About Your Ablation Procedure

This information explains how to prepare for and what to expect when you have your ablation procedure at Memorial Sloan Kettering (MSK).

Ablation is a minimally invasive procedure that uses special needles to apply heat, cold, lasers, or chemical agents to destroy cancer cells. The ablation reaches the tumor through a special needle. You will need to have imaging tests done to guide the placement of the needle into the tumor. These imaging tests may be a computed tomography (CT) scan, magnetic resonance imaging (MRI), or an ultrasound. Once the needle reaches the targeted area, the ablation therapy will deliver the selected agent to destroy the cancer cells.

Your ablation will be done by an interventional radiologist. Interventional radiologists are doctors who specialize in image guided procedures and will use scans during the procedure to help guide the placement of needle into the tumor. Your doctor will talk with you about the type of ablation that is best for you.

You may be discharged the same day as your procedure or you may need to spend the night at the hospital. Your doctor will give discuss your discharge plan with you.

Before Your Procedure

Ask about your medications

You may need to stop taking some of your medications before your procedure. Talk with your doctor about which medications are safe for you to stop taking. We have included some common examples below.

Anticoagulants (blood thinners)

If you take a blood thinner (medication that affects the way your blood clots), ask the doctor performing your procedure what to do. Their contact information
is listed at the end of this resource. Whether they recommend you stop taking the medication depends on the reason you’re taking it.

**Do not stop taking your blood thinner medication without talking with your doctor.**

<table>
<thead>
<tr>
<th>Examples of Blood Thinners</th>
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<tbody>
<tr>
<td>apixaban (Eliquis®)</td>
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<tr>
<td>dalteparin (Fragmin®)</td>
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<tr>
<td>meloxicam (Mobic®)</td>
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<tr>
<td>ticagrelor (Brilinta®)</td>
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<td>aspirin</td>
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<tr>
<td>dipyridamole (Persantine®)</td>
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<tr>
<td>nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen (Advil®) or naproxen (Aleve®)</td>
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<tr>
<td>tinzaparin (Innohep®)</td>
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<td>celecoxib (Celebrex®)</td>
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<td>edoxaban (Savaysa®)</td>
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<td>pentoxifylline (Trental®)</td>
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<td>warfarin (Coumadin®)</td>
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<td>cilostazol (Pletal®)</td>
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<td>enoxaparin (Lovenox®)</td>
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<td>prasugrel (Effient®)</td>
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<td>clopidogrel (Plavix®)</td>
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<td>Fondaparinux (Arixtra®)</td>
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<td>rivaroxaban (Xarelto®)</td>
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<td>dabigatran (Pradaxa®)</td>
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<td>heparin (shot under your skin)</td>
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<td>sulfasalazine (Azulfidine®, Sulfazine®)</td>
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Please read our resource *Common Medications Containing Aspirin and Other Nonsteroidal Anti-inflammatory Drugs (NSAIDs)* ([www.mskcc.org/pe/common_meds](http://www.mskcc.org/pe/common_meds)). It has important information about medications you’ll need to avoid before your procedure and what medications you can take instead.

**Medications for diabetes**

If you take insulin or other medications for diabetes, ask the doctor who prescribes the medication what you should do the morning of your procedure. You may need to change the dose before your procedure.

**Diuretics (water pills)**

If you take any diuretics (medications that make you urinate more often), ask the doctor performing your procedure what to do. You may need to stop taking them the day of your procedure. Diuretics are sometimes called water pills. Some examples are furosemide (Lasix®) and hydrochlorothiazide.
Arrange for someone to take you home

You must have a responsible care partner take you home after your procedure. Make sure to plan this before the day of your procedure.

If you don’t have someone to take you home, call one of the agencies below. They will send someone to go home with you. There’s usually a charge for this service, and you will need to provide transportation.

**Agencies in New York**
- Partners in Care: 888-735-8913
- Caring People: 877-227-4649

**Agencies in New Jersey**
- Caring People: 877-227-4649

Tell us if you’re sick

If you develop any illness (fever, cold, sore throat, or the flu) before your procedure, call a nurse in Interventional Radiology at 212-639-2236. A nurse is available Monday through Friday from 9:00 am to 5:00 pm. After 5:00 pm, during the weekend, and on holidays, call 212-639-2000 and ask for the Interventional Radiology fellow on call.

Note the time of your appointment

A staff member from Interventional Radiology will call you 2 business days before your procedure. If your procedure is scheduled on a Monday, you will be called on the Thursday before.

The staff member will tell you what time you should arrive at the hospital for your procedure. They will also tell you where to go for your procedure. If you don’t receive a call by noon the business day before your procedure, please call 212-639-5051.

If you need to cancel your procedure for any reason, please call the doctor who scheduled it for you.
Instructions for eating and drinking before your surgery

- Do not eat anything after midnight the night before your surgery. 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

Things to remember

- Take only the medications your doctor told you to take the morning of your procedure. Take them with a few sips of water.
- Don’t apply body creams, lotions, or petroleum jelly (Vaseline®). You can use deodorant and facial moisturizers.
- Don’t wear eye makeup.
- Remove any jewelry, including body piercings.
- Leave all valuables, such as credit cards and jewelry, at home.
- If you wear contact lenses, wear your glasses instead, if possible. If you don’t have glasses, please bring a case for your contacts.

What to bring with you

☐ A list of the medications you take at home
☐ Medications for breathing problems (such as inhalers), medications for chest pain, or both
☐ A case for your glasses or contacts
☐ Your Health Care Proxy form, if you have completed one

☐ If you use a CPAP or BiPAP machine to sleep at night, please bring your machine with you, if possible. If you can’t bring your machine with you, we will give you one to use while you are in the hospital.

**Where to park**

MSK’s parking garage is located on East 66th Street between York and First Avenues. If you have questions about prices, call 212-639-2338.

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 you can walk through that connects the garage to the hospital.

There are also other 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.

**Where to go**

Your procedure will be at MSK’s main hospital, located at 1275 York Avenue between East 67th and East 68th Streets. Take the M elevators to the Presurgical Center (PSC) on the 2nd floor.

**What to expect**

Once you arrive at the hospital, doctors, nurses, and other staff members will ask you to state and spell your name and date of birth many times. This is for your safety. People with the same or similar names may be having procedures on the same day.

You will be brought into the procedure room. If you don’t have an intravenous (IV) line, your nurse will put one in. You will receive medication through your IV to make you feel drowsy.

A member of our healthcare team will help position you onto the table. Depending on the type of ablation you’re having, you may need to have grounding pads placed on your thighs. Grounding pads are used to keep you from getting shocked and to protect you from injury. If you need grounding pads, your legs will be shaved before they’re placed.
Your skin will be cleaned with an antiseptic (liquid used to kill germs and bacteria) and covered with sterile drapes. A local anesthetic (medication to make you numb) will be injected into the area where your doctor will be working.

Your doctor will take pictures of the area and place a needle in the tumor. When the needle is in the right place, your ablation will begin.

After your ablation, you will have a small dressing on the site where the needle was inserted.

**After Your Procedure**

When you wake up after your surgery, you will be in the Post-Anesthesia Care Unit (PACU). A nurse will be monitoring you.

While you’re in the hospital, let your doctor or nurse know if you have pain. They will give you medication for your pain.

If you’re going home the same day, your nurse will remove your IV. Your nurse will explain your discharge instructions to both you and your caregiver before you go home.

If you’re staying in the hospital overnight, you will be transferred to a hospital room. Most people are discharged the day after their procedure.

**Follow-up Care**

You will have follow-up imaging tests and doctor’s appointments. These are to make sure that the treatment has completely killed the tumor. Call your doctor’s office if you don’t already have imaging tests set up.

**Call Your Doctor or Nurse if You Have:**

- A temperature of 100.4°F (38.3°C) or higher.
- Pain, nausea, or vomiting that’s worse than it was before your treatment.
- Redness, swelling, or pain around the area where the needle was placed.
- Redness, swelling, or pain around the area where the grounding pads were
placed.

- Any new symptoms.

**Contact Information**

If you have any questions or concerns, please call Interventional Radiology at 212-639-2236. You can reach a staff member Monday through Friday from 9:00 AM to 5:00 PM. After 5:00 PM, during the weekend, and on holidays, please call 212-639-2000 and ask for the fellow on call for Interventional Radiology.

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