



## Procedure Information

### Tomosynthesis/ Stereotactic-Guided Vacuum-Assisted Breast Biopsy

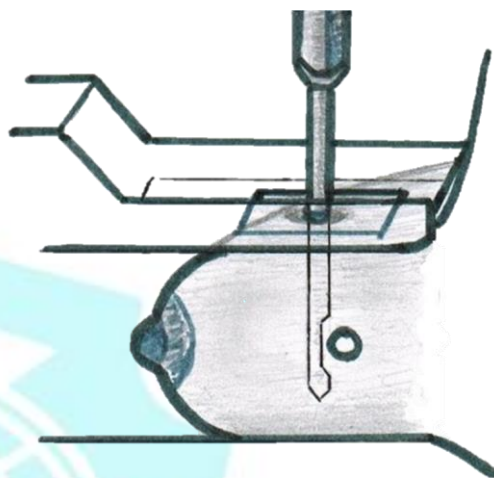
#### Introduction

Tomosynthesis/ stereotactic-guided vacuum-assisted breast biopsy is a minimally invasive procedure performed under local anaesthesia. Specialized digital mammography equipment is used to target the exact location of suspected abnormality or microcalcifications in the breast.

The procedure is performed by Radiologists or Breast Surgeons. If the site of the biopsy is too deep, too superficial, or at an area which is technically inaccessible, the procedure could be failed.

#### Outcomes

The needle used is vacuum-assisted, allowing larger sample size to be obtained and the yield is higher than traditional Fine Needle Aspiration (FNA) or Core Biopsy. The breast tissue samples removed are examined by pathologists for histological assessment.



Source:  
<https://insightsimaging.springeropen.com/articles/10.1186/s13244-021-01136-w/figures/1>

#### Procedures

1. During the procedure, you will lie on a specially designed X-ray table and the targeted breast will be positioned.
2. You will be asked to keep still and the breast will be compressed and held in position throughout the procedure. This may cause mild discomfort.
3. Several X-rays (mammograms) are taken, and the computer calculates the most accurate site for needle insertion. Local anaesthesia will be injected. A small skin incision is made at the site where the biopsy needle is to be inserted.
4. Once the needle is positioned at the area of concern, the doctor gently vacuums, cuts and removes tissue for examination and evaluation. A Titanium marker might be placed at the biopsy site for future follow-up or localization. This clip is very small, safe and MRI compatible. Patient will not be able to feel it once it is placed in the breast.

## **Possible Risks and Complications**

1. Puncture site bleeding/ bruises and hematoma formation
2. Wound infection
3. Allergic reaction to anaesthetics (rarely)
4. Puncture of pleural leading to pneumothorax (extremely rare)

\*\* 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 arising and may require another operation to deal with the complications.

## **Pre-procedure Preparations**

1. Please do not put on perfume, deodorant, lotion and baby powder.
2. Good hygiene can prevent surgical wound infection.
3. The procedure and possible complications will be explained by the doctor and a consent form must be signed prior to the procedure.
4. 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, herbs and dietary supplement.
5. No need for fasting.
6. Female who are or might be pregnant must inform to the staff.
7. Please change into a surgical gown after removing all belongings including undergarments.
8. Please empty your bladder before the procedure.

## **Post-procedure Instructions**

1. Water proof dressing with pressure will be applied.
2. Take off the pressure dressing according to medical advice.
3. Keep wound dry.
4. Please avoid strenuous activity or heavy duty for at least 24 hours after the biopsy.
5. Prescribed pain medication may be taken as needed.

## **Advice on Discharge**

1. Immediately consult your doctor or return to hospital for professional attention in the event of severe wound pain with redness, tenderness or blood oozing, shivering, high fever over 38°C or 100.4°F, or any other unusual symptoms etc.
2. 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.

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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

