

# Ultrasound-Guided Breast Core Biopsy

Your physician has recommended that you undergo an ultrasound-guided breast core biopsy.

Understandably, you have questions regarding this procedure. This FAQ (Frequently Asked Questions) card will help you understand why the procedure is necessary and what to expect.

## What is ultrasound-guided breast core biopsy?

Ultrasound-guided breast core biopsy is a non-surgical procedure done to evaluate suspicious masses within the breast that are visible on ultrasound.

## Why do I need an ultrasound core biopsy?

By now, your physician has probably explained that your mammogram and ultrasound have revealed an abnormality in your breast. In the past, these abnormalities or lesions were treated in one of two ways: your physician “followed” them during a period of time to watch for significant change, or the patient underwent surgery to remove the lesion completely (called surgical excisional biopsy). An ultrasound core biopsy is considered a less painful, less invasive way to obtain the tissue sample needed for diagnosis. This procedure requires much less recovery time than does an excisional biopsy and there is no significant scarring to the breast.

## How do I prepare for the biopsy?

You may eat and drink prior to this procedure. If you are taking aspirin or other medication (which may cause poor blood clotting), you will be asked to stop taking this medication for five (5) days before the procedure. Bring a supportive bra with you to wear home to hold pressure at the biopsy site and to hold an icebag in place. The procedure is done at the Breast Imaging Department located on the first floor of Mills Breast Cancer Institute (509 W. University, Urbana).

## How is the ultrasound core biopsy performed?

The ultrasound biopsy procedure will be performed by a radiologist with assistance from a sonographer. The procedure will proceed as follows:

1. After checking in, you will be escorted to an ultrasound room and given a gown to wear.
2. The sonographer will ask you to lie down on your back or turn slightly towards your side.

3. After the area is localized with an ultrasound probe, the radiologist will use a local anesthetic to numb the skin and area leading to the biopsy site.
4. A small incision will be made into the skin so the biopsy needle can be inserted. No stitches should be necessary.
5. Using the ultrasound for guidance, the radiologist will take samples of the lesion.
6. When the radiologist has retrieved all of the samples, he or she will leave a small titanium clip behind in the breast for future evaluation. It is safe for this clip to remain in the breast.
7. You will be given post-procedure care instructions.
8. You will then be taken for mammogram X-ray images to confirm placement of the titanium clip.

### Will it hurt?

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Because the radiologist uses a local anesthetic, there is only a small amount of discomfort during the procedure. However, each of us has a slightly different pain tolerance. Please inform the radiologist if you experience pain during the procedure.

### What instructions should I follow after the biopsy?

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You will be given instructions for post-procedure care specific to your individual case.

### Can I resume my activities right away?

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Most women feel fine after the procedure and return to their normal routine immediately. However, we recommend that you avoid strenuous exercise or activity, and heavy lifting greater than 10 pounds be avoided for at least two days. If possible, it's best to go home after the procedure and relax.

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

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The radiologist performing the biopsy will send the tissue sample to a pathologist who will look at the sample under a microscope. The pathologist will examine the tissue and send a report to the referring physician within two to four working days. Your physician's office will contact you to discuss your results.

### What if I have more questions?

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Should you have additional questions or concerns not addressed in this FAQ card, please contact the Carle Breast Imaging Department at (217) 383-6098.