PSA Clinic
(Trans-Rectal Ultrasound and Biopsy of the Prostate)
Information for patients, relatives and carers

General Surgery and Urology
The York Hospital, Wigginton Road, York, YO31 8HE

For more information, please contact:
Sarah Hillery
Urology Nurse Practitioner
Tel: 01904 726978
(Monday, Tuesday and Wednesday 8.00am to 2.00pm)

Caring with pride
This leaflet gives information about Trans-Rectal Ultrasound and Biopsy of the Prostate.

Routinely, patients are invited for an MRI scan before they have a prostate biopsy. You will not receive the results of the MRI until you come for your follow up appointment. The results of MRI and biopsy will then be given to you at the same time along with a plan of care if the results are positive.
Why has this procedure been suggested to me?

Your Urologist has asked for this procedure to get further information about the prostate gland, which lies beneath the bladder and directly in front of the rectum. This procedure is usually done for raised PSA blood test (Prostate Specific Antigen) or a lump in the prostate. Sometimes we find prostate cancer when these symptoms are investigated but they can also occur when no cancer is present. To investigate the symptoms, samples of tissue are taken and sent to the laboratory for analysis.

At the appointment you will firstly meet with the Urology Nurse for an assessment. Although in most cases the biopsy procedure will be carried out on the same day, it is sometimes necessary for the procedure to be carried out at another appointment.
It is important that you telephone us as soon as possible **before** your procedure if you have any of the following:

- An artificial heart valve
- A coronary artery stent
- A pacemaker or defibrillator
- A regular prescription for Warfarin, Clopidogrel, Rivaroxaban, Apixaban or Dabigatran
- A regular prescription for Aspirin if taking more than 75mg daily (if taking 75mg or less a day you don’t need to notify us)
- A previous or current MRSA infection
- Had a recent hospital inpatient stay
- A high risk of variant-CJD (if you have received a corneal transplant, a neurosurgical dural transplant or previous injections of human-derived growth hormone)

If any of the above apply to you, please telephone us immediately on 01904 726978 or 01904 725542. We have an answer phone so you can leave a message if there is no answer.
What are the benefits of having this procedure?

The benefits of this procedure are to offer a more accurate diagnosis for your raised PSA blood test or your abnormal feeling prostate.

The biopsy tissue obtained from your prostate will be examined under a microscope by the Pathology Department. You will be given an appointment with your Consultant Urologist who will discuss the results with you in approximately two weeks.

What are the alternatives to having this procedure?

Currently, the only other option is to continue to monitor your PSA blood test.
What are the risks involved in having this procedure?

COMMON (greater than 10% - 1 in 10)
- Bleeding from the back passage and in the urine which can last for up to two weeks.
- Blood in the semen which usually settles in a few days, but occasionally it can take up to six weeks to settle. Blood in the semen poses no problem to you or your partner.

OCCASIONAL (2 –10% - 1 in 50–1 in 10)
- Urine infection (3% - 3 in 100)
- Inconclusive result requiring repeat biopsy
- Failure to detect a significant prostate cancer. This procedure may therefore need to be repeated if the biopsies are inconclusive or your PSA rises further at a later date

RARE (less than 2% - 1 in 50)
- Inability to pass urine (1% - 1 in 100)
- Heavy bleeding requiring hospitalisation (1% - 1 in 100)
- Blood infection (septicaemia) requiring hospitalisation (1% - 1 in 100)
- Death – less than 0.1% - 1 in 1000

HOSPITAL-ACQUIRED INFECTION
- Colonisation with MRSA (0.9% - 1 in 110)
- Clostridium Difficile bowel infection (0.2% - 1 in 500)
- MRSA bloodstream infection (0.08% - 1 in 1250)
How can I prepare for the procedure?

It is important that you do continue to eat and drink as normal throughout the day of the biopsy. If you don’t normally eat in the mornings, please do have something light before you come.

Please wear close-fitting underwear, preferably not boxer shorts, when you attend for your procedure. You will be given a pad to collect any bleeding after the procedure and close fitting underpants will keep this in place.

What happens before the procedure?

You will be asked to provide a urine sample to ensure that there is no infection present.

You will be given antibiotics to reduce the chance of you becoming unwell following the procedure. These are usually Ciprofloxacin tablets (but Cefalexin may be used if you are allergic to this), and injections of Gentamicin.
How am I prepared for the procedure?

The nurse will ask you questions about your medical history and discuss with you if:

- You are allergic to Ciprofloxacin
- You are allergic to local anaesthetic
- You have had endocarditis or have had an artificial heart valve replacement or a coronary artery stent
- You have kidney failure, epilepsy or convulsions
- You are taking warfarin or other blood thinning drugs (such as Clopidogrel, Rivaroxaban, Apixaban or Dabigatran) or if you have a condition which can effect blood clotting
- You are taking any antibiotics

You will be asked to sign a consent form for the procedure (FYCON103-3: Transrectal Ultrasound and Prostate Biopsy), so if you use reading glasses, please bring them with you. This consent form indicates that you give permission for this procedure to take place and that you understand what is to be done. Make sure that you are given the opportunity to discuss any concerns and ask any questions you may still have before signing the form.
How is the procedure carried out?

A nurse will be present to talk to you throughout the procedure. You will be asked to lie on your side and a lubricating jelly will be applied to your anus and your rectum.

A specially trained Practitioner will place an ultrasound probe into the rectum. The prostate gland will be studied and measured using ultrasound (very high frequency sound waves). A needle will be inserted through the probe to insert local anaesthetic around the prostate.

Pressure on the prostate may make you feel that you want to pass urine, but this sensation quickly fades after the examination.

Samples of tissue (biopsies) will be obtained from different parts of the gland by putting a needle through the probe and into the prostate. You will feel the pressure and hear a click as each sample is obtained. Usually 10 to 12 samples are required but sometimes more are taken.

It may be a bit uncomfortable but it should not be painful. If the procedure is painful, please make this known to the nurse present with you.
What happens after the procedure?

After a drink and 30 minutes rest you will be ready to go. **We advise you to arrange transport home after the procedure rather than drive yourself home.**

We strongly advise you to avoid strenuous exercise for a couple of days as this can increase the risk of further bleeding. You may pass blood in the urine, on the stools or in ejaculate (semen) following prostate biopsy. This is normal and usually settles in a few days, but occasionally it can take up to six weeks to settle.

In the unlikely event of blood loss continuing after this time, you should consult your GP or Urologist at your follow up.

When should I see my GP or go to A&E?

You should see your GP or if necessary come to Accident and Emergency if you:

- Develop ‘flu like’ symptoms and/or a temperature of more than 38°C (100°F), feel sick or have shivering episodes
- Are bleeding heavily or continuously
- Are unable to pass urine
Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact:
Sarah Hillery, Urology Nurse Practitioner, Department of Urology, The York Hospital, Wigginton Road, York, YO31 8HE or telephone 01904 726978.

Teaching, training and research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email pals@york.nhs.uk.

An answer phone is available out of hours.