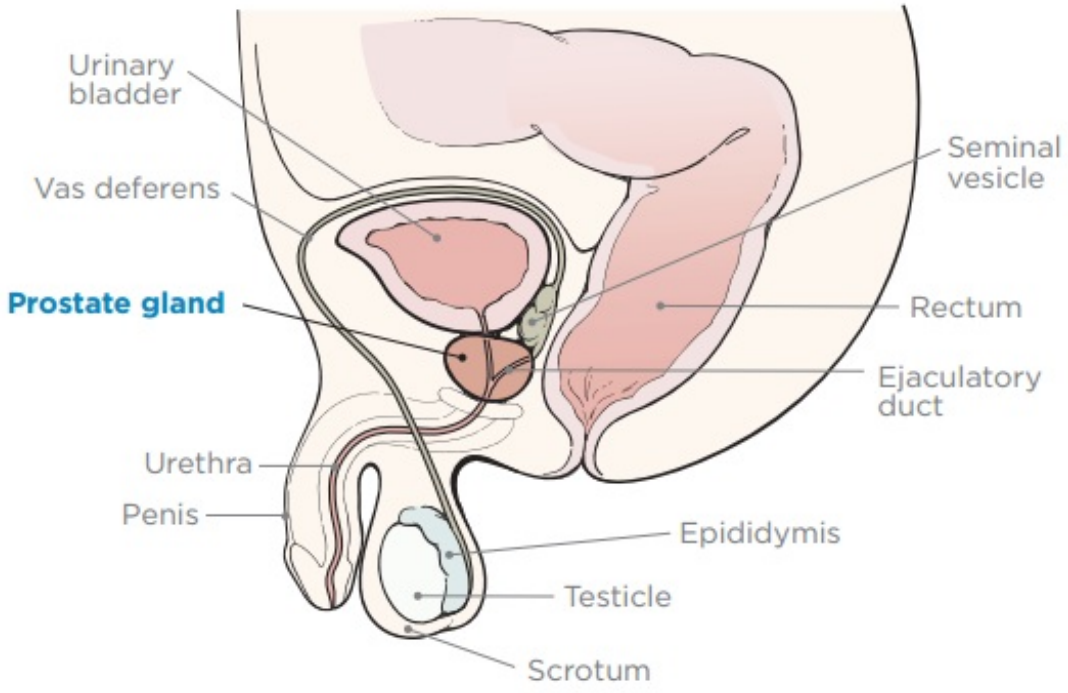

Figure 1. Male reproductive system

- 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 (HIFU). 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. You'll be taken to the recovery room with a Foley catheter in your bladder to drain your urine.

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. This probe is what delivers the ultrasound energy to kill your cancer cells.

After your treatment is completed, the probe will be taken out and you'll be taken to the recovery room with a Foley catheter in your bladder to drain your urine.

Getting ready for your procedure

You and your care team will work together to get ready for your procedure. Help us keep you safe by telling us if any of these things apply to you, even if you're not sure.

- I take any prescription medicines. A prescription medicine is one you can only get with a prescription from a healthcare provider. Examples include:
  - Medicines you swallow.
  - Medicines you take as an injection (shot).
  - Medicines you inhale (breathe in).
  - Medicines you put on your skin as a patch or cream.
- I take any over-the-counter medicines, including patches and creams. An over-the-counter medicine is one you can buy without a prescription.
- I take any 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 had a problem with anesthesia (A-nes-THEE-zhuh) in the past. Anesthesia is medicine to make you sleep during a surgery or procedure.
- I'm allergic to certain medicines or materials, including latex.
- I'm not willing to receive a blood transfusion.
- I use recreational drugs, such as marijuana.

Always be sure your healthcare providers know all the medicines and supplements you're taking.

You may need to follow special instructions before your procedure based on the medicines and supplements you take. If you do not follow those instructions, your procedure may be delayed or canceled.

About drinking alcohol

It's important to talk with your healthcare providers about how much alcohol you drink. This will help us plan your care.

If you drink alcohol regularly, you may be at risk for problems during and after your procedure. These include bleeding, infections, heart problems, and a longer hospital stay.

If you drink alcohol regularly and stop suddenly, it can

cause seizures, delirium, and death. If we know you're at risk for these problems, we can prescribe medications to help prevent them.

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 procedures. All your medical information will be kept private, as always.

About smoking

If you smoke or use an electronic smoking device, you can have breathing problems when you have a procedure. Vapes and e-cigarettes are examples of electronic smoking devices. Stopping for even a few days before your procedure can help prevent breathing problems during and after your procedure.

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.

About sleep apnea

Sleep apnea is a common breathing problem. If you have sleep apnea, you 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 blocked during sleep.

OSA can cause serious problems during and after a procedure. 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. You'll get a reminder from your healthcare provider's office with the appointment date, time, and location. Visit www.msk.org/parking for parking information and directions to all MSK locations.

You can eat and take your usual medicines the day of your PST appointment.

It's helpful to bring these things to your appointment:

- A list of all the medicines you're taking, including prescription and over-the-counter medicines, patches, and creams.
- Results of any medical tests done outside of MSK in the past year, if you have them. Examples include results from a cardiac stress test, echocardiogram, or carotid doppler study.
- The names and telephone numbers of your healthcare providers.

You'll meet with an advance practice provider (APP) during your PST appointment. They work closely with MSK's anesthesiology (A-nes-THEE-zee-AH-loh-jee) staff. These are doctors with special training in using anesthesia during a procedure.

Your APP will review your medical and surgical history with you. You may have tests to plan your care, such as:

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

Your APP may recommend you see other healthcare providers. They'll also talk with you about which medicine(s) 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 about health care proxies and other advance directives, read *Advance Care Planning for People With Cancer and Their Loved Ones* (www.mskcc.org/pe/advance-care-planning).
- To learn about being a health care agent, read *How to Be a Health Care Agent* (www.mskcc.org/pe/health-care-

agent).

Talk with a member of your care team if you have questions about filling out a Health Care Proxy form.

Do physical activity

Doing physical activity will help your body get into its best condition for your procedure. It will also make your recovery faster and easier.

Try to do physical activity every day. Any activity that makes your heart beat faster, such as walking, swimming, or biking, is a good choice. 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

Aspirin can cause bleeding. If you take aspirin or a medicine that has aspirin, you may need to change your dose or stop taking it 7 days before your procedure. Follow your healthcare provider's instructions. **Do not stop taking aspirin unless they tell you to.**

To learn more, read *How To Check if a Medicine or Supplement Has Aspirin, Other NSAIDs, Vitamin E, or Fish Oil* (www.mskcc.org/pe/check-med-supplement).

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

Vitamin E, multivitamins, herbal remedies, and other dietary supplements can cause bleeding. Stop taking them 7 days before your procedure. If your healthcare provider gives you other instructions, follow those instead.

To learn more, read *Herbal Remedies and Cancer Treatment* (www.mskcc.org/pe/herbal-remedies).

2 days before your procedure

Stop taking nonsteroidal anti-inflammatory drugs (NSAIDs)

NSAIDs, such as ibuprofen (Advil® and Motrin®) and naproxen (Aleve®), can cause bleeding. Stop taking them 2 days before your procedure. If your healthcare provider gives you other instructions, follow those instead.

To learn more, read *How To Check if a Medicine or Supplement Has Aspirin, Other NSAIDs, Vitamin E, or Fish Oil* (www.mskcc.org/pe/check-med-supplement).

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

Caring People: 877-227-4649

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 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.

Instructions for eating

Important: If you take a GLP-1 medicine, do not follow these instructions. Follow the instructions in *Eating and Drinking Before Your Surgery or Procedure When Taking GLP-1 Medicines* (www.mskcc.org/pe/eat-drink-glp1) instead.

Stop eating at midnight (12 a.m.) the night before your surgery or procedure. This includes hard candy and gum.

Your healthcare provider may have given you different instructions for when to stop eating. If so, follow their instructions. Some people need to fast (not eat) for longer before their surgery or procedure.

The morning of your procedure

Instructions for drinking

Important: If you take a GLP-1 medicine, do not follow these instructions. Follow the instructions in *Eating and Drinking Before Your Surgery or Procedure When Taking GLP-1 Medicines* (www.mskcc.org/pe/eat-drink-glp1) instead.

Between midnight (12 a.m.) and 2 hours before your arrival time, only drink the liquids on the list below. Do not eat or drink anything else. Stop drinking 2 hours before your arrival time.

- Water.
- Clear apple juice, clear grape juice, or clear cranberry juice.
- Gatorade or Powerade.
- Black coffee or plain tea. It's OK to add sugar. Do not add anything else.
  - Do not add any amount of any type of milk or creamer. This includes plant-based milks and creamers.
  - Do not add flavored syrup.

If you have diabetes, pay attention to the amount of sugar in your drinks. It will be easier to control your blood sugar levels if you include sugar-free, low-sugar, or no added sugar versions of these drinks.

It's helpful to stay hydrated before surgeries and procedures, so drink if you are thirsty. Do not drink more than you need. You will get intravenous (IV) fluids during your surgery or procedure.

Stop drinking 2 hours before your arrival time. This includes water.

Your healthcare provider may have given you different instructions for when to stop drinking. If so, follow their instructions.

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.

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

Meet with a nurse

You'll meet with a nurse before your procedure. Tell them the dose of any medicines you took after midnight (12 a.m.) and the time you took them. Make sure to include prescription and over-the-counter medicine, 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 doctor with special training in anesthesia. They will give you anesthesia during your procedure. They will also:

- Review your medical history with you.
- Ask 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).

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.

Filling out your Recovery Tracker

We want to know how you're feeling after you leave the hospital. To help us care for you, we'll send questions to your MSK MyChart account. We'll send them every day for 5 days after you're discharged. These questions are known as your Recovery Tracker.

Fill out your Recovery Tracker every day before midnight (12 a.m.). It only takes 2 to 3 minutes to complete. Your answers to these questions will help us understand how you're feeling and what you need.

Based on your answers, we may reach out to you for more information. Sometimes, we may ask you to call your

surgeon's office. You can always contact your surgeon's office if you have any questions.

To learn more, read *Common Questions About MSK's Recovery Tracker* (www.mskcc.org/pe/recovery-tracker).

Changes in urination

- Your urine will drain from the catheter and empty from the bag into the toilet, for the first few days after your procedure.
- It's very common to have urinary urgency (needing to go to pee in a hurry) and frequency (needing to pee more often that normal), for the first 2 weeks after your catheter is removed.
- Your urine may be pink tinted or have small amounts of blood in it for weeks 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. This may last up to 3 months 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. Your penis may also get swollen and bruised. 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 or months.
- You may ejaculate less semen than you did before your procedure. This is permanent. Some people may not be able to ejaculate and fluid may not come out when you have an orgasm. You'll still be able to feel your orgasm.
- 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

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

www.msk.org/international

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.

Counseling Center

www.msk.org/counseling

646-888-0200

Many people find that counseling helps them. Our

Counseling Center offers counseling for individuals, couples, families, and groups. We can also prescribe medicine to help if you feel anxious or depressed. Ask a member of your care team for a referral or call the number above to make an appointment.

Food Pantry Program
646-888-8055
We give food to people in need during their cancer treatment. Talk with a member of your care team or call the number above to learn more.

Integrative Medicine and Wellness Service
www.msk.org/integrativemedicine
Our Integrative Medicine and Wellness Service offers many services to complement (go along with) traditional medical care. For example, we offer music therapy, mind/body therapies, dance and movement therapy, yoga, and touch therapy. Call 646-449-1010 to make an appointment for these services.

You can also schedule a consultation with a healthcare provider in the Integrative Medicine and Wellness Service. They'll work with you to make a plan for creating a healthy lifestyle and managing side effects. Call 646-608-8550 to make an appointment for a consultation.

MSK Library

library.mskcc.org
You can visit our library website or email asklibrarian@mskcc.org 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 Education Resource Guide.

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. Ask a member of your care team for a referral or call the number above to make an appointment.

Patient and Community Education
www.msk.org/pe
Visit our patient and community 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
646-357-9272
You can request private nurses or companions to care for you in the hospital and at home. Call to learn more.

Rehabilitation Services
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. Call Rehabilitation Medicine (Physiatry) at 646-888-1929 to learn more.

- 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. Call Rehabilitation Therapy at 646-888-1900 to learn more.

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. Ask a member

of your MSK care team for a referral or call 646-888-5076 to learn more.

- Our Male Sexual and Reproductive Medicine Program can help with sexual health problems such as erectile dysfunction (ED). Ask a member of your care team for a referral or call 646-888-6024 to learn more.

Social Work

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. If you're having trouble paying your bills, they also have information about financial resources. Call the number above to learn more.

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
If you want to quit smoking, MSK has specialists who can help. Call to learn more.

Virtual Programs
www.msk.org/vp
We 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 to learn more about Virtual Programs or to register.

External support services

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 questions or concerns, contact your healthcare provider. A member of your care team will answer Monday through Friday from 9 a.m. to 5 p.m. Outside those hours, you can leave a message or talk with another MSK provider. There is always a doctor or nurse on call. If you're not sure how to reach your healthcare provider, call 212-639-2000.

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

About Your Prostate Ablation Procedure - Last updated on April 1, 2026

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