

# Prostate Ultrasound and Biopsy



**Wisconsin Institute of Urology**  
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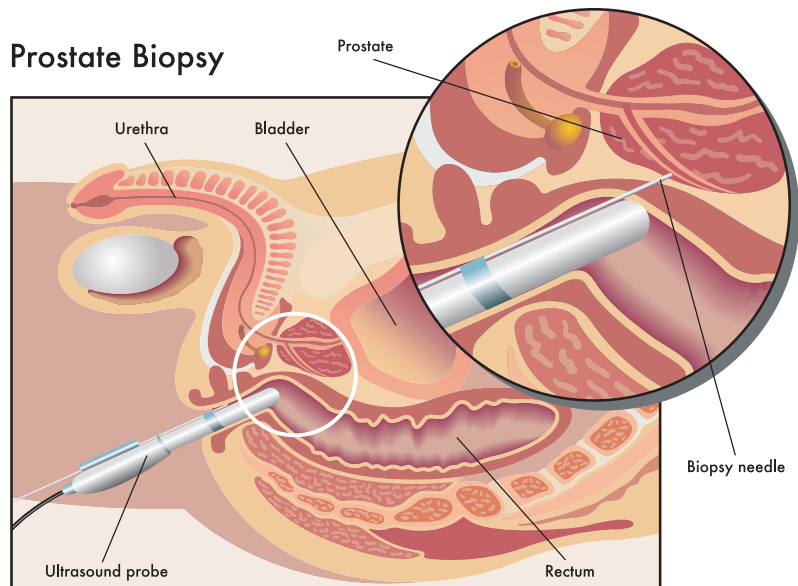
## What is a Prostate Ultrasound and Biopsy

Your doctor has recommended that you have a prostate ultrasound and biopsy. This is most likely due to an abnormal digital rectal exam (DRE, or “prostate exam”) or an elevated PSA (prostate specific antigen). These tests are done to determine if there are any abnormal cells in your prostate. Abnormal cells can be a result of many things from prostate inflammation, BPH (Benign Prostatic Hypertrophy) or to prostate cancer.

Using high-frequency sound waves, the ultrasound machine creates an image of your prostate (a transrectal ultrasound picture, or TRUS) that the doctor uses to help guide them as they perform your biopsy.

Several small samples of your prostate tissue will be taken during the procedure. The samples will then sent to the lab for examination. Risks of the procedure include, but are not limited to; infection, bleeding, and urinary retention.

The prostate gland is part of the male reproductive system. Cancer cells may form a lump called a tumor. Often, the tumor forms in the outer area of the prostate, near the rectum. This area can be felt during a digital rectal exam (DRE) and accounts for 70% - 75% of prostate cancers. Prostate cancer usually causes no symptoms and is most often a very slow growing cancer.



## Managing your medications prior to your procedure

**Starting 7 days prior to your procedure STOP taking the following blood thinning medications/supplements:**

- **Aspirin**, also known as **Bufferin, Anacin, Ecotrin, Excedrin**.
- Non-steroidal anti-inflammatory medications used for pain/arthritis. These include **Advil, Motrin, Ibuprofen, Aleve, Nuprin, Naprosyn, Indocin, Naproxen, Feldene, Clinoril, Voltaren, Relafen, and Meloxicam etc.**
  - However, you **may take** Tylenol/acetaminophen for headaches, pain, etc.
- **All vitamins, supplements, and herbal supplements.**
- **Blood thinning medication.** This list is not all-inclusive, **if you are not sure if a medication is a blood thinner, please call.**
  - **Eliquis, Xarelto, Pradaxa and Pletal**, must hold **2 days prior**.
  - **Warfarin, Heparin and Trental**, must hold **5 days prior**.
  - **Plavix**, must hold **7 days prior**.

## Preparing for Your Procedure

- Please arrive for your procedure at the time stated in your after visit summary. You will receive a call one week prior to your procedure to go over your medications and confirm your arrival time. Please take medications as advised by your nurse during your pre-procedure call.
- Please purchase a Fleets enema at any pharmacy. Use the purchased enema the night prior if your biopsy is scheduled before noon. It is best if this is done roughly 1-2 hours before going to bed. Use the enema in the morning if your biopsy is scheduled for the afternoon. **DO NOT USE MINERAL OIL AND/OR LAXATIVES.**
- We encourage you to eat a normal diet prior to your biopsy.

## What to expect during your procedure

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- You will be lying on the bed, undressed from the waist down. The nurse will help get you in the proper position.
- The doctor will feel your prostate with their finger and then they will insert the ultrasound probe into your rectum. The ultrasound probe is approximately the size of your thumb.
- The doctor will then take several measurements of your prostate.
- Next, using the ultrasound images as a guide, your doctor will insert a small needle through the probe and into the prostate. This will be used to provide local anesthetic to the prostate. Once they have finished, they will use the ultrasound images to guide them as they take several small samples of your prostate tissue.
- The needle and probe are then removed. The tissue samples are sent to the lab for examination. Once the doctor feels you are ready, you will be able to drive yourself home.

## What to expect after your procedure

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After your procedure, you may notice a small amount of blood in your urine or stool for up to 7 days and in your semen for up to 1 month. This is normal. You will also need to refrain from excessive exercise for a few days, until the bleeding in your urine and stool subsides. You will also need to avoid aspirin, ibuprofen, and other blood thinners for at least 2 more days, or until the bleeding in your urine and stool subsides.

**You should call our office at 920-886-8979, if you experience any of the following:**

- Excessive chills or a fever of 100.4 degrees F or higher
- Bleeding more than just a small amount, or for a time longer than specified above
- Problems urinating
- Pain you cannot control with over-the-counter pain medications.
- Muscle aches or excessive tiredness

Please call our triage nurses if you have not heard from our office in over seven days for your pathology results. Follow-up will be determined based on your results.

# Preparing for Your Procedure

## Medical History

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You will be asked questions regarding your medical history, medications, and any specific needs that you may have for your upcoming appointment during your consult or pre-procedure phone call. Complete responses are part of the planning in providing a safe procedure. All answers are kept confidential. We may ask you the following:

- Are you taking any medications? This includes over-the-counter products, such as aspirin, ibuprofen, vitamins, herbal supplements, or illicit drugs.
- Do you have allergies?
- Have you had any other surgeries?
- Do you have a fever, cold or rash?
- Do you have an Advance Directive?



## Planning for Your Procedure

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To help your surgery go as planned, take these simple steps ahead of time.

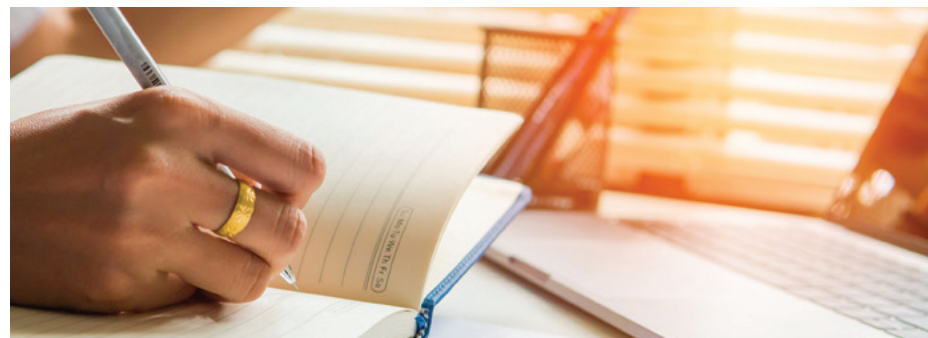
- Ask your family doctor about taking your usual medications for diabetes, blood pressure, heart, breathing problems, and blood thinning (Coumadin, aspirin, Plavix, anti-inflammatory medications, etc.). The dosage may need to be adjusted for your procedure.
- Call your insurance company and notify them of your scheduled procedure. Verify your coverage and check for any pre-certification requirements to avoid penalties or a benefit reduction.
- Call your WIU doctor if you get a fever, cold or rash. Your procedure may need to be postponed.
- It is advised not to bring minors with you to your procedure appointment.
- If your procedure is being completed at the Wisconsin Institute of Surgical Excellence, you will be contacted by the center pre-admission screening department within 2-7 business days prior to your scheduled procedure.

## The Day of Your Procedure

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### Preparing at home

- You may eat and drink as normal. If you are having minimal sedation for your procedure, it is best to eat a light meal two hours prior to your procedure.
- Do not shave the procedural site.
- Wear loose, comfortable clothing.
- Leave all valuables at home.
- Take medications per the instructions provided during your consultation or your pre-admission phone call.



### What to bring

Bring the following items with you to the medical center:

- Insurance cards, photo ID/driver license
- A list of your medications, including name, dose and how often you take each medication.
- Money for co-payments, if your required by your insurance provider
- A copy of your Advance Directive, if you have one.
- Walker, crutches, or any personal assistive devices that you may require.



## Checking in

Arrive at the medical center a few minutes before your assigned arrival time.

### At registration, you will be asked to:

- Verify your contact information.
- Present your photo ID and insurance card.
- Make a co-payment, if required by your insurance provider.
- Sign a release of information and financial policy form. These forms allow the medical center to bill your insurance provider for your procedure.

### After registration, you will be escorted to your individual procedure room, where you will be prepared for your procedure. We will complete the following:

- Check your blood pressure, pulse, and temperature.
- If ordered, administer medications. This could include oral pills, muscular injection (shot) or intravenous (IV) medications.
- Have you sign your procedural consent.

If you have brought family or a friend with you to the medical center, they will remain in the lobby while your procedure is completed.

## The Procedure Room

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The procedure room provides a safe and clean environment to have your procedure.

Your team members will include your doctor, a nurse, and depending upon your location and procedure may include a radiology technologist, and a surgical technologist. This team constantly monitors your progress and well-being throughout your procedure.

## Post-Procedure Care

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After your procedure, you may be taken to a recovery room, or you may stay in your procedure room. The nurse will monitor your vital signs and assess any nausea or discomfort.

You will be asked to rate your pain on a scale of zero to 10. Using a pain scale can help to communicate your personal level of pain.

### Following these medications tips to help control your pain following surgery:

- Take your medications as ordered.
- Tell your nurse or doctor if the pain does not improve.
- Know that medications will reduce, but not take away all your pain.

# Going Home

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Before you go home, you will be given discharge instructions.

**The following topics will be reviewed with you prior to being discharged home and included in your written discharge instructions.**

- Bathing and showering, if applicable
- Diet-what to eat, what to avoid.
- Incisional care, if applicable
- Medications-dosages and when to take them, if applicable
- Icing the procedural area, if applicable
- Pain control-what to expect, what to do.
- Physical activity, if applicable
- Returning to work, if applicable
- Signs of infections and what to do.

If a follow-up is required, this will be scheduled with your provider or their care team. Bring a list of your questions or concerns to this visit.



## Call your physician

**It is important to notify your WIU doctor if you have uncontrolled pain, severe nausea, heavy bleeding, inability to urinate, or signs of an infection. Call if you feel any of the following:**

- You have a fever over 100.4 degrees Fahrenheit or higher.
- You notice excessive chills, increased redness, localized tenderness or swelling around your wound/incision, if applicable
- You notice red streaks in the skin leading away from the wound/incision, if applicable
- You notice drainage from the skin/excision that completely saturates the surgical dressing in the first 24-48 hours post-op, if applicable.
- You notice moderate or severe swelling under the skin excision, if applicable
- You develop severe or escalating pain at your surgical site not improved with over the counter medications such as Tylenol or while taking prescribed pain medications.
- You develop difficulty emptying your bladder.



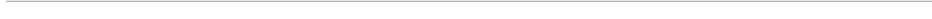
## Patient responsibility

We advise you to contact your insurance company and notify them of your planned procedure/surgery. Please ensure you also discuss with your insurance company any out-of-pocket costs. Any non-covered charges are the responsibility of the patient/guardian.

For those individuals without insurance (self-pay), arrangements regarding financial responsibility should be made with each medical facility and/or specialist.



# Notes







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