

## Cooled ThermoTherapy™ Patient Screening Form

Patient Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Insurance: \_\_\_\_\_  
 Referring Physician Name: \_\_\_\_\_

### PRE-SCREENING QUESTIONS TO DETERMINE ELIGIBILITY (Questions 1 – 6 must be NO):

	Yes	No	Don't Know
1. Patients with a prostatic urethra < 2.5 cm in length as measured from the bladder neck to the verumontanum.			
2. Patients with urinary sphincter or any implant (metallic or non-metallic) which is within 1.5" (38 mm) of the prostatic urethra.			
3. Patients with urethral stricture (unable to pass 22 F urethroscope).			
4. Patients with peripheral arterial disease with intermittent claudication or Leriche's Syndrome (i.e. claudication of the buttocks or perineum).			
5. Patients who have undergone pelvic radiation therapy.			
6. Patients with implanted active devices, including pacemakers or defibrillators, within 2.6" (6.5 cm) of the prostatic urethra.			

If the patient answers "No" to the patient pre-screening questions, schedule a screening visit:

#### Your appointment is scheduled for:

Date: \_\_\_\_\_  
 Time: \_\_\_\_\_  
 Location: \_\_\_\_\_  
 Physician: \_\_\_\_\_

#### At this visit we will:

- Answer additional questions you may have about the Cooled ThermoTherapy™ procedure
- Review and sign a patient consent form (optional per hospital and / or office policy)
- Obtain medical history information
- Perform tests to determine your current medical condition

Please come to the appointment with a full bladder, medical records that pertain to any condition you are now being treated for and a list of medications and the dosage that you are taking.

Cooled ThermoTherapy™ is available by prescription only. This therapy is not for everyone. Talk to your physician to see if Cooled ThermoTherapy is right for you. Most medical procedures may have side effects. Possible side effects for Cooled ThermoTherapy include blood in urine, clots in urine, painful or difficult urination, thickened bladder muscle, rectal irritation, temporary inability to control urination, brief inability to achieve or maintain an erection and the inability to discharge semen in orgasm thus should be considered by men who wish to have further offspring. A small risk of urethral stricture may result requiring further intervention. Patients may experience discomfort during the procedure that may require the use of analgesics or sedatives. Patients may be catheterized for a 2 to 5 day period following the treatment.<sup>1</sup> For more complete information about the benefits and risks associated with Cooled ThermoTherapy please refer to the Instructions for Use found on our website at [www.cooledthermotherapy.com](http://www.cooledthermotherapy.com) or call us at 1.800.475.1403.

<sup>1</sup>Data taken from the CTC Advance® Instructions for Use, 250348 Rev B 12/08.