About Your Prostate Ablation Procedure

This guide will help you prepare for your prostate ablation procedure at Memorial Sloan Kettering Cancer Center (MSK) and know what to expect after your procedure.

Prostate ablation is a procedure that is used to treat prostate cancer. The cancer is destroyed with energy that is applied using small needle probes placed into the prostate (see Figure 1) through the skin or high-frequency ultrasound energy applied through the rectum. Your doctor will tell you which way your treatment will be applied. These treatments cause temperature changes that kill the cancer cells.
The **prostate gland** is a small, firm gland about the size of a walnut. It lies in front of the rectum, directly below the bladder. The prostate makes and secretes semen.

The **urethra** is the tube that carries urine from the bladder out through the penis.

**Seminal vesicles** are small glands near the prostate that produce the fluid in semen. Semen passes into the urethra through the ejaculatory duct to allow ejaculation during orgasm.

The **perineum** is the space between your scrotum and anus.

**The Procedure**

You will be asleep under anesthesia during your procedure. You will be positioned on your back with your legs supported and raised above your hips with your knees bent. A small probe will
be placed into your rectum. This probe produces an image of your prostate on a video screen that your doctor will use to insert 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 doctor will use these needles to deliver the treatment to your prostate.

Once all the needles have been placed, you will be given your treatment. The treatment will take 20 to 30 minutes. After the treatment is completed, the probes will be removed and you will be brought to the recovery room.

You may have high frequency ultrasound energy applied through a probe in the rectum to treat your prostate cancer. Your doctor will let you know which treatment you will be receiving.

Your doctor may place a cystoscope (small, flexible scope) through your urethra (tube that you urinate through) to your prostate and bladder to check for any abnormalities that may affect your procedure.

For Your Safety

You and your healthcare team will work together to prepare 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. Some examples are heparin, warfarin (Coumadin®), clopidogrel (Plavix®), and tinzaparin
(Innohep®). There are others, so be sure your doctor knows all the medications you’re taking.

- I take prescription medications.
- I take any over-the-counter medications, 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 have had a problem with anesthesia in the past.
- I have allergies, including an allergy to latex.
- I am not willing to receive a blood transfusion.
- I drink alcohol.
- I smoke.
- I use recreational drugs.

**About drinking alcohol**

The amount of alcohol you drink can affect you during and after your procedure. It is important that you talk with your healthcare providers about your alcohol intake so that we can plan your care.

- Stopping alcohol suddenly can cause seizures, delirium, and death. If we know you are at risk for these complications, we can prescribe medication to help prevent them.
- If you drink alcohol regularly, you may be at risk for other complications during and after your procedure. These
include bleeding, infections, heart problems, greater
dependence on nursing care, and longer hospital stay.

Here are things you can do to prevent problems before your
procedure:

- Be honest with your healthcare provider about how much
  alcohol you drink.

- Try to stop drinking alcohol once your procedure is planned.
  If you develop a headache, nausea, increased anxiety, or can’t
  sleep after you stop drinking, tell your doctor right away.
  These are early signs of alcohol withdrawal and can be
  treated.

- Tell your healthcare provider if you can’t stop drinking.

- Ask us any questions you have about drinking and your
  procedure. As always, all of your treatment information will
  be kept confidential.

**About smoking**
People who smoke can have breathing problems when they have
a procedure. Stopping even for a few days before a procedure
can help. If you want to quit, call our Tobacco Treatment
Program at 212-610-0507.

**About sleep apnea**
Sleep apnea is a common breathing disorder that causes a
person to stop breathing for short periods while sleeping. The
most common type is obstructive sleep apnea (OSA). This
means that the airway becomes completely blocked during
sleep, so no air can get through. OSA can cause serious problems after a procedure. Please tell us if you have sleep apnea or if you think you may have it. If you use a breathing machine (such as a CPAP) for sleep apnea, bring it with you the day of your procedure.

Preparing for Your Procedure

Within 30 days of your procedure
Presurgical testing (PST)

Before your surgery, you will have an appointment for presurgical testing (PST). The date, time, and location of your PST appointment will be printed on the appointment reminder from your surgeon’s office.

You can eat and take your usual medications the day of your PST appointment. During your appointment, you will meet with a nurse practitioner who works closely with anesthesiology staff (doctors and specialized nurses who will be giving you medication to put you to sleep during your surgery). He or she will review your medical and surgical history with you. You will have tests, including an electrocardiogram (EKG) to check your heart rhythm, a chest x-ray, blood tests, and any other tests necessary to plan your care. Your nurse practitioner may also recommend you see other healthcare providers.

Your nurse practitioner will talk with you about which medications you should take the morning of your surgery. To help you remember, we’ve left space for you to write these medications down in the section “The Day of Your Procedure.”
It is very helpful if you bring the following with you to your PST appointment:

- A list of all the medications you are taking, including patches and creams
- Results of any tests done outside of MSK, such as a cardiac stress test, echocardiogram (echo), or carotid doppler study
- The name(s) and telephone number(s) of your doctor(s)

**Health care proxy**

If you haven’t already completed a Health Care Proxy form, we recommend you complete one now. A health care proxy is a legal document that identifies the person who will speak for you if you are unable to communicate for yourself. The person you identify is called your health care agent. If you are interested in completing a Health Care Proxy form, talk with your nurse. If you have completed one or if you have any other advanced directive, bring it with you to your next appointment.

**Exercise**

Walk every day. If it is cold outside, use stairs in your home or go to a mall or shopping market. Walking will help your body get into its best condition for your procedure and make your recovery faster and easier.

**Eat a healthy diet**

You should eat a well-balanced, healthy diet before your procedure. If you need help with your diet, talk to your doctor or nurse about meeting with a dietitian.
10 Days Before Your Procedure

Stop Taking Vitamin E
If you take vitamin E, stop taking it 10 days before your procedure, because it can cause bleeding. For more information, read *Common Medications Containing Aspirin and Other Nonsteroidal Anti-inflammatory Drugs (NSAIDs)*.

7 Days Before Your Procedure

Stop taking certain medications
If you take aspirin, ask your surgeon if you should continue. Aspirin and medications that contain aspirin can cause bleeding. For more information, read *Common Medications Containing Aspirin and Other Nonsteroidal Anti-inflammatory Drugs (NSAIDs)*.

Stop taking herbal remedies or supplements
Stop taking herbal remedies or supplements 7 days before your procedure. If you take a multivitamin, talk with your doctor or nurse about whether you should continue. For more information, read *Herbal Remedies and Cancer Treatment*.

2 Days Before Your Procedure

Review your medications
Stop taking all nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen (e.g., Advil®, Motrin®) and naproxen (e.g., Aleve®) 2 days before your procedure. These medications can cause bleeding. For more information, read *Common Medications Containing Aspirin and Other Nonsteroidal Anti-
inflammatory Drugs (NSAIDs).

Start taking tamsulosin
Your doctor will give you a prescription for tamsulosin (Flomax®) to help with urination after your procedure. Start taking the tamsulosin 2 days before your procedure or as directed by your doctor or nurse.

The Day Before Your Procedure

Follow a clear liquid diet
Starting 1 day before your procedure, you will need to follow a clear liquid diet. A clear liquid diet includes only liquids you can see through. Examples are listed in the table below. You cannot eat any solid foods while on a clear liquid diet. If you have any questions, talk with your nurse.

<table>
<thead>
<tr>
<th>Food/Beverage</th>
<th>Drink</th>
<th>Do Not Drink</th>
</tr>
</thead>
</table>
| **Soups**     | • Clear broth or bouillon  
                • Clear consommé  
                • Packaged vegetable, chicken, or beef broth | Any products with any particles of dried food or seasoning |
| **Sweets**    | • Gelatin, such as Jell-O®  
                • Flavored ices  
                • Hard candies, such as Lifesavers® | All others |
| **Beverages** | • Clear fruit juices, such as white cranberry, white grape, apple | • Juices with pulp  
                • Nectars  
                • Milk or cream |
Soda, such as 7-Up®, Sprite®, ginger ale, seltzer, Gatorade®, Black coffee, Tea

*You may also include Boost® Breeze, Ensure Clear™, or Diabetishield® nutritional drinks for additional calories and protein.

**Start taking antibiotics**
Your doctor will give you a prescription for antibiotics. Start taking them as directed 1 day before your procedure.

**Note the time of your procedure**
A clerk from the Admitting Office will call you after 2:00 PM the day before your procedure. He or she will tell you what time you should arrive at the hospital for your procedure. If you are scheduled for a procedure on a Monday, you will be called on Friday. If you do not receive a call by 7:00 PM the evening before your procedure, please call 212-639-5014.

On the day of your procedure, go to the MSK Presurgical Center (PSC).

**MSK Presurgical Center (PSC)**
1275 York Avenue (between East 67th and East 68th Streets)
New York, NY 10065
B elevator to 6th Floor

**Give yourself a saline enema**
Give yourself a saline enema (such as Fleet®) either 2 hours before you go to bed or the morning of your procedure. Follow the directions on the box.

**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 Day of Your Procedure**

**Take your medications**
If your doctor or nurse practitioner instructed you to take certain medications the morning of your procedure, take only those medications with a small sip of water. Depending on what medications you take and the procedure you’re having, this may be all, some, or none of your usual morning medications.

**Give yourself a saline enema (if you haven’t already)**
If you did not give yourself a saline enema the night before your procedure, give it to yourself the morning of your procedure.

**Things to remember**

- Wear comfortable, loose-fitting pants with an elastic waistband.
- Do not apply any lotion, cream, powder, deodorant, make-up, powder, or perfume.
- Do not wear any metal objects. Remove all jewelry, including body piercings. The equipment used during your procedure can cause burns if it touches metal.
- Leave valuables, such as credit cards, jewelry, or your checkbook, at home.
- Before you are taken into the operating room, you will need to remove your eyeglasses, hearing aids, dentures, prosthetic device(s), wig, and religious articles, such as a rosary.

**What to bring**

- CD player and CDs or an iPod, if you choose. However, someone will need to hold these items for you when you are having your procedure.
- If you usually wear contacts, wear your glasses instead. Remember to bring a case for them.
Parking when you arrive
Parking at MSK is available in the garage on East 66th Street between York and First Avenues. To reach the garage, turn onto East 66th Street from York Avenue. The garage is located about a quarter of a block in from York Avenue, on the right-hand (north) side of the street. There is a pedestrian tunnel that connects the garage to the hospital. There are also garages located on East 69th Street between First and Second Avenues, East 67th Street between York and First Avenues, and East 65th Street between First and Second Avenues. For questions about prices, call 212-639-2338.

Once You’re in the Hospital
You will be asked to state and spell your name and birth date many times. This is for your safety. Patients with the same or similar names may be having procedure on the same day.

Get dressed for your procedure
You will be given a hospital gown, robe, and nonskid socks. Do not bring anything extra with you. Storage space is very limited.
Meet with your nurse
Your nurse will meet with you before your procedure. Tell him or her the dose of any medications (including patches and creams) you took after midnight and the time you took them.

Meet with your anesthesiologist
He or she will:

- Review your medical history with you.
- Talk to you about your comfort and safety during your procedure.
- Talk to you about the kind of anesthesia (medication to make you sleep) you will receive.
- Answer any questions you may have about your anesthesia.

Prepare for your procedure
Your anesthesiologist will place an intravenous (IV) line into a vein, usually in your arm or hand. The IV line will be used to give you fluids and anesthesia (medication to make you sleep) during your procedure.

You will walk into the operating room or you can be taken on a stretcher. A member of the operating room team will help you onto the operating bed. Compression boots will be placed on your lower legs. These gently inflate and deflate to help the circulation in your legs.

Once you are fully asleep, a breathing tube will be placed through your mouth and into your windpipe to help you...
breathe. The breathing tube is usually taken out while you are still in the operating room.

**Family and friends**
You will get a resource called *Information for Family and Friends for the Day of Surgery* to review. This information will tell your family and friends what to expect before, during, and after your procedure.

**After Your Procedure**
When you wake up after your procedure, you will be in the Post Anesthesia Care Unit (PACU).

You will have an oxygen mask covering your nose and mouth. A nurse will be monitoring your body temperature, pulse, blood pressure, and oxygen levels.

You will have a urinary (Foley®) catheter in your bladder to monitor the amount of urine you are making. The catheter is usually removed within 2 to 3 days after your procedure. Your nurse will tell you when it will be removed.

You will also have compression boots on your lower legs to help your circulation.

Once you are fully awake, your oxygen mask will be taken off. You will then receive oxygen through a thin tube that rests below your nose called a nasal cannula.

Your visitors can see you briefly in the PACU, usually within 90 minutes after you arrive there. A member of the nursing staff
will explain the guidelines to them. Depending on the procedure you had, you may stay in the PACU overnight.

Once you are awake and feeling well enough, you will likely be discharged to go home with a family member or companion. Before you are discharged, your nurse will teach you how to care for your catheter, go over your medications, and tell you how to make your follow up appointment with your doctor.

Commonly Asked Questions

The following section covers common questions patients ask once they are discharged. Talk with your doctor or nurse if you have any additional questions or if any of this information is unclear.

Will I have pain?
You will probably have some pain in your skin puncture sites for about 24 to 48 hours after your procedure. You can take a mild pain reliever such as acetaminophen (Tylenol®) or ibuprofen (Advil®) to help with any discomfort.

Will I be given any medication?
Continue to take the antibiotics and tamsulosin as directed.

One to 2 weeks after your procedure, you may feel burning when you urinate. Your doctor will give you a prescription for medication to help with this.

What should I do if I have bleeding in my skin puncture sites?
If you have any bleeding in your skin puncture sites, 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 doctor.

**Will I have any bruising or swelling after the procedure?**
Your testicles may be bruised and swollen after your procedure. This is normal and should go away in about 3 weeks. To minimize swelling and bruising, apply ice packs to your perineum for 20 minutes on and then 20 minutes off, for the first 24 hours after your procedure.

You may also have some swelling in your prostate after your procedure. This may cause your urine to flow slower than usual. This should go away in 3 or 4 days after your procedure.

**What are other side effects that I may experience from my procedure?**

- 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 a permanent side effect.
- Your urine may pass slowly for 3 or 4 days. This is because of swelling. You may have frequent urination for up to 6 weeks after your procedure.
- 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 doctor.
• You may experience tenderness and light bleeding in the area of the skin puncture sites. This may continue for several days after your procedure. If this area becomes very red, tender, or swollen, contact your doctor.

• You may have changes in erectile function. Your doctor will discuss this with you.

Do I need to follow a special diet after my procedure?
No. After your procedure, your can resume your regular diet.

When can I shower?
You can shower 24 hours after you are discharged.

When can I lift heavy objects?
Do not lift anything heavier than 20 pounds for at least 48 hours after your procedure.

Call your doctor or nurse if you have:

• New or worsening shortness of breath
• A temperature 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 does not get better with your medications
• Any new symptom or physical change
Any questions or concerns

**MSK Support Services**

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

**Admitting**

212-639-5014

Call to discuss private room or luxury suite options. If you want to change your room choice after your presurgical testing visit, call 212-639-7873 or 7874.

**Anesthesia**

212-639-6840

Call with questions about anesthesia.

**Blood Donor Room**

212-639-7643

Call for more information if you are interested in donating blood or platelets.

**Bobst International Center**

888-675-7722

MSK welcomes patients from around the world. If you are an international patient, call for help.

**Chaplaincy Service**

212-639-5982

At MSK, our chaplains 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. The interfaith chapel is located near the main lobby of Memorial Hospital, and is open 24 hours a day. If you have an emergency, please call the hospital operator and ask for the chaplain on call.

**Counseling Center**  
646-888-0200  
Many people find counseling helpful. We provide counseling for individuals, couples, families, and groups, as well as medications to help if you feel anxious or depressed.

**Integrative Medicine Service**  
646-888-0800  
Offers patients many services to complement traditional medical care, including music therapy, mind/body therapies, dance and movement therapy, yoga, and touch therapy.

**Male Sexual Reproductive Medicine Program**  
646-888-6024  
This program helps male patients who are dealing with cancer-related sexual health challenges, including erectile dysfunction.

**Patient-to-Patient Support Program**  
212-639-5007  
You may find it comforting to speak with a cancer survivor or caregiver who has been through a similar treatment. Through our Patient-to-Patient Support Program, we are able to offer you a chance to speak with former patients.
and caregivers.

**Patient Billing**
646-227-3378
Call Patient Billing with any questions regarding preauthorization with your insurance company. This is also called preapproval.

**Patient Representative Office**
212-639-7202
Call if you have any questions about the Health Care Proxy form or if you have any concerns about your care.

**Perioperative Nurse Liaison**
212-639-5935
Call if you have any questions about MSK releasing any information while you are having your procedure.

**Private Duty Nursing Office**
212-639-6892
Patients can request private nurses or companions. Call for more information.

**Resources For Life After Cancer (RLAC) Program**
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
Social workers help patients, family, and friends deal with issues that are common for cancer patients. They provide 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 refer you to community agencies and programs, as well as financial resources if you’re eligible.

Tobacco Treatment Program
212-610-0507
If you want to quit smoking, we have specialists who can help. Call for more information.

External Resources
The following are resources outside of MSK that you may find helpful:

American Cancer Society
www.cancer.org

The American Urologic Association Foundation
866-746-4282
www.urologyhealth.org

US TOO
1800-808-7866
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](http://www.NAFC.org)

**National Cancer Institute**  
[www.cancer.gov](http://www.cancer.gov)

**Prostate Cancer Foundation**  
[www.prostatecancerfoundation.org](http://www.prostatecancerfoundation.org)

**Prostate Cancer Treatment Guidelines for Patients**  
[www.nccn.org](http://www.nccn.org) (also in Spanish)

For additional web based information, visit LIBGUIDES on MSK’s library website at [http://library.mskcc.org](http://library.mskcc.org) or the Prostate Cancer section of mskcc.org. You can also contact the library reference staff at 212-639-7439 for assistance.

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.

For more resources, visit [www.mskcc.org/pe](http://www.mskcc.org/pe) to search our virtual library.

---

About Your Prostate Ablation Procedure - Generated on June 29, 2019  
©2019 Memorial Sloan Kettering Cancer Center