

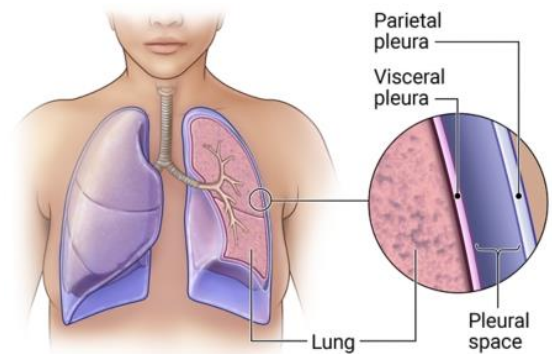


Procedure Information

Pleural Biopsy

Introduction

Pleural Biopsy is a procedure to obtain a small piece of tissue from the pleural for examination to confirm the diagnosis and determine the treatment options. Ultrasound or CT scan may be used to guide the biopsy needle into the right place. Pleural biopsy can also be performed under thoracoscopy which allows the doctor to examine the lining of the lung and the chest wall throughout the procedure.



Source:
https://content.healthwise.net/resources/14.0/en-us/media/medical/hw/acm2526_460x300.jpg

Outcomes

The body tissue samples taken out are examined by pathologists for histological assessment.

Procedures

1. The procedure can be performed under local anaesthesia (ultrasound or CT-guided) or general anaesthesia (under thoracoscopy).
2. Ultrasound or CT is used to locate the best position of biopsy site; and/or Thoracoscopy is used to examine the lung before, during and after taking pleural tissue
 - i. 1-2 small cuts are made in the chest.
 - ii. A thin tube (thoracoscope) is passed through the cuts into the chest for visualization.
3. Obtaining the tissue:
 - Ultrasound or CT-guided
 - i. A biopsy needle is inserted through the chest wall into the pleural space to obtain the pleural tissue.
 - Under Thoracoscopy
 - ii. Endoscopic instrument(s) is inserted through the small cut to obtain a piece of pleural tissue.
4. Step 3 may be repeated 3-4 times to obtain adequate pleural tissue.
5. The puncture site(s) is covered by a sterile dressing.
6. The sample is sent to Pathology Department for examination.

Possible Risks and Complications

1. Wound infection
2. Hemothorax (Blood collection in the chest cavity)
3. Pneumothorax (Presence of air in the chest cavity. A chest drain may be inserted if symptoms are severe.)

** The risks listed above are in general terms and the possibility of complications is not exhaustive. Please understand that even though all procedures are carried out with utmost professionalism and care, this does not rule out the possibility of complications from arising.

Pre-procedure Preparations

1. The procedures and possible complications will be explained by the doctor and a consent form must be signed prior to the procedure.
2. Please inform the doctor and nurse all your past medical history, previous surgical operations, current medication and any complication with drug or anaesthesia. Please inform doctor if you are taking medications that affect blood coagulation, such as Aspirin, Warfarin, Xarelto or Pradaxa, nonsteroidal anti-inflammatory drug (NSAID) such as Ibuprofen, Naproxen and Chinese medicine.
3. Chest X-ray may be performed. Please inform the doctor and nurse if you are or might be pregnant.
4. Blood tests may be performed to check the complete blood count and coagulation profile. Corrections with blood production transfusion may be required before the procedure.
5. No food or drink six hours before the procedure if necessary.
6. Intravenous access will be established.
7. Please change into a surgical gown after removing all belongings including undergarments, dentures, jewellery and contact lenses.
8. Please empty your bladder before the procedure.

Post-procedure Instructions

1. A normal diet may be resumed as instructed.
2. Chest X-ray may be arranged right after the procedure.
3. Normal activities can be resumed after 24 hours. Strenuous physical activity should be avoided for a few days.
4. Keep the wound dressing clean and dry.

Wound Care

1. The wound will be covered with a sterile dressing which must be kept dry.
2. The wound dressing will be changed according to the doctor's order.
3. You may take a shower after the procedure but must ensure that the dressing is waterproof and remains clean and dry.

Advice on Discharge

1. The biopsy site may be tender and sore for several days. You can take pain medicine as advised by your doctor.
2. The wound dressing may be removed 48 hours after the procedure. Please follow the doctor's instruction.
3. Immediately consult your doctor or return to hospital for professional attention in the event of shortness of breath, increased pain or swelling of the puncture site, blood or other fluid leaking from the puncture site, chest pain, coughing up blood, shivering, high fever over 38°C or 100.4°F, or any other unusual symptoms.
4. Any follow-up consultations should be attended as scheduled.

Should there be any enquiries or concerns, please consult the attending doctor.

Under the professional care of the doctor, you will gradually recover. We wish you all the best during your treatment and recovery.

If you have any questions after reading the entire leaflet, please write them down in the spaces provided in order for the doctor to further follow-up.

Compiled by Union Hospital Operating Theatre (OT) Governance Committee

The above information is for reference only, please enquire your physician for details
Our Hospital reserves the RIGHT to amend any information in this leaflet without prior notification

