

WHAT TO EXPECT: Radioembolization



FIS Evaluation Clinic Located at TGH

All patients are first evaluated at our outpatient clinic at Tampa General Hospital (TGH) in the Harborside Building located at 5 Tampa General Circle, 8th Floor, Suite 820, Tampa, FL 33606. We are in the same office as FACT (Florida Advanced Cardiothoracic Surgery). Valet parking is offered in front of the Harborside Building and self-parking is always available in the parking garage. **(See Map on Page 3)**

What to Bring to Your Evaluation

On the day of your evaluation, please bring all of your imaging (CT/MRI/X-rays) and blood tests results if they were not performed at TGH. We prefer imaging on CDs for our later review. If you are seeing an oncologist or liver specialist, please request that they fax your records to our office at (813) 844-4032 prior to your evaluation. **If we do not receive your medical records prior to or on the day of your appointment we will have to reschedule.**

Evaluation Appointment

During the clinic visit we will review your imaging, medical history, and overall health. We will discuss the risks and benefits of the procedure and the expected post-operative course and follow-up. Depending on your tumor type we may refer you to a liver surgeon or liver transplant specialist at TGH. Prior to leaving the office you will be scheduled for your procedure. Prior to leaving the office you will be scheduled for your procedure. If for some reason we cannot schedule you at that time, the scheduler will call you soon after your evaluation to schedule your procedure. Remember, Radioembolization requires two procedures for each treatment. If the entire liver needs treatment, this often requires 4 outpatient procedures over a 6 week span.

FIS Procedure Clinic Located at TGH

Our Procedure Clinic Registration is also located at TGH in the Bayshore Pavilion Area K, take elevators to the 3rd floor and precede to the 3K Registration Desk. Valet parking is offered for a small fee on the day of your procedure in front of the Main Entrance and self-parking is always available in the parking garage. **(See Map on Page 3)**

Preparation for the Day of Your Procedure

We ask that you DO NOT eat anything after midnight on the night prior to your procedure or at least 6 hours prior to your procedure. Eating breakfast will force us to delay your procedure as we cannot give you anesthesia safely if you have eaten within 6 hours. **We ask all patients to arrive two hours prior to their scheduled procedure and report to the 3rd floor of the Bayshore Pavilion.** Again our procedure clinic is in the Bayshore Pavilion and after you are registered on the 3rd floor, you will be directed to a

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Procedure Clinic Location: 1 Tampa General Circle, 3rd Floor, 3K Registration, Tampa, FL 33606

Scheduling (813) 844-4570

After Hours (813) 844-7444

Fax (813) 844-4032

private preoperative room. Blood tests are performed as soon as you arrive to assure you are well enough to undergo the procedure.

Medications Administered

Prior to your procedure you will be pretreated with nausea and pain medication. During the procedure these medications are given as well as “conscious sedation”, otherwise known as “twilight sedation”. We do not typically utilize general anesthesia as we require patients to hold their breath throughout the procedure to allow us to visualize the tumors under x-ray.

Radioembolization Procedure

The Radioembolization and mapping procedures are performed through the right common femoral artery and there is typically little pain after access is gained into the vessel. The mapping procedure is performed 1 week prior to the actual treatment and defines the anatomy of the tumor arteries and allows us to safely administer the radiation dose into the correct vessels. The treatment is performed through the same vessels as the mapping. Both procedures take 1-2 hours.

Post Procedure

After the procedure most patients have no symptoms, mild nausea is the most common complaint. Once in your post-operative room, you will be asked to lie flat for 3-6 hours to allow the hole in the artery to seal and avoid bleeding under the skin. After this time most patients are discharged home. Most patients who have had radioembolization report mild pain, nausea, and fatigue for 7-10 days. As the radiation particles take days to cause damage, symptoms don't typically start for several days after the procedure. Most symptoms can be treated with antacid, oral steroids, and over the counter pain medication (ibuprofen). Prescriptions for these medications are given prior to discharge home.

Follow-up Appointment

Follow-up appointments are scheduled between 4-6 weeks after the Radioembolization. If both sides of the liver have tumors, we typically treat both sides over 4-6 weeks then perform a CT/MRI or PET to evaluate the tumor response. This avoids delay to prevent tumors on one side of the liver to grow while waiting for follow-up. These tests allow us to determine the amount of remaining tumor and evaluate how your liver tolerated the treatment. During the clinic visit we will review the results with you and schedule additional follow-up depending on the outcome of your procedure. Most patients referred for Radioembolization require treatment to both sides of the liver. In several types of cancer, Radioembolization has been shown to increase life expectancy by 4-10 months. Rarely, the tumors are completely killed and patients may undergo resection of the tumors or liver transplant. If the tumors grow back in the liver after 6-12 months the treatment can often be repeated, but this often depends on how healthy the liver is after the first treatment.

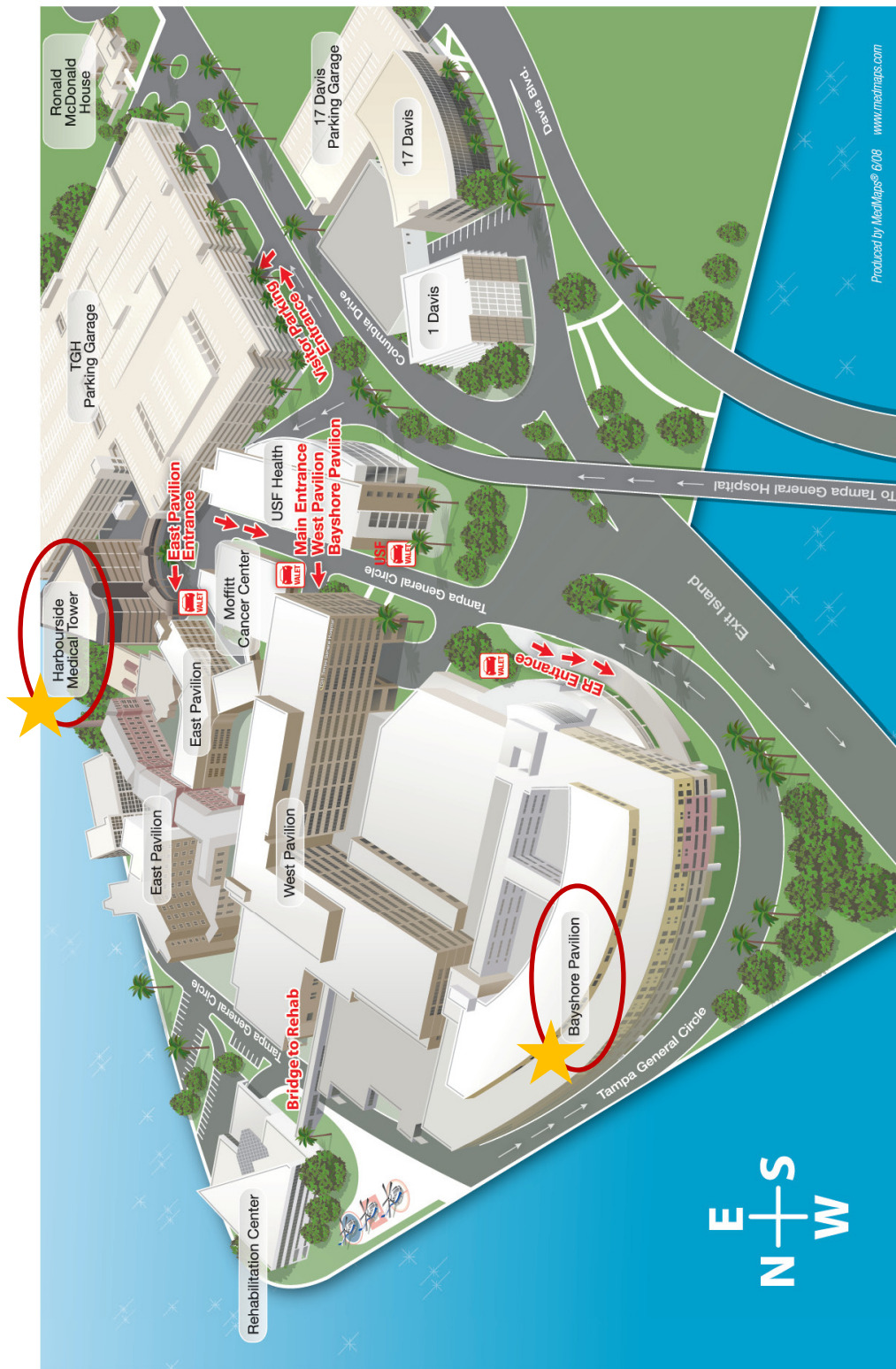
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Main Switchboard (813) 844-7000
Patient Information (813) 844-7443
PhysicianFinder Referral Service 1-800-822-DOCS
Web site www.tgh.org

Form #: 8422, Rev. 11/11/08

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