

Patient Information

CT guided ablation aftercare

Introduction

This leaflet will give you information about aftercare following your CT guided ablation

What to expect after your CT Guided Ablation

- You can eat and drink as usual after the procedure.
- It is best to have someone drive you home or take a taxi instead of using public transport.
- Drink plenty of fluids over the next 2 to 3 days.
- To prevent infection, you will be given antibiotics during the procedure. You will need to take the full course of antibiotics.
- You might feel feverish or unwell for a day or two after the procedure. This is normal and usually goes away on its own - it does not mean the treated tumour is infected.
- The needles used for the procedure leave only small puncture wounds in the skin. You will need to use simple plasters, which can be removed after 48 hours.
- If you notice ongoing bleeding or a discharge from the needle wound sites, please contact your GP or NHS 111 for advice.

The results of the CT scan will be sent to the doctor who requested the test. The doctor will contact you to arrange a follow-up appointment.

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Department

Radiology

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Patient Information

If you experience any of the following it is important that you contact the Radiology Nurses, NHS 111 or the nearest Accident & Emergency Department for advice:

What to look for	Possible complications	Frequency	Actions to take
Pain and bruising	Pain and bruising	Common	Take simple pain relief such as paracetamol to relieve any pain. This should go after a couple of days but if present longer please telephone the Radiology Nurses for advice.
Swelling and pain	Haematoma	Rare	Apply a cold compress such as an ice pack wrapped in a tea towel. Take simple pain relief such as paracetamol to relieve any pain. If the swelling or pain does not improve over the next few days telephone the Radiology Nurses.
General feeling of unwell	Slight raised temperature or fever	Common 1 - 2 days post procedure	Take anti-biotics as prescribed and rest. If the symptoms persist or get worse contact your GP.
Severe abdominal pain and bruising associated with weakness, nausea and/or vomiting	Bleeding - the area being ablated or an adjacent blood vessel may rarely bleed enough to need a further procedure.	Rare	This may require further intervention- This is usually a minimally invasive embolization of the bleeding vessel performed in radiology, very rarely surgical intervention is required.
Extreme Chest pain and shortness of breath	Pneumothorax – leaking of air into the chest wall	Rare	Go to the Emergency Department

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Contact information

If you have any problems or questions, please contact the Radiology Nurses.

Radiology Nurses

Tel: 0300 422 5152

Monday to Friday, 8:00am to 6:00pm

Alternatively, you can contact your GP or NHS 111 for advice.

We are pleased that we can offer state of the art technology for diagnosis. However, radiology equipment needs constant updating and there is a charitable fund for this. If you would like to make a donation, please send a cheque to the appropriate address below. Cheques are payable to GHNHSFT.

Please send your donation to:

Business Manager Department of Radiology (Imaging 1) Gloucestershire Royal Hospital London Road. Gloucester GL1 3NN

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Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

- 1. What are my options?
- 2. What are the pros and cons of each option for me?
- 3. How do I get support to help me make a decision that is right for me?

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Ask 3 Questions is based on Shepherd HL, et al. Three questions that pa Patient Education and Counseiling, 2011;84: 379-85







AQUA https://aqua.nhs.uk/resources/shared-decision-making-case-studies/