

Patient Information Leaflet

Percutaneous Biopsy

Produced By: Diagnostic Imaging

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Introduction

This leaflet tells you about the procedure known as **percutaneous biopsy**, explains what is involved and what the possible risks are. It is not meant to replace informed discussion between you and your doctor, but can act as a starting point for such a discussion.

If you are having the biopsy done as a pre-planned procedure, then you should have plenty of time to discuss the situation with your consultant and the radiologist who will be doing the biopsy, and perhaps even your own GP. If you need the biopsy done as a relative emergency, and then there may be less time for discussion, but none the less you should have had sufficient explanation before you sign the consent form.

What is a percutaneous biopsy?

A needle biopsy is a way of taking a small piece of tissue out of your body, using only a tiny incision. The specimen is then sent to be examined under a microscope by a pathologist, an expert in making diagnoses from tissue samples. As this biopsy is done through the skin, it is called a percutaneous biopsy.

Why do I need a percutaneous biopsy?

Other tests that you probably have had performed, such as an ultrasound scan or a CT scan, will have shown that there is an area of abnormal tissue inside your body. From the scan, it is not always possible to say exactly what the abnormality is due to, and the simplest way of finding out is by taking a tiny piece of it away for a pathologist to examine.

Who has made the decision?

The consultant in charge of your case, and the radiologist doing the biopsy will have discussed the situation, and feel that this is the best thing to do. However, you will also have the opportunity for your opinion to be considered and if, after discussion with your doctors, you do not want the procedure carried out, then you can decide against it.

Who will be doing the percutaneous biopsy?

A specially trained doctor called a radiologist. Radiologists have special expertise in using x-ray and scanning equipment, and also in interpreting the images produced. They need to look at these images while carrying out the biopsy.

Where will the biopsy take place?

Generally in the x-ray department, either in the CT scanning room, or in a "special procedures" room, with an ultrasound machine. Occasionally, biopsies are performed using an ordinary x-ray machine.

How do I prepare for percutaneous biopsy?

Outpatient

Please do not drive on the day of your appointment

Please arrange for a friend or relative to collect you from hospital.

You may need to be admitted to a ward as a day case patient, this will enable us to monitor your recovery after the biopsy. You will receive an appointment letter with the admission details, and a blood test request form included.

Please have your blood test done 2 – 3 days before your biopsy appointment.

The blood test is to check that you do not have an increased risk of bleeding during and after the procedure. We recommend that you do not eat for four hours before your biopsy, although you may drink some water.

Please arrive on your allocated ward one hour prior to your biopsy appointment for clerking and preparation.

Your admission details will be taken, and your blood test results will be checked on the admitting ward. You will be asked to undress and put on a hospital gown and may be asked to remove any jewellery worn. You will then be taken to the Diagnostic Imaging department on a trolley.

Inpatient

You may require a blood test before your biopsy appointment, to check that you do not have an increased risk of bleeding.

We recommend that you do not eat for four hours before your biopsy, although you may drink some water. You will be asked to undress and put on a hospital gown and may be asked to remove any jewellery worn. You will then be taken to the Diagnostic Imaging department on a trolley.

What actually happens during a percutaneous biopsy?

You will lie on the x-ray, ultrasound or scanning table, in a position that the radiologist has decided is most suitable for your procedure. You may need to have a needle put into a vein in your arm, so that the radiologist can give you a sedative or painkillers if required.

The radiologist will keep everything as sterile as possible, and may wear a theatre gown and operating gloves.

Your skin will be cleaned with an antiseptic solution, and you may have some of your body covered with a sterile theatre towel. The radiologist will use the ultrasound machine or the CT scanner to decide on the most suitable point for inserting the biopsy needle. Then your skin will be anaesthetised with local anaesthetic, and the biopsy needle inserted into the abnormal tissue.

While the first part of the procedure may seem to take a while, actually doing the biopsy does not take very long at all, and the needle may be in and out so quickly that you barely notice it.

Will it hurt?

Most biopsies do not hurt at all, although unfortunately bone biopsies may be painful.

When the local anaesthetic is injected, it will sting to start with, but this soon passes off, and the skin and deeper tissues should then feel numb. Later, you may be aware of the needle passing into your body, but this is generally done so quickly, that it does not cause any discomfort at all.

There will be a nurse, or another member of clinical staff, standing next to you and looking after you. If the procedure does become painful for you, then they will be able to arrange for you to have painkillers through the needle in your arm.

How long will it take?

Every patient's situation is different, and it is not always easy to predict how complex or how straightforward the procedure will be. It may be over in 30 minutes, although you may be in the x-ray department for about an hour altogether.

What happens afterwards?

You will be taken back to your ward on a trolley. Nurses on the ward will carry out routine observations, such as taking your pulse, blood pressure and wound check to monitor for any bleeding. You will generally remain on bed rest for a few hours, until you have recovered.

If your observations remain stable, you will be discharged home on the same day. Vigorous activity should be avoided for one week.

What happens next?

Do not expect to get the result of the biopsy before you leave, as it always takes a few days for the pathologist to do all the necessary tests on the biopsy specimen. The result will be sent by the pathology department to your referring Doctor.

Are there any risks or complications?

Percutaneous biopsy is a very safe procedure, but there are a few risks or complications that can arise, as with any medical treatment.

If a liver biopsy is taken, then there is a risk of bleeding from the liver, though this is generally very slight. If the bleeding were to continue, then it is possible that you might need a blood transfusion. Very rarely, an operation or another radiological procedure is required to stop the bleeding

Unfortunately, not all biopsies are successful. This may be because, despite taking every possible care, the piece of tissue which has actually been obtained is normal tissue rather than abnormal. Alternatively, although abnormal tissue has been obtained, it may not be enough for

the pathologist to make a definite diagnosis. The radiologist doing your biopsy may be able to give you some idea as to the chance of obtaining a satisfactory sample.

Finally...

Some of your questions should have been answered by this leaflet, but remember that this is only a starting point for discussion about your treatment with the doctors looking after you. Make sure you are satisfied that you have received enough information about the procedure, before you sign the consent form.

Percutaneous biopsy is a very safe procedure, designed to save you having a larger operation. There are some slight risks and possible complications involved, but these are generally minor and do not happen very often.

If you have any further questions please contact a Senior Radiographer on:

Tel: 524081 ext. 4670
9.30 – 12.00 and 13.30 – 16.30 Monday to Friday.

Access to Health Records by Diagnostic Staff

As a patient undergoing tests as part of a diagnostic procedure information about you may be accessed by other healthcare professionals. It is normal practice in these circumstances for your consent to be implied as part of your agreement to have the test or tests performed.

Accidental over exposure of radiation

Despite all safeguards, medical exposures can occur where the actual dose is greater than was intended. The regulations governing these exposures are either IR(ME)R 2000 or IRR 99. In the event of an over exposure the incident will be reported to the Radiation Protection Advisor. It will be down to the discretion of the RPA as to whether there is a clinical requirement to inform any patient of an overexposure.

If you require this leaflet in another language, large print or another format, please contact the Quality Team, telephone 01983 534850, who will advise you.

Valuables should not be brought into the hospital. If patients have to bring in valuable items they should ask a nurse to store them safely and request a receipt for the items. You may not be able to have the valuable items returned if the time of discharge from hospital is out of hours.

We are sorry but the Trust cannot accept responsibility for loss or damage to items not given for safe keeping.

You can get further information on all sorts of health issues through NHS interactive available through Sky TV or online at: <http://www.nhsdirect.nhs.uk/>

For Health advice and out of hours GP service please call the NHS 111 service on: 111

We Value Your Views On Our Service

If you wish to comment on the care which you, your relative or friend has received, we will be pleased to hear from you. Please speak to the person in charge of the ward, clinic or service in the first instance or ask them to contact the Quality Team. If you wish to contact them directly, telephone on 534850.

Alternatively you may prefer to write to:

Chief Executive
Isle Of Wight NHS Trust
St Mary's Hospital
Newport
Isle of Wight
PO30 5TG

All NHS sites are no smoking areas.

If you would like help and advice to stop smoking please call: Freephone 0800 169 0 169 to talk to the NHS Smoking Helpline.

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