

A vacuum assisted needle biopsy is performed to obtain a sample of breast tissue so that a histologic diagnosis can be made by a pathologist. The patients who have undergone needle biopsy here have said that the test was much better than they expected. Our emphasis is to not only reduce physical discomfort, but to also provide our patients with information and emotional support. Familiarity with the steps involved may help to alleviate your concerns about the needle biopsy process.

You do not need to restrict your food or liquid intake prior to the procedure. You should inform the radiologist/technologist when you are scheduling your appointment, if you are taking "blood thinner" (Coumadin). If you have mitral valve prolapse, it is currently not standard clinical practice to require pre-biopsy antibiotic prophylaxis. You will not need any sedatives, such as Valium; but if you choose to take a sedative, you will need to bring someone with you to help you return home (only if you take a sedative).

Please discontinue, as long as it is medically safe by your primary physician, aspirin, ibuprofen, Plavix, Aleve, Vitamin E, etc., one week prior to the procedure. You may take Tylenol during that week. Please inform us immediately if cannot stop any of these medications. Also, please inform us if you have any blood or bleeding disorders.

A biopsy is performed to obtain breast tissue for further analysis. A stereotactic vacuum needle biopsy uses mammogram pictures as guidance. The total appointment time is usually between 45 and 60 minutes. If the results of this biopsy are atypical or malignant, surgical excision would be warranted.

The risks of a needle aspiration and/or biopsy will be explained to, including:

- Infection: sterile technique is used during the procedure
- Bleeding: abnormal bleeding is risk usually for the patient with pre-existing bleeding disorders or difficulty clotting, or those patients who are on blood thinners.

The patient will be lying face down on the stereotactic table with your breast through a hole. We will raise the table up and work from underneath. The radiologist will do the following:

- Take x-ray pictures of the breast to localize the area so the radiologist is able to target where the biopsy will be performed.
- Clean the skin with either alcohol swabs or iodine swabs Numb the area, which is just under the skin, with local anesthetic (Lidocaine) and then numb deeper into the area with Lidocaine/Epinephrine. Please inform us if you have any numbing allergies.
- The radiologist will then make a small nick in your skin and insert the biopsy needle into the breast and begin taking biopsy samples. About 6-8 samples will be obtained.
- Once the samples are taken, a .3mm titanium clip will be placed in the breast. This clip is MRI compatible and will not set off any metal detectors. The clip acts as a landmark if further attention is needed. If the biopsy results are benign, the titanium clip will remain in the breast.
- The small incision will be covered up with steri-strips which will remain on for 3-4 days.
- A 2-view mammogram will be performed to document clip placement. An ace bandage will then be wrapped around your breasts to help hold some compression and to help when the numbing wears off.
- Post biopsy instructions will be reviewed along with the radiologist cell phone number in case you need to reach them after work hours.

It is normal to be anxious before the procedure. We will do the utmost to provide you with the best care and to make you as comfortable as possible. If you need anything (an extra pillow, a cup of water, emotional support or a hand to hold), please let us know.

The results will be sent off to the pathology lab and we should have them within 24-48 hours. The radiologist or the nurse will call you with the results. If the area in your breast requires additional surgery for further evaluation or treatment, we can help you arrange a consultation with our breast surgeon.