

*The* ROYAL MARSDEN

NHS Foundation Trust

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## Having an ultrasound guided breast diagnostic procedure

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**Breast Unit**

**Patient Information**



**NHS**

The sonographer (specialist radiographer or doctor) who has examined you has recommended that you have an ultrasound guided breast core biopsy or fine needle aspiration.

This leaflet may help you understand why the procedure is necessary and what to expect. If you have any questions please ask.

## What is a biopsy?

A biopsy is a procedure that involves taking a sample or samples of tissue from an area needing further investigation. This procedure is done after numbing the area with lignocaine (local anaesthetic) injection. This is to ensure that you do not feel any pain and are as comfortable as possible during the procedure. A small cut is made in the skin and a special biopsy needle inserted to obtain a sample of tissue which is then sent to the laboratory for further tests.

## What is a fine needle aspiration (FNA)?

A fine needle aspiration is a procedure that involves taking a sample of cells from the area needing further investigation. This procedure is done with a blood test needle and usually you will not need a local anaesthetic, however you will be advised if it is recommended. The sample of cells is taken and then sent to the laboratory for further tests.

## How do I prepare for the ultrasound diagnostic procedure?

There is no special preparation for this procedure. **Please tell the assistant or sonographer in the ultrasound room if you are taking any anticoagulation drugs (for example aspirin, apixaban, heparin, warfarin or clopidogrel) before your biopsy.**

If you are pregnant, there is no risk to your unborn child.

## What happens during the procedure?

We will call you from the waiting area into the ultrasound room. You may request to have your friend or relative stay with you during the procedure. We will ask you to remove the top half of your clothing in the changing area and put on a hospital gown. A doctor or sonographer will take the sample(s) with the support of an assistant. The procedure can take 15 to 30 minutes to complete.

We recognise that this is an intimate procedure and will try to make you comfortable. We will ask you to lie on your back on the ultrasound couch. Your affected side will be slightly raised and your arm above

your head. Please tell the staff if this position is likely to be difficult for you because of any shoulder, back or neck problems. The sonographer will perform a scan with the ultrasound to familiarise themselves with the breast area. They may need to reposition you. We will ask if you have any allergies to any tapes, plasters or drugs. The area to be investigated will then be numbed with local anaesthetic, if appropriate, given using a very fine needle. You may feel a slight stinging as the local anaesthetic is given, but this will wear off quickly.

**If you are having a biopsy**, the sonographer or doctor will make a small cut in your skin and, using the ultrasound as a guide, insert the biopsy needle into your breast. This may take several minutes as they guide the biopsy needle with the ultrasound. Once the needle is in the correct place we will take a sample of tissue. The biopsy needle makes a loud clicking noise as it takes the sample. Several samples may be taken. We will check with you throughout the procedure that you remain pain-free. Most people report that they feel pressure but no pain. After the samples have been taken, an assistant will apply pressure to the area before securing a dressing over the wound.

**If you are having an FNA**, the sonographer or doctor will insert the blood test needle using the ultrasound as a guide into the area to be investigated. This can take several minutes. After the sample has been taken, an assistant will apply pressure to the area before applying a plaster.

## Are there any complications?

- Allergic reactions are rarely seen due to the type of local anaesthetic we use. However, you may experience skin redness, rash or hives.
- Very rarely a wound will begin to bleed a little after you have left the hospital. You should apply direct pressure to the wound for ten minutes. The wound should then stop bleeding.

## What happens afterwards?

When the biopsy has been performed, sticky paper strips and a self-adhesive dry dressing will be applied to the wound. You should keep the dressing on for 72 hours, after which it can be removed along with the sticky paper strips. Please keep your wound clean and dry during the first 72 hours. Occasionally it is necessary to use a more substantial pressure dressing. If this is the case we will give you any

extra instructions at the time. **For FNAs**, a plaster is used which can be removed after one hour.

Most people feel fine following the procedure and return to their normal routine straight away. However, we recommend that you avoid strenuous exercise for 24 hours to give the wound time to heal. You should feel fine to drive home.

After the procedure you may experience some tenderness and bruising in your breast. This is normal. To help with the tenderness, you may take a regular over-the-counter painkiller such as paracetamol or ibuprofen (not aspirin). The bruise should get better within a week.

### When can I expect the result of my biopsy?

The result of your biopsy or FNA will be ready in about one week. Your clinic nurse will give you an appointment to receive the result. Occasionally, if results are not clear (usually this is for technical reasons) we may need to repeat the biopsy or FNA.

### What if I have more questions?

If you have any questions please contact us:

Sutton – Rapid Diagnostic Centre	020 8661 3845 / 3588
Chelsea – Rapid Diagnostic Assessment Centre	020 7811 8366
Cavendish Square – Radiology	020 7811 8942

If you have any concerns or you are feeling unwell after your procedure, please call for advice:

**The Royal Marsden Macmillan Hotline 020 8915 6899**

(available 24 hours a day, 7 days a week)

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