

Saint John's Health Center



PROSTATE BIOPSY (CLINIC)

Location of Procedure:

Saint John's Health Center
Cancer Clinic (Garden Level)
2121 Santa Monica Blvd
Valet parking available
Hospital Phone: 310-829-5511

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):

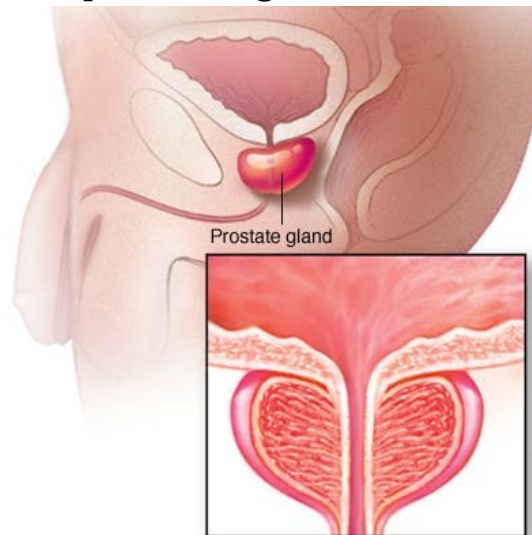
Office Telephone: 310-582-7137

Office Fax: 310-582-7140

GENERAL INFORMATION

Prostate and urinary Anatomy:

- The prostate is a walnut-shaped gland located beneath the bladder. It is close to the rectum and can be felt through the rectum.
- The prostate surrounds the urethra, and is found only in men.
- The prostate produces ejaculate fluid which nourishes and transports sperm.
- The urethra is the channel that starts at the base of the bladder, passes through the prostate and the length of the penis.
- Urine and ejaculate pass through the urethra to exit the body.



Overview of the Prostate Biopsy:

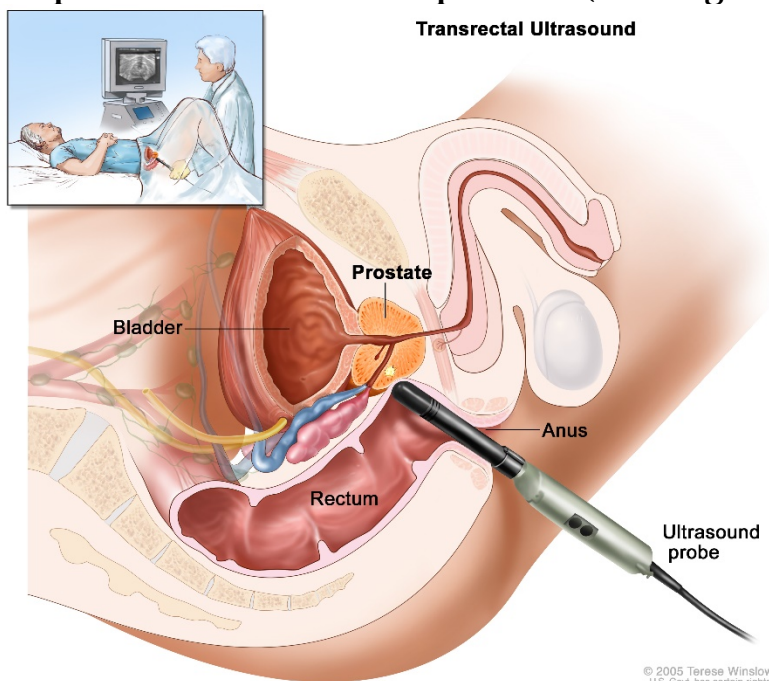
- A Prostate Biopsy is done through the rectum. No incision needed.
- Plan for 2 hrs at your appointment. The biopsy takes ~ 1 hr.
- The rectum needs to be cleared of stool ahead of time to improve visibility and prevent infection from stool (see enema).
- Small pieces of prostate tissue are removed and collected for laboratory analysis to check for prostate cancer.

PROSTATE BIOPSY (CLINIC)

- Prostate biopsy is recommended if there are abnormal results from tests, such as elevated prostate-specific antigen (PSA), abnormal digital rectal exam (DRE), or abnormal findings of the prostate 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 is visible 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 particular lesion.

- If no lesion was seen on your MRI, then a **transrectal ultrasound biopsy of the prostate** (TRUSP). TRUSP is done similarly to fully sample the prostate. You will not notice any difference of these biopsies.
- Both Fusion and TRUSP biopsies 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.

PRIOR TO YOUR PROCEDURE

7 Days Prior:

- **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 primary care physician before your procedure to ensure the safety of stopping these medications:
 - Coumadin (Warfarin)
 - Plavix (Clopidogrel)
 - Eliquis (Apixaban)
 - Xarelto (Rivaroxaban)
 - Brilinta (Ticagrelor)
 - Effient (Prasugrel)
 - Ticlid (Ticlopidine)
- Stop taking these common **over-the-counter medications and supplements** before your procedure (unless otherwise specified), as these may contribute to bleeding:
 - Aspirin
 - Check cold medication ingredients to make sure that it does not contain aspirin
 - All NSAIDS (e.g. Advil, Ibuprofen, Motrin, Naproxen)
 - Glucosamine
 - Chondroitin
 - Vitamin E
 - Some herbal supplements can contribute to bleeding such as Ginkgo, Kava, Fish Oil
- 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.

1 Day Prior:

- Levaquin (antibiotic):
 - You will receive a prescription for Levaquin 500MG to take 1 daily for 3 days:
 - Take the **first** tablet the **day before** the biopsy.
 - Take the **second** tablet the **morning of** the biopsy.
 - Take the **last** tablet the **day after** the biopsy.
- Fleets enema:
 - You will need 2 bottles.
 - Fleets enema is a non-prescription, over-the-counter product found in pharmacy section.
 - It 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 stool and liquid 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:

- It is okay to have a light breakfast.
- Please arrive 30 minutes before your scheduled biopsy time.

DURING YOUR PROCEDURE

What to Expect:

- The prostate can be felt and accessed through the rectum during a prostate biopsy.
- You will be fully awake and positioned on your side. You will be covered and draped.
- You will receive an antibiotic injection before starting.
- The assistant will cleanse the rectum with a betadine solution.
- Topical Lidocaine numbing gel will be inserted into the rectum.
- The doctor will give you an additional lidocaine injection for numbing.



AFTER YOUR PROCEDURE

Possible Post Biopsy Symptoms:

After a prostate biopsy, it is normal to experience the following symptoms:

- Slight rectal soreness or bleeding for a few days
- Bleeding at the biopsy site: Rectal bleeding is common after a prostate biopsy.
- Blood in the urine may last from 12 hours to 4 weeks, usually minor
- Burning with urination for the first 24-72 hours
- Frequent urination for the first 24-48 hours
- Bloody streaks in the stool may last for up to 5-7 days Blood in the semen may persist for up to 6 weeks, red or rust color in semen,

normal and not concerning

- **Difficulty urinating:** In some men, prostate biopsies can cause difficulty urinating after the procedure. Rarely, a temporary urinary catheter must be inserted.
- **Infection:** Rarely, men who have a prostate biopsy develop an infection of the urinary tract or the prostate which requires antibiotic treatment.

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.
- Finish your antibiotics as directed.
- 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 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 TO THE EMERGENCY ROOM.