# Saint John's Health Center PROVIDENCE Health & Services

# **PROSTATE BIOPSY (ASC)**

## **Location of Procedure:**

Ambulatory Surgery Center (ASC) 2020 Santa Monica Blvd, Suite 140 Parking garage is available off 20<sup>th</sup> St

Phone: 310-582-7033

#### **Patient Name:**

**Date and Time of Procedure:** 

Check-in Arrival Time (30 minutes prior to procedure):

Physician:

**Duration of Procedure:** 

**Approximate Total Time (arrival to discharge):** 

**Office Telephone:** 310-582-7137

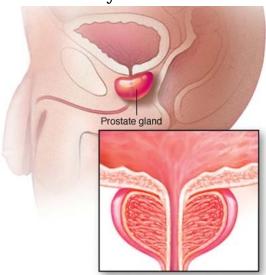
**Office Fax:** 310-582-7140

BE SURE TO ARRANGE FOR A FAMILY OR FRIEND TO DRIVE YOU HOME. IT IS RECOMMENDED THAT SOMEONE STAY WITH YOU FOR THE FIRST 24 HOURS AFTER THE PROCEDURE.

# **GENERAL INFORMATION**

#### **About the Prostate:**

- This procedure is done to remove several samples of the prostate tissue for laboratory analysis to check for prostate cancer.
- The prostate is a walnut-shaped gland located beneath the bladder in men. This produces ejaculate fluid which nourishes and transports sperm.
- The urethra is the channel that starts at the base of the bladder. Urine and ejaculate run through the urethra through the center of the prostate when it exits the body.



# **About the Prostate Biopsy:**

- Your urologist will recommend a prostate biopsy if there have been abnormal results from tests, such as an elevated prostate-specific antigen (PSA), abnormal digital rectal exam (DRE), or abnormal findings of the MRI.
- If a prostate lesion was seen on your MRI, a **fusion biopsy** (also called a "uronav biopsy") will be done. This means that the images from your MRI will be superimposed and "fused" to the real-time ultrasound images of the prostate. Your prostate will be visible to the doctor from the sound waves generated by the ultrasound probe into the rectum. Fusion biopsies are done to improve the likelihood of targeting and

- obtaining samples from the lesion.
- If no lesion was seen on your MRI, then a **transrectal ultrasound biopsy of the prostate** (TRUSP) is done to fully sample the prostate.
- Both fusion/uronav biopsies and TRUSPs use a needle inserted through a channel along the probe to collect tissue samples. It is necessary to sample several areas of the prostate (both right and left sides, and upper, middle, and lower sections of the prostate gland) in order to not miss a potential area of cancer.
- Tissue samples from the prostate biopsy are then examined under a
  microscope by the pathologist to check for cellular abnormalities. If
  abnormal cancer cells are found, the pathologist will grade the cells by
  appearance (called a Gleason Score) to determine the aggressiveness of
  the cancer and its likelihood of progression. The Gleason scoring
  system helps to determine your best treatment options.

## **Possible Symptoms:**

- <u>Bleeding at the biopsy site:</u> Rectal bleeding is common after a prostate biopsy.
- <u>Blood in your semen:</u> It is common to notice red or rust coloring in your semen after a prostate biopsy. This is not a cause for concern. Blood in your semen may persist for a few weeks after the biopsy.
- <u>Blood in your urine:</u> This bleeding is usually minor.
- <u>Difficulty urinating:</u> In some men, prostate biopsies can cause difficulty urinating after the procedure. Rarely, a temporary urinary catheter must be inserted.
- <u>Infection:</u> Rarely, men who have a prostate biopsy develop an infection of the urinary tract or the prostate which requires antibiotic treatment.

# PRIOR TO YOUR PROCEDURE

# **Pre-Operative Testing:**

• Pre-op clearance is needed to ensure safety for having surgical anesthesia.

- You will need to make an appointment with your primary care
  physician (PCP) at least 1 week prior to your procedure. Orders will be
  sent to PCP for your necessary labs and electrocardiogram (EKG) if you
  are older than 60-years-old <u>OR</u> have a heart condition.
- Alternatively, your surgeon may order your labs and EKG to be done at the clinic visit prior to your procedure.
- If you have certain heart conditions, you MUST discuss it with your surgeon. You may need to make appointment with your cardiologist for a cardiac clearance to ensure that your heart is healthy enough for surgery.
- All pre-operative testing must be completed with your results sent to us at least 1 day prior to your scheduled procedure.

#### **Illness:**

• If you develop a fever, signs of a cold, or any other illnesses within a few days of your procedure date, notify our office at (310) 582-7137. We likely will need to reschedule your procedure.

## 1 Week Prior:

# **Blood Thinner Medications to Stop:**

- Blood thinner medications can contribute to serious bleeding during or after your procedure. These common blood thinners should be evaluated by your managing physician, cardiologist, or PCP before your procedure to ensure the safety of stopping these medications:
  - o Coumadin (Warfarin)
  - o Plavix (Clopidogrel)
  - o Eliquis (Apixaban)
  - o Xarelto (Rivaroxaban)
  - o Brilinta (Ticagrelor)
  - o Effient (Prasugrel)
  - Ticlid (Ticlopidine)
  - There are other less common blood thinners that should be stopped as well. If you are currently on a blood thinner, please let your physician know.

# Over-the-Counter Medications or Supplements to Stop:

- Stop taking these common over-the-counter medications and supplements 2-3 days before your procedure (unless otherwise specified) as these may contribute to bleeding:
  - o Aspirin
    - Check cold medication ingredients to make sure that it does not contain aspirin
  - o All NSAIDS (e.g. Advil, Ibuprofen, Motrin, Naproxen)
  - Glucosamine
  - Chondroitin
  - o Vitamin E
  - Herbal supplements that can cause
- It is okay to use Tylenol (normal or extra-strength) or previously prescribed narcotics with Tylenol (i.e. Percocet, Vicodin) for pain control days prior to your procedure, if necessary.

If you are unsure of which medications to stop, call 310-582-7137. DO NOT STOP TAKING ANY PRESCRIBED MEDICATIONS WITHOUT CHECKING WITH THE ORDERING PHYSICIAN!

# 1 Day Prior:

#### **Food and Drink:**

- DO NOT EAT, DRINK OR CHEW ANYTHING FOR **8 HOURS PRIOR** TO YOUR PROCEDURE. This includes water, juice, coffee, chewing gum, breath mints, and lozenges.
- Do not drink alcoholic beverages, smoke, or take unauthorized drugs for **48 hours prior** to your procedure.

## **Fleets Enema:**

- You will need 2 bottles.
- This is a non-prescription, over-the-counter product found in pharmacy section.
- This is necessary to cleanse and clear the rectum of stool to better visualize the prostate area and to prevent infection from stool contamination.
- Follow the package directions:



- Insert the lubricated stem of the bottle and insert into the rectum. Squeeze the solution into your rectum and remove the bottle.
- Hold the liquid enema solution in rectum for 5-10 minutes.
   This allows time for the enema to contact and stimulate the rectum. Release into the toilet after.
- You may continue to have bowel movements up to 2 hours after taking the enema.
- Take the **first enema** the **night before** your biopsy (~6 pm). Stop eating after the enema. Drinking fluids is okay.
- Take the **second enema** the **morning of** your biopsy (2-3 hours before you arrive).

# **Day of Procedure:**

#### **Before Arrival:**

- Wear comfortable, loose-fitting clothes.
- You MUST bring your insurance card.
- Avoid bringing valuables, or leave them with family members.
- Optional: bring any advanced directives, healthcare power of attorney, or guardianship papers if you have them.

# **Pre-Procedure Cleansing and Skin Care Instructions:**

- Take a shower the morning of your procedure with antibacterial soap (such as Dial). It is especially important to cleanse the procedure area to prevent infection.
- After your shower, do not apply lotions, powders, make-up, lipstick, or any other cosmetic product to the skin.
- It is okay to brush your teeth and rinse. Do not swallow the water.
- Remove dark nail polish and acrylic nails on at least 2 nails (one on each hand). This is needed to assess nail bed color and monitor oxygen saturation.

#### Medication DO's and DON'T's:

• DO check with your prescribing physician if you take **insulin** for dosing instructions.

- DO NOT take **oral diabetic medication** the morning of your procedure. Taking it could result in low blood sugar, since you will not be allowed to drink or eat anything that morning.
- DO take **blood pressure** and/or **thyroid medication**. If you usually take a morning dose, then <u>take as usual</u> the morning of procedure with a small sip of water.
- DO bring your current, up-to-date list of medications with you for your anesthesiologist to review.
- DO bring inhalers if you use any.

#### On Arrival:

- Proceed to the surgery location and check in at the information desk to be escorted to the pre-op area. You will meet your anesthesiologist to review your medications and discuss your anesthetic plan.
- Family members/friends may stay with you until you are taken to the operating room.

# **AFTER YOUR PROCEDURE**

# **Recovery and Discharge:**

- Family members/friends waiting for you will be notified when your procedure is complete. If you desire, the doctor can discuss findings with your family members/friends.
- After your procedure, you will go to recovery to awaken from anesthesia. This usually takes **1 hour, occasionally 2 hours**. When you have sufficiently recovered from anesthesia, you will be discharged to home.
- Discharge instructions will be provided to you at that time. Be sure to ask any post-operative questions you have.
- YOU MUST HAVE A FAMILY MEMBER/FRIEND DRIVE YOU HOME AFTER YOUR DISCHARGE. Uber or taxi is NOT acceptable. It is recommended that someone stay with you at home for the **first 24** hours.

• When you arrive home, please rest and relax. Let your family members/friends wait on you. It is recommended that someone stay with you for the first 24 hours. Your body will tell you if you are doing too much. Please listen to your body.

#### **First 24 Hours:**

- Do not drive a car or operate heavy machinery for 24 hours after anesthesia or if you are taking any narcotic pain medication.
- Do not consume alcohol, tranquilizers, sleeping medication, or any non-prescription for 24 hours after anesthesia or if you are taking any narcotic pain medication. This can result in extreme somnolence (sleepiness).
- Do not make important decisions or sign important papers during this time.

### **Diet:**

 Begin with clear liquids to allow your stomach and digestive tract to adjust. Avoid heavy meals right after the procedure. Depending on how you feel, you may resume your normal diet. Drink plenty of water.
 Manage constipation with stool softeners (e.g. Miralax, prune juice) for a few days until your bowel activity returns to normal.

# **Common Symptoms:**

- Slight rectal soreness or bleeding for a few days
- <u>Burning with urination</u> for the first 24-72 hours
- Frequent urination for the first 24-48 hours
- <u>Blood in the urine</u> may last from 12 hours to 4 weeks
- Bloody streaks in the stool may last for up to 5-7 days
- <u>Blood in the semen</u> may persist for up to 6 weeks

### Aftercare:

- Drink plenty of fluids to prevent blood clots and infection in the bladder.
- If you are unable to urinate, notify your physician immediately.
- Avoid strenuous exercise such as jogging, lifting, golfing, and bike

- riding for at least 7 days.
- Take your antibiotics as directed. It is important to complete the full dose prescribed.
- Avoid sexual activity for 7 days.
- Resume blood thinners as directed by your physician. If there are blood clots in the urine, stop all aspirins and blood thinners immediately.

## WHEN TO CONTACT YOUR DOCTOR

# Call your doctor or nurse if you experience:

- Persistent urinary frequency or burning beyond 2-3 days
- Pain is not improving or is getting worse
- Fever of 100.4°F or greater call your doctor immediately
- Urine that is dark red or has blood clots in it
- Rectal bleeding with clots
- Prolonged bleeding lasting longer than 7 days

Call our physician team at (310) 582-7137. The office is open from Mon-Fri, 8am-5pm.

IF IT IS AN EMERGENCY, GO IMMEDIATELY TO THE EMERGENCY ROOM.