



YOU HAVE BEEN SCHEDULED FOR A **PROSTATE BIOPSY**

DATE: _____ TIME: _____

LOCATION: 4600 Linton Blvd. 9970 Central Park Blvd. North
 Suite # 240 Suite # 207
 Delray Beach, FL 33445 Boca Raton, FL 33428
 561-637-6061 561-487-5506

PRE PROCEDURE INSTRUCTIONS:

- Stop all blood thinners 1 week prior to the procedure.
 - Examples: coumadin, plavix, aspirin, pradaxa, motrin, ibuprofen, aleve, etc.
- You are allowed to eat & drink the morning of the procedure; you do not have to fast.
- In your home, please administer a Fleet Enema rectally at least 1 hour before the procedure.
- An antibiotic prescription has been given to you – start taking these the day BEFORE the procedure. Most patients are given Ciprofloxacin (“Cipro”) 500mg twice a day x 3 days (6 pills given).
- Keep track of taking these pills by putting a check mark in the boxes below:
 - Day **before** procedure: (Morning Pill) (Night Pill)
 - Day **of** procedure: (Morning Pill) (Night Pill)
 - Day **after** procedure: (Morning Pill) (Night Pill)
- I have read these instructions, it has been explained, and I understand them:

PATIENT SIGNATURE: _____

POST PROCEDURE INSTRUCTIONS:

- You can resume your regular diet right after the procedure.
- You should stay home today but you can resume normal activities tomorrow if no bleeding.
- You may see blood in your urine or stool for up to 3-5 days after the biopsy.
- You may see blood in your semen/ejaculate for as long as 3-6 weeks after the biopsy.
- You can resume your blood thinners the day after tomorrow (2 days after the biopsy).
- Please finish the antibiotic pills as described above.

CALL OUR OFFICE IF:

- Temperature over 101.5
- Chills/shakes
- Trouble voiding or not voiding at all
- Heavy urinary or rectal bleeding

** Please be advised that you may receive a bill from the pathology laboratory (not our office) for preparation of the biopsy slides. Your insurance may cover all or only a portion of these charges; the remainder is the patient’s responsibility.

It takes 7 days for us to receive the biopsy results; we do not give results over the telephone.

Your return appointment after the biopsy: DATE: _____ TIME: _____

OFFICE LOCATION: _____