

For more information please visit us online at: <http://www.osmh.on.ca/diagnostics/>

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### PROSTATE BIOPSY

#### What is it?

A prostate biopsy is a random sampling of the prostate tissue. Guided by ultrasound, the radiologist uses imaging guidance and a needle to remove tissue from the prostate in order to examine it for disease. The ultrasound probe used in prostate biopsies is about the size of a finger. Once the probe is placed in the rectum, the biopsy is performed with a spring-driven needle core biopsy device. These cells will then be examined under a microscope in the pathology department. Results may take 7-10 days for analysis.

#### Why do I need it?

Your doctor or healthcare provider may order a biopsy in order to<sup>1</sup>:

- differentiate cancer from benign prostatic hyperplasia or nodular enlargement of the prostate.
- elevated levels of PSA (prostate-specific antigen) in bloodwork is sometimes associated with cancer and needs to be ruled out.



### HOW IS THE PROCEDURE PERFORMED?

#### Before

##### Patient Preparation:

You should wear loose-fitting clothing that is easy to change out of. You may want to arrange for someone to drive you home after the procedure. One support person (spouse, friend, caregiver, family member) may accompany you on the day of your appointment, and wait outside of the procedure room.

Please bring a list of the medications you are currently taking and a list of any drug/medication allergies you may have.

You can eat and drink normally before the procedure. You may take your usual medications prior to the procedure. See next page if you take blood thinners.

You will be advised to take antibiotics in preparation for this procedure. Please follow the instructions given by your doctor to help prevent infection and remember to take the antibiotics as prescribed.

You may have to perform an enema at home the day of the procedure to clean out your bowels and clear the rectum of feces so that the prostate may be seen more clearly with the ultrasound and to lower the risk of infection.

Please phone the Diagnostic Imaging booking line at **705-325-2201 ext. 3505** for cancellations or rebooking if you are unable to attend your appointment.

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## Bloodwork<sup>3</sup>

Bloodwork is required and must be done within **2 weeks** of your appointment (within 72 hours for inpatients). Your doctor may order:

- INR (must be  $\leq 1.8$ )
- PTT
- CBC (platelets must be  $\geq 50 \times 10^9/L$  or greater)

If you take **Warfarin (Coumadin)**, you'll need a new INR drawn the **day before** your procedure.

**Important:** Missing bloodwork may cause delays or your procedure to be rescheduled.

## Blood Thinners / Anticoagulants / Antiplatelets Medications<sup>3</sup>

Stop the listed medications as per the below schedule before your procedure unless instructed otherwise. If unsure, then consult your doctor or healthcare provider about which medications to pause, for how long, when to restart them, and any concerns you may have.

Medications	When to Stop	Restart After
Acova ( <b>Argatroban</b> )	2-4 hours	4-6 h
Aggrenox ( <b>ASA/dipyridamole</b> )***	3-5 days	Next day
Angiomax ( <b>Bivalirudin</b> )	2 hours	4 h
Arixtra ( <b>Fondaparinux</b> )	2 days (3 days if eGFR is $<50$ )	24 h
ASA ( <b>Aspirin</b> )	Do not stop	N/A
Brilinta ( <b>Ticagrelor</b> )***	5 days	Next day
Coumadin ( <b>Warfarin</b> )/**	5 days (recheck INR)	Same day (evening)
Effient ( <b>Prasugrel</b> )***	7 days	Next day
Eliquis ( <b>Apixaban</b> )**	2 days (3 days if eGFR is $<50$ )	Second day
IV Heparin (unfractionated)**	4 hours (check PTT)	6 h
LMWH (prophylactic): enoxaparin ( <b>Lovenox</b> ), dalteparin ( <b>Fragmin</b> )**	12 hours	Next day
LMWH (therapeutic): enoxaparin ( <b>Lovenox</b> ), dalteparin ( <b>Fragmin</b> )**	24 hours	Next day
Plavix ( <b>Clopidogrel</b> )***	5 days	6 h (if 75 mg) 24 h (if 300 mg)
Pradaxa ( <b>Dabigatran</b> )**	2 days (3 days if eGFR is $<50$ )	Next day
Savaysa ( <b>Edoxaban</b> )	2 days	Next day
Subcutaneous Heparin (unfractionated)**	8 hours (check PTT)	Same day (evening)
Xarelto ( <b>Rivaroxaban</b> )**	2 days (3 days if eGFR is $<30$ )	Next day
* Consider bridging with heparin (need admission) for high thrombosis risk cases ** Consider using reversal agent if emergent or STAT *** Consider continuation for arterial procedures including mesenteric, renal, subclavian, and infra-inguinal angioplasty/stent		

## Important Notes

- Patients on Warfarin (**Coumadin®**) need an INR test the **day before** the procedure.
- Those with **prosthetic valves**, **prior clots**, or **stroke-related atrial fibrillation** may need bridging therapy to prevent thrombosis.
- **Do not** stop blood thinners if you have **coronary or brain stents**—consult your doctor first.
- If anticoagulation is stopped, your doctor must provide instructions.
- Applies only to elective procedures, not emergencies.

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### Coming to The Hospital

You must first sign-in with **Centralized Patient Scheduling & Registration (CPSR)**, which is located immediately to your left when you enter the hospital from the main entrance (across from the gift shop). You will receive a patient wristband and be directed to the **Diagnostic Imaging department** for your scheduled appointment time.

**Please bring to the hospital your OHIP card and a list of current medications you are taking.**

### During

Biopsies are done in the Ultrasound Department of Diagnostic Imaging.

**The duration of your appointment time will be 1-1.5hrs**

1. You will change from below the waist into a hospital gown.
2. A Sonographer will explain the procedure and answer any questions you have.
3. You will lay on a stretcher on your left side with your knees bent.
4. You will be awake for the procedure. The process takes about 20 minutes.
5. The ultrasound probe is inserted into the rectum. You may feel pressure/discomfort.
6. A radiologist will inject a numbing agent, called Lidocaine, into the tissue. This freezes the area of the biopsy. This should be the only pain or discomfort during the procedure.
7. The radiologist will use ultrasound to guide the biopsy needle and take at least 12 samples. Additional samples may be taken if necessary.

**Notes / Questions** *(write down any notes or questions you may have for your doctor, healthcare practitioner, or the care team in Diagnostic Imaging on the day of your appointment. You can also use this space to write down a list of your current medications):*


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### WHAT TO EXPECT AFTER



#### Recovery & Going Home

You may have some pain at the biopsy site. You may have a small amount of bleeding from the procedure site or with urination or with bowel movements. Drink plenty of water



#### Diet & Activity

- Spend the remainder of the day resting.
- Resume a normal diet. If your stomach is upset, try bland, low-fat foods, for example: plain rice, broiled chicken, toast, and yogurt.
- Drink plenty of fluids to avoid becoming dehydrated.
- Resume normal activities as you feel able to tolerate them, unless otherwise directed by your doctor or the radiologist performing the biopsy.



#### Medication<sup>2</sup>

- **If your doctor or healthcare provider advised you to stop any medications for this procedure then consult with them first about the safety of when you can start your medications again;**
- Otherwise, resume your normal medication schedule.
- If you **normally** take acetylsalicylic acid (Aspirin™) or another blood thinner medication, ask your doctor when to start taking it again. Make sure that you understand exactly what your doctor wants you to do;
- Otherwise, **do not** take (Aspirin™) or anti-inflammatory medicines (such as ibuprofen) for one **week** after the biopsy.

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### WHEN TO SEEK HELP<sup>1</sup>



#### Call 911:

If you believe you require emergency care – **call 911**. Reasons to call 911 include:

- You have passed out (lose consciousness), or become very dizzy, weak, or less alert
- You experience sudden chest pain and shortness of breath; and/or
- You have severe trouble breathing
- Significant bleeding from the biopsy site (i.e. bright red blood that won't stop)<sup>1</sup>
- You have a fast or uneven pulse



#### Call your doctor, healthcare provider, or Health Connect Ontario immediately if you experience<sup>1</sup>:

- Increased pain, swelling, warmth, or redness at the biopsy site
- Redness or warmth around the biopsy site or pus or blood draining from the biopsy site
- A fever (more than 100°F / 38°C)
- Chills, with or without fever
- Bright red blood has soaked through the bandage / dressing over the biopsy site.
- You have new or worse pain at the biopsy site.
- A fast or skipping heartbeat.
- Bruising or swelling at the biopsy site that is getting bigger.
- An upset stomach and you can't keep fluids down (you're throwing them up).
- Any other concerns.

Health Connect Ontario may be reached 24-hours a day, including weekends, by:

- Calling 811
- Calling 1-866-797-0007 (TTY – teletypewriter service)
- Visiting <https://healthconnectontario.health.gov.on.ca/> and selecting “Chat with us”

**BRING THIS INFORMATION PACKAGE WITH YOU SHOULD YOU URGENTLY NEED TO SEE YOUR DOCTOR OR GO TO THE EMERGENCY DEPARTMENT OF YOUR NEAREST HOSPITAL.**

*Use this material for your information only. It does not replace advice from your doctor or other health care professionals. Do not use this information for diagnosis or treatment. Consult with your health care provider about a specific medical condition.*

#### References:

1. General Biopsy. RadiologyInfo.org For Patients. Accessed June 27, 2023. <https://www.radiologyinfo.org/en/info/biopgen>
2. Needle Biopsy of the Liver. Accessed June 27, 2023. MyHealth.Alberta.ca Network. <https://myhealth.alberta.ca/health/Pages/conditions.aspx?hwid=hw232128>

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