



PATIENT & CAREGIVER EDUCATION

High Dose Rate (HDR) Brachytherapy for the Treatment of Prostate Cancer

This information will help you get ready for your HDR brachytherapy (BRAY-kee-THAYR-uh-pee) treatment to your prostate at Memorial Sloan Kettering (MSK).

Read through this resource at least once before your brachytherapy procedure and use it as a reference in the days leading up to your treatment.

About Your Prostate

Your prostate is a walnut-sized gland that lies below your bladder, in front of your rectum. It surrounds your urethra, which is the tube that drains the urine from your bladder (see Figure 1). Your prostate adds fluid to your semen (ejaculatory fluid).

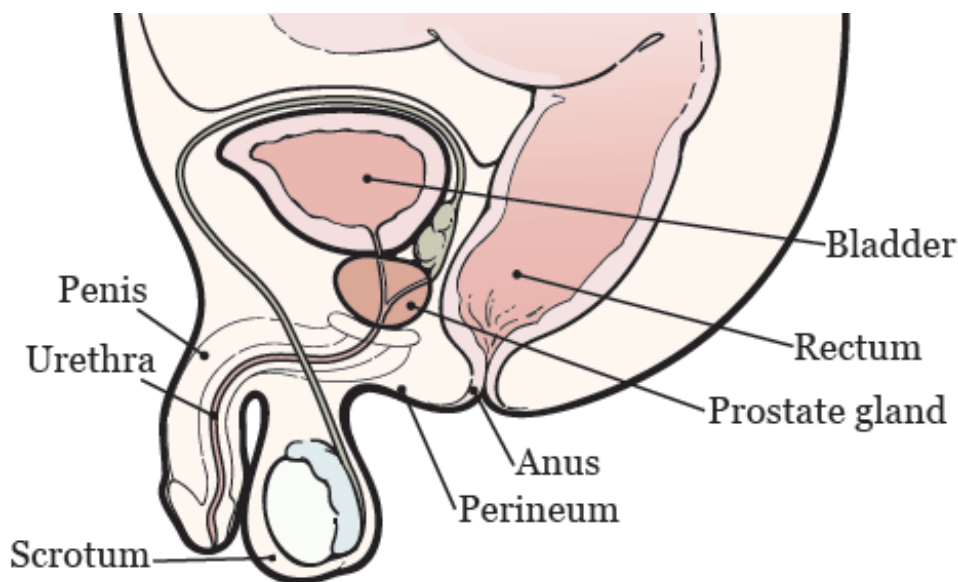


Figure 1. Your prostate anatomy

About HDR Brachytherapy

Brachytherapy is a type of radiation therapy. Radiation therapy kills cancer cells by making it hard for them to multiply. In brachytherapy a radiation source is placed directly into or next to a tumor.

With HDR brachytherapy, your healthcare provider will place needles inside your prostate gland. These needles will be attached to tubes that will deliver the radiation source into your prostate. After your treatment, the tubes and needles will be removed.

There are 2 steps for your HDR treatment:

1. You'll have a procedure to place the needles into your prostate. This will be done under anesthesia, so you'll be asleep.
2. Then, you'll have your HDR treatment(s), which are also called fractions.
 - You may have 1 or 2 treatments. Your radiation oncologist will discuss this with you.
 - Your first treatment will be done in the operating room, right after your needle placement procedure. If you need a second treatment, it will be done on the same day.
 - After treatment, the needles will be removed.
 - You'll go home the same day you have your treatments.

Use this space to write down the plan your radiation oncologist made for you:

Your role on your radiation therapy team

You'll have a team of healthcare providers working together to provide the right care for you. You're part of the team, and your role includes:

- Arriving on time for your procedure.
- Asking questions and talking about your concerns.
- Telling someone on your radiation therapy team when you have side effects or pain.
- Caring for yourself at home.
 - Quitting smoking, if you smoke. If you want to quit, call our Tobacco Treatment Program at 212-610-0507.
 - Drinking liquids as instructed.
 - Eating the foods suggested by your radiation therapy team.
 - Maintaining your weight.

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 aren't 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.

Consider banking your sperm

For more information, read the resources *Sperm Banking* (www.mskcc.org/pe/sperm_banking) and *Building Your Family After Cancer Treatment: Information for Men* (www.mskcc.org/pe/building_family_men).

Presurgical testing (PST)

Before your procedure, you'll have an appointment for presurgical testing (PST). The date, time, and location will be printed on the appointment reminder from

your healthcare provider's office. It's helpful to bring the following things to your PST 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 name(s) and telephone number(s) of your healthcare provider(s).

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

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 surgery). Your NP will review your medical and surgical history with you. You may have tests, such as an electrocardiogram (EKG) to check your heart rhythm, a chest x-ray, blood tests, and any other tests needed to plan your care. Your NP may also recommend that you see other healthcare providers.

Your NP will talk with you about which medications you should take the morning of your procedure.

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 complications, we can prescribe medications to help keep them from happening.
- If you drink alcohol regularly, you may be at risk for other complications 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. If you develop a headache, nausea (feeling like you're going to throw up), increased anxiety, or can't sleep after you stop drinking, tell your healthcare provider right away. These are early signs of alcohol withdrawal and can be treated.
- Tell your healthcare provider if you can't stop drinking.
- Ask your healthcare provider questions about drinking and your procedure. As always, all of your medical information will be kept confidential.

About smoking

If you smoke, you can have breathing problems when you have a procedure. Stopping even for a few days before your procedure can help. 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 disorder that causes you to stop breathing for short periods of time while sleeping. The most common type is obstructive sleep apnea (OSA). With OSA, your airway becomes completely blocked during sleep. OSA can cause serious problems during and after your procedure.

Please tell us if you have sleep apnea or if you think you might have it. If you use a breathing device (such as a CPAP device) for sleep apnea, bring it with you the day of your procedure.

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 and report concerns to your healthcare providers, if needed. 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 usually a charge for this service, and you'll need to provide transportation. It's OK to use a

taxi or car service, but you must still have a responsible care partner with you.

Agencies in New York

Partners in Care: 888-735-8913

Caring People: 877-227-4649

Agencies in New Jersey

Caring People: 877-227-4649

We recommend you have someone to help at home for the first 24 hours after your procedure.

Complete a Health Care Proxy form

If you haven't already completed a Health Care Proxy form, we recommend you complete one now. If you've already completed one or have any other advance directives, bring them to your next appointment.

A health care proxy is a legal document that identifies the person who will speak for you if you can't communicate for yourself. The person you identify is called your health care agent.

Talk with your healthcare provider if you're interested in completing a health care proxy. You can also read the resources *Advance Care Planning* (www.mskcc.org/pe/advance_care_planning) and *How to Be a Health Care Agent* (www.mskcc.org/pe/health_care_agent) for information about health care proxies, other advance directives, and being a health care agent.

Exercise

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

Follow a healthy diet

Follow a well-balanced, healthy diet before your procedure. If you need help with your diet, talk with your healthcare provider about meeting with a clinical dietitian nutritionist.

Buy your supplies

Buy the bowel preparation kit your healthcare provider told you to use if you haven't already done so.

- Bisacodyl (Dulcolax®) 5mg tablets. These are usually sold as a box of 10 tablets, but you'll only need to take 1 tablet.
- NuLYTELY® solution and flavor packs (cherry, lemon-lime, orange, and pineapple). This comes in a 1-gallon (128 ounces) bottle, but you'll only need to drink ½ gallon (64 ounces). Your healthcare provider will give you a prescription for this.

This is also a good time to stock up on clear liquids to drink the day before your procedure. See the table in the “Follow a clear liquid diet” section for examples of liquids to buy.

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. **Don't stop taking aspirin unless they tell you to.** For more information, read the resource *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. For more information, read the resource *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 surgery. These medications can cause bleeding. For more information, read the resource *Common Medications Containing Aspirin, Other Nonsteroidal Anti-inflammatory Drugs (NSAIDs), or Vitamin E* (www.mskcc.org/pe/common_meds).

1 Day Before Your Procedure

Note the time of your procedure

A staff member from the Admitting Office will call you after 2:00 PM the day before your procedure. If your procedure is scheduled for a Monday, they'll call you on the Friday before.

The staff member will tell you what time to arrive at the hospital for your procedure. They'll also remind you where to go. If you don't get a call by 7:00 PM, call 212-639-5014.

If you have any changes in your health or need to cancel your procedure for any reason, call your radiation oncologist.

Prepare your NuLYTELY bowel preparation solution

On the morning of the day before your procedure, add lukewarm water to the NuLYTELY, **filling it to the top of the line on the bottle**. Add a flavor pack, if you choose. Use only a flavor pack that was provided with your NuLYTELY.

With the cap on, shake the NuLYTELY bottle until the powder is dissolved. The mixture will be clear, even if you used a flavor pack. If you prefer, you can place the bottle in the refrigerator to chill it. Many people have told us that NuLYTELY tastes better cold. Don't mix the NuLYTELY earlier than the morning before your procedure.

Take a bisacodyl tablet

At 1:00 PM on the day before your procedure, swallow 1 bisacodyl tablet with a glass of water.

Follow a clear liquid diet

- You can have solid food for breakfast and lunch. Aim to finish your lunch by 2:00 PM.
- After lunch, start the clear liquid diet.
 - A clear liquid diet includes only liquids you can see through. Examples are listed in the “Clear Liquid Diet” table.
 - Try to drink at least 1 (8-ounce) glass of clear liquid every hour while you’re awake.
 - Drink different types of clear liquids. Don’t just drink water, coffee, and tea.
 - Don’t drink more than 2 cups (16 ounces) of liquids with caffeine.
 - Don’t drink diet liquids, even if you have diabetes. If you do, you may feel weak or dizzy.

Clear Liquid Diet		
	Drink	Do Not Drink
Soups	<ul style="list-style-type: none">• Clear broth, bouillon, or consommé	<ul style="list-style-type: none">• Any products with pieces of dried food or seasoning
Sweets	<ul style="list-style-type: none">• Gelatin (such as Jell-O®)• Flavored ices• Hard candies (such as Life Savers®)	<ul style="list-style-type: none">• All others
Drinks	<ul style="list-style-type: none">• Clear fruit juices (such as lemonade, apple, cranberry, and grape juices)• Soda (such as ginger ale, 7-Up®, Sprite®, and seltzer)• Sports drinks (such as Gatorade®)• Black coffee• Tea• Water	<ul style="list-style-type: none">• Juices with pulp• Nectars• Milk or cream• Alcoholic drinks

Drink the NuLYTELY bowel preparation

At 3:00 PM on the day before your procedure, start drinking the NuLYTELY. Drink 1 (8-ounce) glass of the mixture every 15 minutes. **Drink only half of the NuLYTELY solution (64 ounces). Throw out the other half.** Then, keep drinking clear liquids.

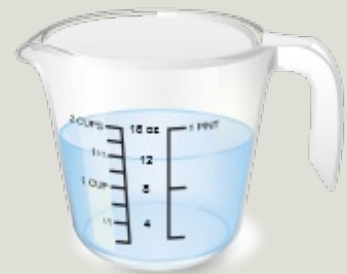
The NuLYTELY will cause frequent bowel movements, so be sure to be near a bathroom when you start drinking it. To help prevent irritation, you can apply petroleum jelly (Vaseline®) or A&D® ointment to the skin around your anus after every bowel movement.

The Night Before Your Procedure

- Take the medications your healthcare provider told you to take the night before your procedure. Take them with a small sip of water.
- Shower using soap and water the night before or the morning of your procedure.

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

Things to remember

- Take the medications your healthcare provider told you to take the morning of your procedure. Take them with a small sip of water.
- Don't put on any lotion, cream, deodorant, powder, 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.

- If you wear contact lenses, wear your glasses instead. If you don't have glasses, bring a case for your contacts.

What to bring

- A pair of loose-fitting pants, such as sweatpants.
- Brief-style underwear that's 1 to 2 sizes larger than you normally wear.
- Sneakers that lace up. You may have some swelling in your feet, and lace-up sneakers can accommodate this swelling.

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's a 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 take place at Memorial Hospital at 1275 York Avenue, between East 67th and East 68th Streets. Take the B elevator to the 6th floor to get to the Presurgical Center.

What to expect

You'll be asked to say and spell your name and date of birth 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 (including prescription and over-the-counter medications, patches, and creams) and the time you took them.

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

During your procedure

When it's time 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. Compression boots will be placed on your lower legs. These gently inflate and deflate to help blood flow in your legs.

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. A urinary (Foley) catheter will also be placed to drain urine from your bladder.

After the Foley catheter is in place, your healthcare provider will use a rectal ultrasound to see your prostate. They'll put 12 to 22 tiny needles into your prostate through your perineum (the area of skin between your scrotum and anus). The needles are guided to the exact locations in and around your prostate through a

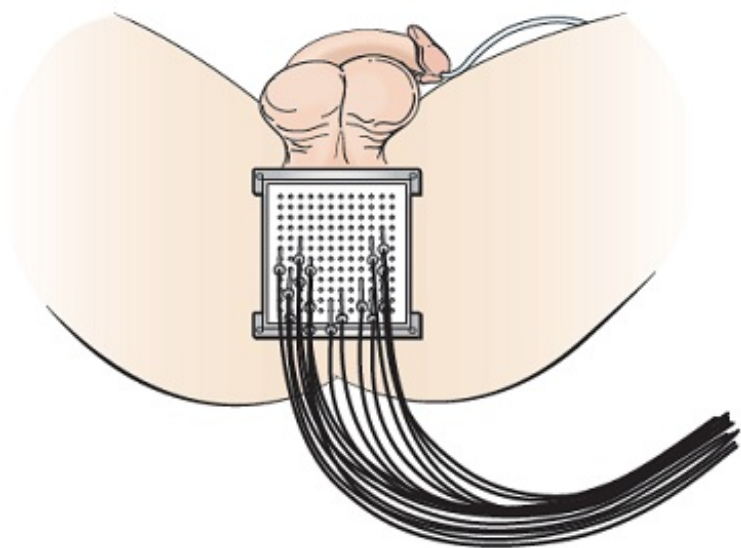


Figure 2. Diagram of template with catheters

square plastic template. The template will be positioned up against your perineum (see Figure 2).

During your treatment

When all the needles are inserted, you'll have a computed tomography (CT) scan or magnetic resonance imaging (MRI) scan to make sure the needles are in the right place. These scans will also help your healthcare provider finish the treatment planning process.

After your treatment plan is confirmed, you'll probably have your first treatment while you're still asleep in the operating room. For your treatment, tubes will be connected to the needles in your prostate to deliver the radiation (see section "Getting your second HDR treatment"). The tubes look like long, plastic straws (see Figure 2). The cables are connected to a machine that stores the radioactive source (Iridium-192).

After the right amount of radiation is delivered to your prostate, the tubes will be disconnected and the treatment will end. If you're getting a second treatment, refer to the section "Getting your second HDR treatment."

The needles will be removed from your prostate after the treatment is finished. Your nurse will apply pressure to your perineum to help with any bleeding. The Foley catheter and breathing tube will be removed.

After Your Procedure

In the hospital

You'll wake up in the Post-Anesthesia Care Unit (PACU). A nurse will be monitoring your body temperature, pulse, blood pressure, and oxygen levels.

In rare cases, you may still have a Foley catheter in your bladder to keep track of how much urine you're making. You may also still have compression boots on your lower legs.

You may have some pain after your procedure. Your healthcare providers will ask you about your pain often. You'll be given medication to treat your pain as needed.

If your pain isn't relieved, please tell one of your healthcare providers.

If you still have needles in place, you must stay in bed. You'll be lying on your back with your legs straight or on a ramp. You can't move your hips or legs, but you can wiggle your toes. You can move your arms and upper body. Once your needles are removed, you'll be allowed to get out of you bed with help.

There isn't anything radioactive in your needles between your treatments.

Getting your second HDR treatment

If you need 2 HDR treatments, the second treatment will be done about 4 to 6 hours after your first treatment. You'll be moved from the PACU to the treatment area in the Department of Radiation Oncology for the treatment. You'll be able to give yourself pain medication by using a patient-controlled analgesia (PCA) device.

For your second treatment, your radiation therapist will attach the needles coming out of your perineum to tubes. Once everything is set, your radiation therapist will leave the room while you get the HDR treatment. The room has a video camera and an intercom so your radiation therapists can see and hear you at all times. The Iridium-192 radiation source will move through the tubes into your needles. You won't see or feel the radiation while it's in your prostate. You may hear a clicking sound from the HDR machine.

Your treatment will take about 10 to 20 minutes.

After your treatment is done, the Iridium-192 radiation source is moved back into the machine. Your radiation therapist will come back and disconnect the cables.

After your last treatment, the template, needles, and Foley catheter will be removed. After your catheter is removed, you'll need to urinate on your own before you can go home. Most people go home on the same day as their procedure and treatment(s).

After your treatment is finished, you aren't radioactive and don't need to follow any radiation precautions.

At home

Medications

- Radiation to the prostate often causes urinary frequency and urgency (feeling that you need to urinate more often or very suddenly). To manage these side effects, keep taking all urinary medications as prescribed, such as tamsulosin (Flomax®), silodosin (Rapaflo®), or alfuzosin (Uroxatral®). Tell your healthcare provider if you don't have these medications at home.
- After your procedure, you may feel burning when you urinate. This is from the Foley catheter that was placed in your bladder. You'll get a prescription for medication to help with the burning called phenazopyridine (Pyridium®).

Other instructions

- Rarely, you may have some bleeding in your perineum where the needles entered. If this happens, apply steady pressure with a clean, dry washcloth or gauze for 5 minutes. If the bleeding becomes heavy or doesn't stop, call your healthcare provider.
- You can resume your regular diet. You may want avoid things that may irritate your bladder. These include caffeine (such as coffee and tea), alcohol, citrus juices, and spicy foods.
- You can shower after you're discharged from the hospital.
- Don't lift anything over 20 pounds (9.1 kilograms) for at least 1 week after your procedure.
- Most people can go back to work 2 days after their procedure. If your job requires heavy lifting, ask your healthcare provider when you can go back to work.

Side Effects

Urinary symptoms

Urinary symptoms are the most common side effects of brachytherapy. After your procedure, you may have some of the following symptoms.

- Some people can't urinate after the procedure or may only be able to urinate a

few drops at a time. **This is an emergency.** Call your healthcare provider right away if you can't urinate.

- You may need to urinate more often than usual, as many as 1 or more times an hour. This usually starts 2 to 4 weeks after your procedure and can last several months or longer.
- You may have some burning during urination. This usually starts 2 to 4 weeks after your procedure and can last for about 4 to 12 months.
- You may notice blood in your urine, which will make it look pink. This is common and usually disappears 3 to 7 days after your procedure. Call your healthcare provider if bleeding continues after 7 days or if you pass blood clots in your urine.
- You may have bruising and or swelling around your scrotum, testicles, and penis. This should go away 1 to 2 weeks after your procedure. Call your healthcare provider if you still have bruising after 2 weeks.

Talk with your healthcare provider if you have any of these symptoms. If you have a procedure to look at your bladder (such as a cystoscopy) planned, wait to have it until after you've talked with your healthcare provider.

Pain

You may have some mild pain for 1 or 2 days after your procedure. You can take an over-the-counter pain medication such as acetaminophen (Tylenol®), ibuprofen (Advil®), or naproxen (Aleve®) to help with pain. If these doesn't help your pain, call your healthcare provider.

Sexual health

You may have concerns about the effects of cancer and your treatment on your sexuality. After your treatment, you aren't radioactive. You can't pass radiation to anyone else, so it's safe to be in close contact with other people.

You can be sexually active after your HDR brachytherapy treatment unless your radiation oncologist gives you other instructions. However, if you're sexually active with a woman who can have children, you must use birth control (contraception) to prevent pregnancy during your entire prostate cancer

treatment. You must keep using birth control for 1 year after your treatment is finished. This is to make sure you don't conceive with sperm that may have been damaged by exposure to radiation, which could possibly result in birth defects.

You may have temporary or permanent numbness in the head of your penis, although this is rare.

You may also develop sexual changes after your treatment. You may have:

- Erectile dysfunction (difficulty or inability to have or maintain an erection).
- A change in the sensation of orgasm.
- A change in the amount or consistency of your ejaculation.

These sexual changes may occur many months or even years after treatment.

There are treatments for erectile dysfunction. MSK has a Male Sexual and Reproductive Medicine Program to help people address the impact of their disease and treatment on their sexual health. You can meet with a specialist before, during, or after your treatment. Your healthcare provider can give you a referral, or you can call 646-888-6024 for an appointment.

An excellent resource that discusses sexual health issues during treatment is the booklet *Sex and the Man With Cancer*. You can get a copy of this booklet from the American Cancer Society by calling 800-227-2345 or by searching for it at www.cancer.org.

Support Services

MSK support services

MSK support services

Admitting Office

212-639-7606

Call if you have questions about your hospital admission, including requesting a private room.

Anesthesia

212-639-6840

Call if you have questions about anesthesia.

Blood Donor Room

212-639-7643

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

Bobst International Center

888-675-7722

MSK welcomes patients from around the world. If you're an international patient, call for help arranging your care.

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 that counseling helps them. We provide counseling for individuals, couples, families, and groups, as well as 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

The food pantry program provides 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

646-888-0800

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.

MSK Library

library.mskcc.org

212-639-7439

You can visit our library website or speak with the library reference staff to find more information about your specific cancer type. You can also visit LibGuides on MSK's library website at libguides.mskcc.org.

Patient and Caregiver Education

www.mskcc.org/pe

Visit the Patient and Caregiver Education website to search our virtual library. There you can find written educational resources, videos, and online programs.

Patient and Caregiver Peer Support Program

212-639-5007

You may find it comforting to speak with someone who has been through a treatment similar to yours. You can talk with a former MSK patient or caregiver through our Patient and Caregiver Peer Support Program. These conversations are confidential. They may take place in person or over the phone.

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 if you have 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 Nursing Office

212-639-6892

You may 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.

Sexual Health Programs

Cancer and cancer treatments can have an impact on your sexual health. MSK's Sexual Health Programs can help you take action and address sexual health issues before, during, or after your treatment.

- Our Female Sexual Medicine and Women's Health Program can help if you're dealing with cancer-related sexual health challenges 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 if you're dealing with cancer-related sexual health challenges such as erectile dysfunction (ED). For more information or to make an appointment, call 646-888-6024.

Social Work

212-639-7020

Social workers help patients, family, and friends deal with issues that are common for cancer patients. They provide individual 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 help 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, MSK has specialists who can help. Call for more information.

Virtual Programs

www.mskcc.org/vp

MSK's Virtual Programs offer online education and support for patients and caregivers, even when you can't come to MSK in person. Through live, interactive sessions, you can learn about your diagnosis, what to expect during treatment, and how to prepare for the various stages of your cancer care. Sessions are confidential, free, and led by expert clinical staff. If you're interested in joining a Virtual Program, visit our website at www.mskcc.org/vp for more information.

For more online information, visit the [Cancer Types](#) section of www.mskcc.org.

External support services

American Cancer Society

www.cancer.org

800-227-2345

Provides information and support to people with cancer and their caregivers.

American Society for Therapeutic Radiology and Oncology

www.rtanswers.org

800-962-7876

Group of radiation oncology professionals that specializes in treating people with radiation therapy. Provides information on treating cancer with radiation and contact information for radiation oncologist in your area.

CancerCare

www.cancercare.org

800-813-HOPE (800-813-4673)

Provides counseling, education, information, referrals, and direct financial assistance to people with cancer and their caregivers.

Cancer Support Community

cancersupportcommunity.org

Provides support and education to people affected by cancer.

National Cancer Institute

www.cancer.gov

800-4-CANCER (800-422-6237)

Provides education and support to people with cancer and their families.

ZERO - The End of Prostate Cancer

www.zerocancer.org

Prostate Cancer Foundation

www.pcf.org

US Too International Prostate Cancer Education and Support Network

www.ustoo.org

When to Call Your Healthcare Provider

Call your healthcare provider if you have:

- New or worsening urinary symptoms
- Difficulty urinating
- Blood clots in your urine
- A fever of 100.4 °F (38 °C) or higher
- Pain that doesn't get better after taking pain medication

If you have any questions or concerns, talk with a member of your radiation therapy team. You can reach them Monday through Friday from 9:00 AM to 5:00 PM at the numbers listed below.

Radiation oncologist: _____

Phone number: _____

Radiation nurse: _____

Phone number: _____

After 5:00 PM, during the weekend, and on holidays, call 212-639-2000 and ask for the radiation oncologist on call.

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

High Dose Rate (HDR) Brachytherapy for the Treatment of Prostate Cancer - Last updated on January 5, 2021

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