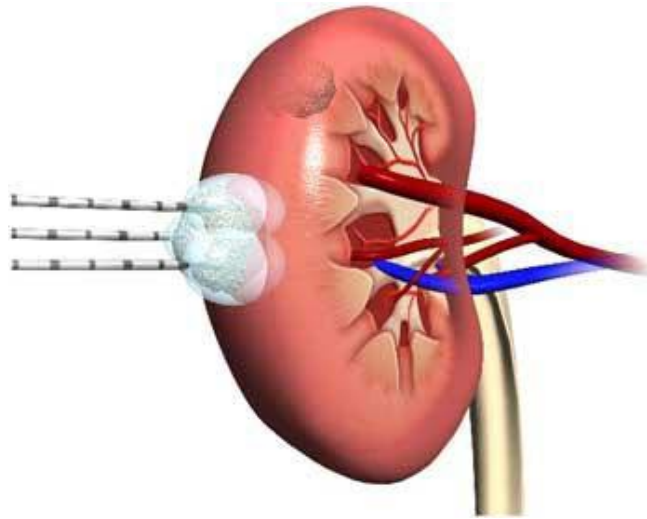


## **MCRG Interventional Radiology Patient Discharge Education Cryoablation/Microwave Ablation Treatment**

Cryoablation is a treatment that freezes abnormal tumor cells. Microwave ablation is a treatment that uses high temperatures or heat to destroy abnormal or tumor cells. A needle probe is inserted into the tumor using CT guidance and releases a gas which decreases the temperature (freezes) or increases the temperature (heat) of the treatment area and destroys the abnormal cells. Depending on the size of the tumor, cryoablation (ice) or microwave (heat) can shrink or kill the tumor. This procedure can often be repeated if the cancer comes back (recurs), or if the tumor has an incomplete response.



### **EXPECTED SIDE EFFECTS:**

Most patients have few side effects following cryoablation/microwave treatment. Listed below are a few common complaints from patients.

- Treatment site pain for a few days following treatment. This usually does not require more than a few days of prescription pain medicine and many patients only use over the counter pain medication.
- Mild fatigue for a few days following treatment.
- Sore throat or mild “hang over” type feeling for a day or two from the medicines given during the procedure to keep you comfortable. This may include mild nausea.

### **GOING HOME**

**Diet:** There are no dietary restrictions specifically due to this procedure. If you had restrictions prior due to other treatments or diseases such as diabetes, cardiovascular disease, or renal disease, you will need to continue with these.

**Activity:** Do not plan anything active or requiring your close attention for the first few days following discharge from the hospital. If you work, you may return as soon as you feel able. Most patients do not need more than 1 to 2 days away from work.

**\*\*A responsible adult must accompany you home from the hospital. This is an ORMC policy for your safety\*\***

**Bathing:** It is okay to shower 24 hrs after the procedure. Gently wash the catheter insertion site with soap and water, do not scrub. Do not bathe or soak in water for 3 to 5 days following the procedure to allow the site to completely heal.

**Medications:** Usually, your pre-procedure medications do not change. You will be instructed before discharge if any of your medicines change. The following medications **may** be prescribed to you upon discharge IN ADDITION to your normal medicines:

1. Narcotic pain medicine, usually Percocet or Vicodin. Take this if you have pain, but not more frequently than every six hours.

**\*\*Do not drive while taking this medicine, it causes drowsiness.**

**\*\*If the bottle says it has Acetaminophen with it, do not take additional Tylenol while taking this medication.**

**\*\*This medicine causes constipation. If this is a problem for you, increase your fluid intake and take an over the counter stool softener such as docusate sodium or dulcolax. Call us if you have not had a bowel movement in more than three days.**

2. Anti-nausea medication, either Phenergan or Zofran.

**Follow Up:**

- We recommend calling your kidney or lung doctor to set up a follow up appointment after you are discharged from the hospital. Every doctor is different in when they want to see their patients after treatment but they will be glad to hear that your treatment was performed and you are doing well.
- You will follow-up in Interventional Radiology in 3 to 6 months. Our schedulers will call you to make the appointment.
- Follow up imaging is ordered by us (or your kidney/lung doctor) and is done 3 to 6 months after treatment and before your next scheduled IR visit. A prescription for the follow-scan will be given to you prior to your hospital discharge. If you have this scan done outside of the Orlando Health network, please be sure to mail or bring us a copy of the CD images for your interventional radiologist to review on the day of your appointment. We will contact you with the results. If further treatments will be required, we'll let you know at that time.

If you have a question about follow up imaging or test results, please call (321) 841-8104.

**When to Get Medical and Emergency Help:**

Call our non-emergent line at (407) 649-6823:

If you have a temperature over 101°F.

If your pain is not controlled.

You have questions about your treatment or new prescriptions.

You have pain where the treatment probe was placed that is worsening more than improving.

You have any other symptoms you are concerned about within 2 weeks of treatment.

Go to your nearest Emergency Department:

Your procedure site starts bleeding and will not stop after 10 minutes of firm pressure.

You have shaking chills or a temperature over 101°F.

Sudden shortness of breath.

Severe, increasing flank pain (or pain where the procedure was performed).

### **Interventional Radiology Contact Information**

Office Hours 8:00 am - 5:00 pm

#### **Non-emergent questions:**

Phone: (407) 649-6823 Fax: (407) 246-0374

Email: [IRSupport@MCRG.com](mailto:IRSupport@MCRG.com) – *non urgent concerns only*

#### **IR Clinic Scheduling:**

Phone: (321) 841-8104 Fax: (407) 649-7873

Email: [IRSupport@MCRG.com](mailto:IRSupport@MCRG.com) – *non urgent appointment requests only*

#### **For all Urgent issues:**

On nights and weekends for immediate concerns you may

Page the Interventional Radiologist at:

**(321) 841-8122**

Or call your Doctor.