



Procedure Information Sheet - Mammotome (Breast) Biopsy

Visit No.: Dept.:
Name: Sex/Age:
Doc. No.: Adm. Date:
Attn. Dr.:

Page No:

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+10	+20	+30	+40	+50	+60	+70	+80	+90

Patient No.: PN

*Please fill in /
affix patient's label*

Introduction

1. Mammotome (Breast) Biopsy (hereafter referred to as “this Procedure”) is a clinical procedure to identify the nature of breast lesions most commonly masses or microcalcifications. The procedure can be done percutaneous (i.e. through the overlying skin) under X-ray, ultrasound or other imaging guidance.
2. This procedure uses a vacuum powered instrument to collect multiple tissue samples during one needle insertion. The samples are used for histopathology analysis.
3. Complete excision of breast lesions may not be achieved.
4. This procedure will be performed by a trained specialist, in the Radiology Department under ultrasound or stereotactic x-ray guidance.

The Operation / Procedure

1. This procedure will be performed under aseptic technique. The field of procedure will be sterilized and covered with sterilized towel.
2. This procedure is usually performed under local anesthesia. A vacuum pressure is used to pull tissues from the breast lesion through the needle into the sampling chamber. The needle is rotated to different positions without withdrawing and reinserting, to collect 8 to 10 samples from the lesion.
3. Duration of this procedure varies, from 15 minutes to over 90 minutes, depending on the complexity of the condition.
4. Before, during and after the procedure, patient's vital signs (blood pressure and pulse rate) will be monitored.
5. It will take a few days for completion of the histopathology report.

Before the Operation / Procedure

1. A written consent is required.
2. Inform medical staff before the examination if the patient thinks she is pregnant.
3. Inform medical staff if patient has any history of allergies to food, drugs or local anesthesia.
4. Inform medical staff if the patient is on anticoagulant or antiplatelet drugs. Withhold the medication as doctor prescribed.
5. Check clotting profile for any bleeding tendency when necessary, to be corrected if abnormality detected.



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Risk and Complication

1. Minor bruising around the needle insertion site (common).
2. Big blood clot formation (uncommon).
3. Big blood clot requiring surgical drainage (0.1%).
4. Infection requiring drainage and/or antibiotic treatment (0.1%).
5. Pneumothorax despite ultrasound guidance (0.01%).
6. Despite these potential complications, this Procedure is normally very safe and is designed to save a more invasive excision biopsy. A positive diagnosis can help to get the appropriate treatment. Common complications are minor and severe complications are very rare. Should a severe complication occur, another life-saving procedure or treatment may be required immediately.

Disclaimer

This leaflet only provides general information pertaining to this operation / procedure. While common risks and complications are described, the list is not exhaustive, and the degree of risk could also vary between patients. Please contact your doctor for detailed information and specific enquiry.

Reference

Part of the information is extracted from the patient information website provided by the Radiological Society of North America, Inc. (RSNA): Stereotactic Breast Biopsy. Retrieved on 12 Dec 2013 from:

<http://www.radiologyinfo.org/en/info.cfm?pg=breastbixr>

I acknowledge that I have understood the above information and was given opportunity to ask questions concerning my procedure.

Name of Patient / Relative

Signature

Relationship (If any)

Date