



PATIENT & CAREGIVER EDUCATION

About Your Transrectal Prostate Biopsy With Ultrasound

This information will help you get ready for your transrectal prostate biopsy with ultrasound. It will also explain what to expect after your biopsy.

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 bladder (see Figure 1). Your prostate works with other glands in your body to make semen. It surrounds your urethra, the tube that drains urine (pee) from your bladder.

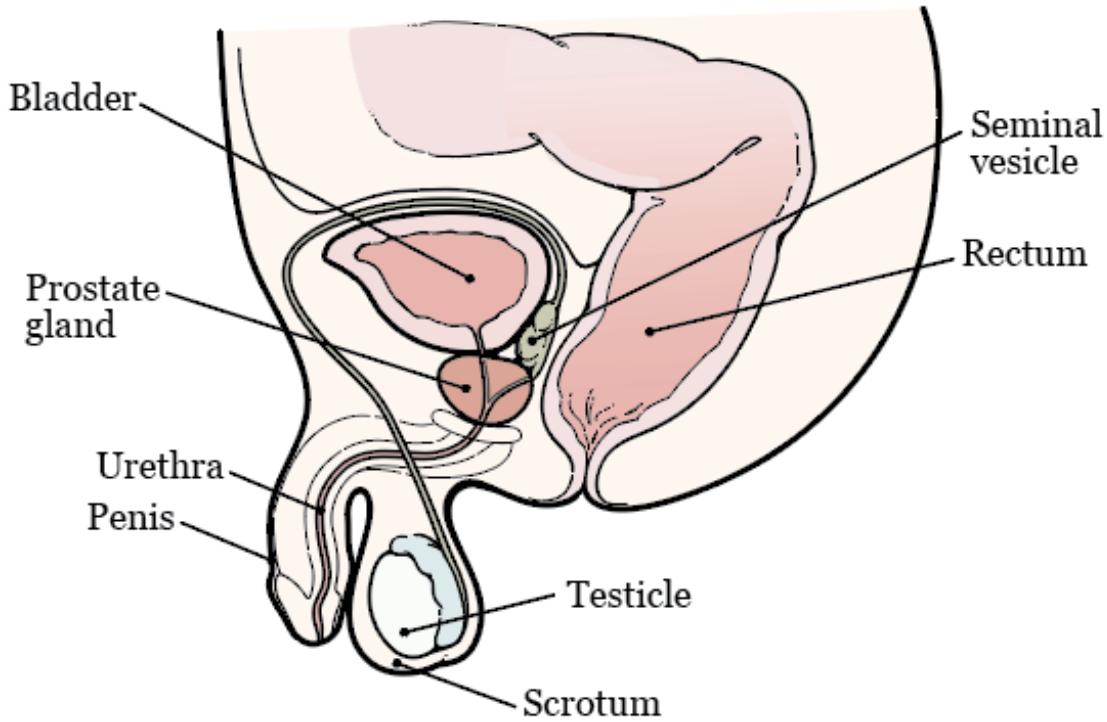


Figure 1. Your prostate and surrounding organs

About your prostate biopsy with ultrasound

A prostate biopsy is a procedure to collect small pieces of tissue from your prostate. An ultrasound is an imaging scan that uses sound waves to make pictures of the inside of your body.

Your healthcare provider will use ultrasound imaging during your biopsy. This will help them take tissue from the right areas of your prostate. After your biopsy, they will use a microscope to check the tissue for cells that are not normal.

Your prostate biopsy with ultrasound is scheduled for _____ (date) with _____ (healthcare provider).

Getting ready for your prostate biopsy

Talk with your healthcare provider

Tell your healthcare provider if you take anticoagulants (blood thinners). These are medicines that affect the way your blood clots.

We've listed some examples of common blood thinners below. There are others, so be sure your care team knows all the medicines you take. **Do not stop taking your blood thinner without talking with a member of your care team.**

- Apixaban (Eliquis®)
- Aspirin
- Celecoxib (Celebrex®)
- Cilostazol (Pletal®)
- Clopidogrel (Plavix®)
- Dabigatran (Pradaxa®)
- Dalteparin (Fragmin®)
- Dipyridamole (Persantine®)
- Edoxaban (Savaysa®)
- Enoxaparin (Lovenox®)
- Fondaparinux (Arixtra®)
- Heparin injection (shot)
- Meloxicam (Mobic®)
- Nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen (Advil®, Motrin®) and naproxen (Aleve®)
- Pentoxifylline (Trental®)
- Prasugrel (Effient®)
- Rivaroxaban (Xarelto®)
- Sulfasalazine (Azulfidine®, Sulfazine®)
- Ticagrelor (Brilinta®)
- Tinzaparin (Innohep®)
- Warfarin (Jantoven®, Coumadin®)

Also tell your healthcare provider if you:

- Take steroids, such as prednisone (Deltasone®).
- Have taken any antibiotics in the past 3 months.
- Take any other medicine, including vitamin E, multivitamins, herbal remedies, or any other dietary

supplements or home remedies. 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) . It has information about medicines you'll need to avoid before your procedure.

Buy your supplies

Buy the following supplies before your biopsy:

- 1 saline enema, such as a Fleet® saline enema. You can buy this at your local pharmacy without a prescription.
- Oral antibiotic (antibiotic that you swallow), if your healthcare provider tells you to. If you're taking an oral antibiotic, your healthcare provider will give you a prescription. Read the “Antibiotics” section of this resource for more information.

Plan for someone to take you home

Some people feel lightheaded after their biopsy. It's best to have someone take you home afterward. They can help you if needed.

What do to 5 to 7 days before your biopsy

Stop taking certain medicine

You may need to stop taking some of your medications before your biopsy. Examples include anticoagulants,

aspirin, medications that contain aspirin, multivitamins, and vitamin E. Talk with your healthcare provider about which medications are safe for you to stop taking. Follow their instructions.

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).

What to do 2 days before your biopsy

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).

What to do the day of your prostate biopsy

Give yourself a saline enema the morning of your biopsy. Follow the instructions on the box.

Eat and drink like you usually do. If you don't eat before your biopsy, it might be delayed.

Take your antibiotics

You will need to take an antibiotic to prevent infection from the biopsy. Your healthcare provider will tell you which antibiotic to take. They will also give you a prescription for one of the antibiotics listed below.

- Ciprofloxacin (Cipro®) 500 mg (2 tablets)
 - Take 1 tablet 2 hours before your biopsy.
 - Take 1 tablet 12 hours later.
- Cefixime (Suprax®) 400 mg (1 tablet)
 - Take 1 tablet 2 hours before your biopsy.
- Cefuroxime (Ceftin®) 500 mg (2 tablets)
 - Take 1 tablet 2 hours before your biopsy.
 - Take 1 tablet 12 hours later.
- Sulfamethoxazole-trimethoprim (Bactrim®) 500mg (2 tablets)
 - Take 1 tablet 2 hours before your biopsy.
 - Take 1 tablet 12 hours later.

Intravenous (IV) antibiotics

Your healthcare provider might decide you need IV antibiotics instead of oral antibiotics. If they do, they will give it to you through a vein in your arm 1 hour before your biopsy.

During your biopsy

First, your healthcare provider will gently put a probe into your rectum. They will put an anesthetic (numbing) lubricant on it to help it slide in easily. Then, they will give you an anesthetic injection (shot) near your prostate to numb the biopsy site.

The probe uses ultrasound to make pictures of your prostate. It also has a high-speed biopsy gun with a small, thin needle. Your healthcare provider will use this to take each biopsy sample. Your healthcare provider may take up to 18 biopsy samples.

The biopsy usually takes 20 to 30 minutes.

What to do after your prostate biopsy

It's normal to have some soreness or discomfort after your biopsy, but most people don't have pain. If you feel sore, you can take acetaminophen (Tylenol®). If the acetaminophen doesn't help, call your doctor's office.

For 3 days after your biopsy, try to drink twice the amount of liquids that you usually drink. This will help to flush out your bladder, prevent infection, and reduce the amount of blood in your urine. It will also help soften your bowel movements (poop). This which helps keep your rectum from getting irritated.

Short-term effects of your biopsy

Bowel movements

You might see blood in your bowel movements. You might also have a small amount of bleeding from your rectum. These can happen right after your biopsy or for the next few days when you have a bowel movement.

Urine

You might see blood in your urine for 1 to 2 weeks after your biopsy. This bleeding might come and go.

Semen

Your semen might look rust-colored for up to 12 weeks after your biopsy. This is because small amounts of blood might be in it.

Activities after your biopsy

Tell your nurse if you'll be more than 2 hours away from MSK during the first 24 hours after your biopsy. You might have to go to MSK's Urgent Care Center (UCC) if you have any problems after your biopsy. This includes fever or bleeding.

Don't have sex for 3 days after your biopsy.

For the next 5 days after your biopsy, do not:

- Play any sports.

- Work out in a gym.
- Ride a bicycle.
- Lift any objects heavier than 10 pounds (4.5 kilograms).

Getting your test results

Your test results will be ready 5 to 7 days after your biopsy. Your healthcare provider will contact you and explain the results to you. You can also ask for a copy of your results.

When to call your healthcare provider

Call your healthcare provider right away if you have:

- A fever of 101 °F (38.3 °C) or higher.
- Heavy bleeding out of your rectum.
- Bleeding out of your rectum that will not stop.
- Can't urinate.
- Bright red blood or large clots in your urine.
- Shaking chills.
- Dizziness.
- Any other problems, questions, or concerns.

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.

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