

Procedure Information Sheet – Transrectal Ultrasound (TRUS) Guided Prostate Biopsy

Hosp No. :	HKID No.:
Case No. :	
Name :	
DOB :	M / F
Adm Date :	
Contact No. :	

1. Introduction

1.1. Transrectal prostate biopsy is a diagnostic investigation for carcinoma of prostate. It is an invasive procedure with potential complication. However, a negative biopsy does not completely rule out the possibility of the disease.

2. Indications of transrectal prostate biopsy

- 2.1. Elevated serum level of prostatic specific antigen (PSA).
- 2.2. Palpable prostate nodule on digital rectal examination.
- 2.3. Clinical suspicion of carcinoma of prostate.
- 2.4. Re-staging carcinoma of prostate.

3. About the procedure

3.1. An ultrasound sensor is passed into your rectum, and a thin needle is inserted through the rectum under ultrasound guidance to take tissue sample of your prostate. Doctors usually collect multiple samples, which are sent for laboratory testing.

4. Risks and complications

- 4.1. Urinary retention.
- 4.2. Blood-stained urine (can last up to 1 to 2 weeks).
- 4.3. Blood-stained semen (can last up to 6 weeks).
- 4.4. Bleeding from rectum.
- 4.5. Infection of the urinary tract (1-5%).
- 4.6. Life-threatening septicaemia (<1%).

5. Preparation before the procedure

- 5.1. Patient will be asked not to eat or drink for 6-8 hours (or instructed by Doctor) before operation.
- 5.2. Your doctor will tell you whether you should continue your regular medications during the fasting period or may give you other instructions.
- 5.3. Inform your doctor of any medical condition (for example diabetes, heart diseases, high blood pressure, etc.) and any medications you are currently taking.
- 5.4. Some drugs including blood thinners & aspirin may need to stop before operation.

6. After the procedure

6.1. You may find blood in urine, faeces or semen after the procedure. You are advised to drink plenty of fluid over the next few days. If significant bleeding occurs, or if fever develops, you should contact your doctor in-charge or seek urgent medical advice at the nearest Accident and Emergency Department.

7. Follow up

7.1. If fever or other serious events develop after discharge, you should contact your doctor in-charge or go to the nearest Accident and Emergency Department.

8. Remarks

8.1. This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information, please contact your doctor.

9. References

9.1. Hospital Authority. Smart Patient Website.



Gleneagles Hospital

HONG KONG

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I acknowledged the above information concerning the operation or procedure. I have also been given the opportunity to ask questions and received adequate explanations concerning the condition and treatment plan.

Patient/ Relative Signature: _____

Patient/ Relative Name: _____

Date: _____

