

## Procedure Information

### Stereotactic-Guided Vacuum Assisted Breast Biopsy

#### Introduction

Stereotactic-guided vacuum assisted breast biopsy is a minimally invasive procedure performed under local anesthesia. Specialized digital mammography equipment is used to target the exact location of an area of suspected abnormality or microcalcifications in breast.

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

#### Outcomes

The needle used is vacuum-assisted, allowing more necessary tissue samples to be obtained and the yield is even higher than Fine Needle Aspiration (FNA) or Core biopsy. The breast tissue samples taken out are examined by pathologists for histological assessment.

#### Procedures

1. During the procedure, you will lie on a specially designed X-ray table and the affected 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 exactly where to insert the needle. Local anesthesia will be injected. A small incision is made in the skin 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 surgical clip might need to be placed at the biopsy site for future 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. Bleeding & hematoma formation
2. Infection
3. Rarely allergic reaction to anesthetics
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. Good hygiene can prevent surgical wound infection.
2. The procedure and possible complications will be explained by the doctor and a consent form must be signed prior to the procedure.
3. 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.
4. No need for fasting.
5. Female who are or might be pregnant must inform to the staff.
6. Please change into a surgical gown after removing all belongings including undergarments.
7. 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. Prescribed pain medication may be taken as needed.
4. Please avoid strenuous activity for at least 24 hours after the biopsy.

## **Advices 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°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

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