

# Before Your Procedure

## Prostate Gold Markers + SpaceOAR Gel

You are being scheduled for this outpatient procedure because your radiation oncology team is preparing radiation treatment for prostate cancer. This procedure does not treat the cancer by itself. It helps the radiation team plan and deliver treatment more accurately while helping protect the rectum.

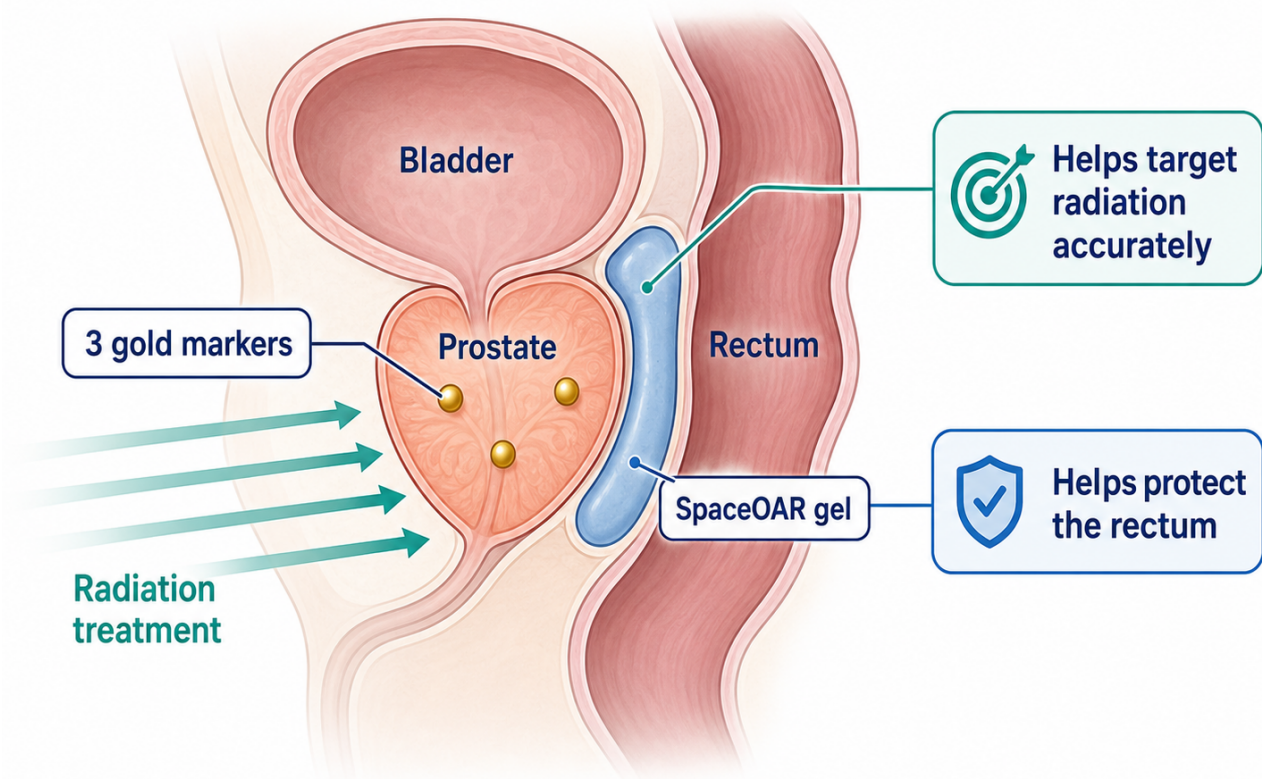
### Gold markers

Your urologist places 3 tiny gold markers into the prostate. The markers help the radiation team line up each treatment. They stay in place and do not need to be removed.

### SpaceOAR gel

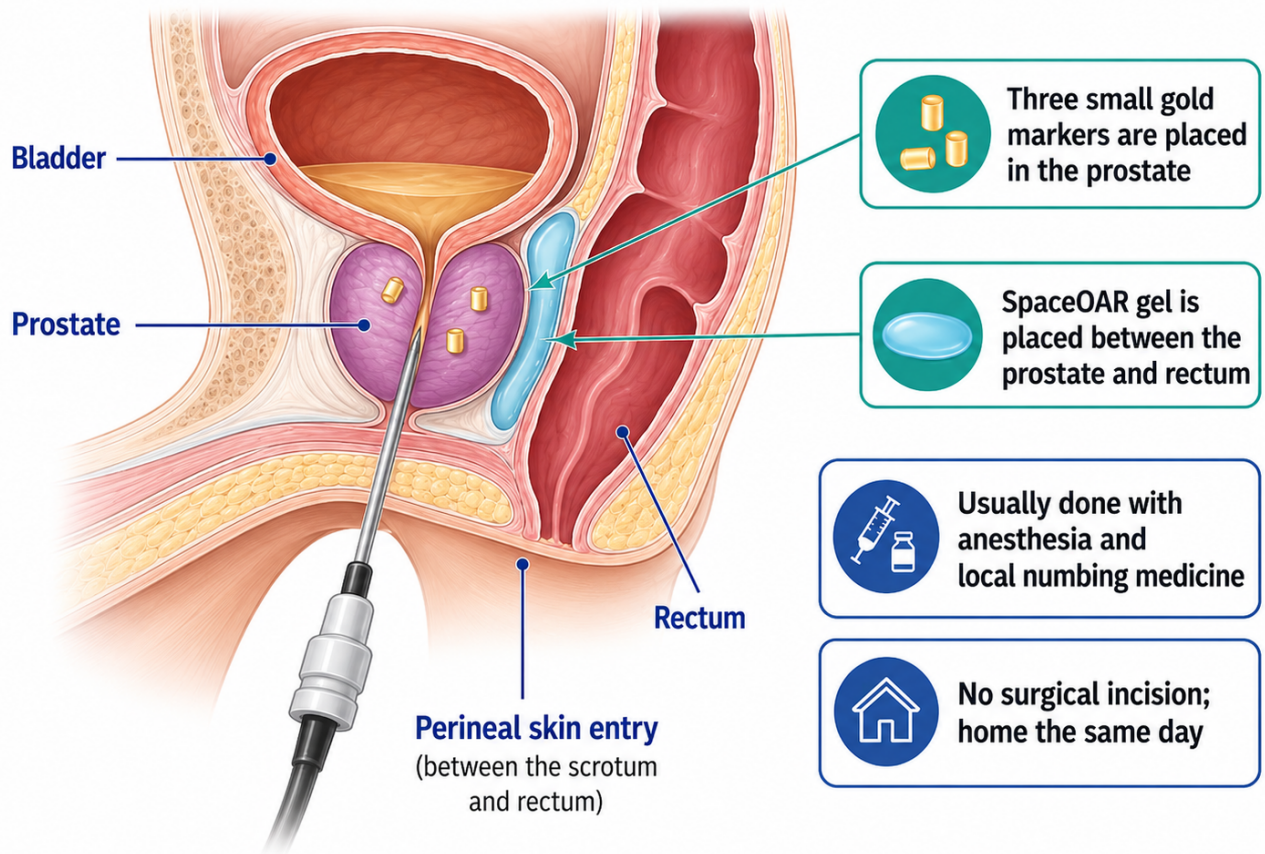
SpaceOAR gel is placed between the prostate and rectum. The goal is to create temporary space and reduce radiation exposure to the rectum. The gel slowly dissolves over time.

## Why we place gold markers and SpaceOAR



Main idea: the markers help target the prostate during radiation; the spacer gel helps move the rectum farther away from the prostate during radiation planning and treatment.

# How the procedure is done



## What happens during the procedure

The procedure is done through the perineal skin, which is the skin between the scrotum and rectum. Imaging guidance is used to place the 3 gold markers in the prostate and the SpaceOAR gel between the prostate and rectum. There is no surgical incision.

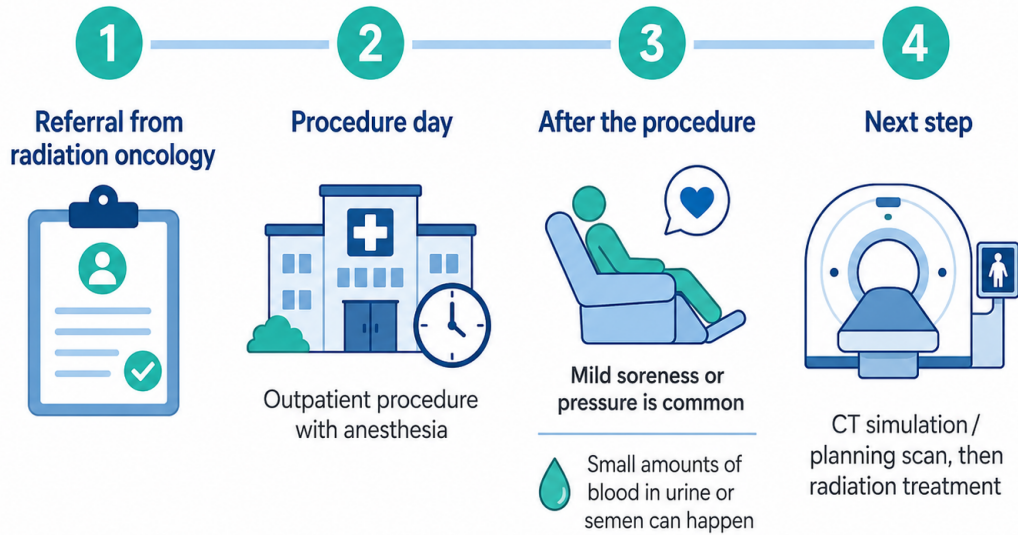
## Anesthesia and numbing medicine

This is usually done with anesthesia/sedation. Your doctor also uses a generous amount of local numbing medicine in the skin and deeper tissue. After you wake up, you may feel pressure or soreness as the numbing medicine wears off.

## Plan for the day

- You will go home the same day.
- You will need a responsible adult to drive you home.
- Allow time for check-in, anesthesia, recovery, and discharge instructions.
- Do not drive, drink alcohol, operate machinery, or make important decisions for the rest of the day after anesthesia.

# What to expect and what happens next



Most patients return to light activity the next day and increase activity as tolerated.

## Before you come in

- Follow anesthesia eating and drinking instructions.
- Take usual medicines only as instructed.
- Tell us if you take a blood thinner or diabetes medication.
- Do not stop a blood thinner unless your doctor or prescribing physician tells you to.
- Follow any antibiotic or bowel preparation/enema instructions if given.

## Call before the procedure if

- You have fever, chills, or feel sick.
- You have new burning, cloudy urine, or UTI symptoms.
- You cannot arrange a ride home after anesthesia.
- You are unsure what to do with a blood thinner or diabetes medication.
- Your radiation schedule or planning appointment changed.

## What to expect afterward

Most patients do well. Mild perineal soreness, pressure, burning with urination, a small amount of blood in the urine, or dark/bloody semen can happen temporarily. You will receive detailed discharge instructions after the procedure.

## Questions

Procedure or recovery questions: Houston Methodist Urology Associates - Baytown, 832.556.6046  
 Radiation planning or scheduling questions: Dr. Goswitz / Houston Methodist Radiation Oncology Group - Baytown, 281.420.8557

These instructions are general. Please follow any specific instructions from your urologist, radiation oncologist, anesthesia team, or surgery center.