Frequently asked questions

Q. Why am I getting Fiducial Markers?
A. Your radiation oncologist has referred you to get fiducial markers. These markers will help your radiation therapy be more accurate and will allow you to receive more radiation therapy.

Q. Are the markers harmful? Are they permanent?
A. No—The markers do not contain any radiation and are not harmful. However, they will stay in your prostate permanently.

Q. Do I need to fast?
A. No, we recommend eating as you normally do so that you do not feel dizzy or weak.

Q. How soon after getting the markers will I receive radiation therapy?
A. You can discuss this with your radiation oncologist team. We are not involved in scheduling your radiation therapy.

Q. Can I do a liquid bowel prep before my procedure instead of an enema?
A. You must do an enema about 2 hours before your procedure. You cannot do a liquid bowel prep. We cannot do the enema in our clinic, you must do it at home.

Q. If I live far away, can I administer the fleet enema earlier than 2 hours?
A. Yes, but it needs to be administered on the day of the biopsy. It cannot be done the night before. If you do administer the fleet enema early and plan to eat before your biopsy, make sure it is a light meal since the enema will be clearing out your system.
What are fiducial markers?
Fiducial markers are tiny gold rods that will be inserted into your prostate. These rods make radiation treatment more accurate. They are extremely small, thinner than the thickness of a dime, and less than an inch in length. The rods are permanent and harmless.

Marker insertion procedure
For this procedure, you will lie on your side. Your doctor will apply a local anesthetic to numb the area around the prostate.

Your doctor will insert an ultrasound probe into the rectum to guide the placement markers. The placement of the markers usually takes 5 minutes.

Before your marker insertion
• Take your antibiotic 1-2 hours before your appointment. We will call this into your local pharmacy.
• Administer a Fleet enema 2 hours before your appointment. You can purchase this at any pharmacy.

Medications to avoid:
- Advil
- Alka-Seltzer
- Aleve
- Anacin
- Ansaed (Flurbiprofen)
- Arthritis Pain Formula
- Aspirin Compound
- Ascin
- Aspergum
- Bayer
- Bextra
- Buferin
- Butalbital
- Celebrex
- Cilostazol
- Clinoral (Sulindac)
- Contact
- Coricidin
- Coumadin
- Dalteparin
- Darvon Compound
- Desirudin
- Disalcid (Salsalate)
- Doans Pills
- Dolobid (difunisal)
- Dristan
- Ecotrin
- Eloquis
- Empirin
- Excedrin
- Fledene (Piroxicam)

- Fiorinal
- Fondaparinux
- Ginko Biloba
- Halfprin
- Heparin
- Indocin
- Indomethacin
- Liquipurin
- Lodene (Etodolac)
- Lovenox
- Midol
- Motrin
- Naprosyn
- Norisic
- Novanistine
- Nuprin
- Orudis (Ketoprofen)
- Percodan
- Plavix
- Pradaxa
- Prasugrel
- Roxiprin
- Savaysa
- Sine-Aid
- Sine-off
- Soma Compound
- Toradol (Ketorolac)
- Vioxx
- Voltaren (Diclofenac)
- Xarelto
- Zorprin

After your marker insertion
• Limit your activity for 24 hours after your procedure.
• Drink at least 1 glass of liquid per hour until bedtime on the day of your marker placement.
• Drink at least 2 quarts of liquid on the day after your marker placement.
• If you notice blood in your urine: increase your fluid intake.
• It is normal to feel pressure in the rectum after the procedure. This is usually well tolerated by most patients. You may take Tylenol or Tylenol Extra Strength for your pain.

Post procedure symptoms
These symptoms are normal after your procedure:
• Small amount of blood in your urine, semen, or stool
• Slight burning with urination
• Increased need to urinate (frequency)

These symptoms are abnormal—please call the Urology clinic if you have any of the below symptoms:
• Fever of 101 F or higher
• Pain that is increasingly worse
• Shaking, chills
• Bright red blood or large clots in your urine
• You are unable to pass urine for 6 hours or longer

Please contact your primary care physician or cardiologist before stopping any of the medications that have been prescribed to you for treatment of a medical condition.