



Procedure Information – Renal Biopsy

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

Page No:

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

*Please fill in /
affix patient's label*

Introduction

Renal biopsy is done to establish the type of renal disease and its seriousness so that appropriate treatment can be given.

The Procedure

1. The procedure is performed under local anasesthesia.
2. The patient shall lie in a prone position; his/her back arched up with pillow tucked beneath his/her head and chest (1-2 pillows).
3. The kidneys are located by ultrasound scanning.
4. Local anaesthesia is performed to the back of the patient, small incision is made.
5. Guided by ultrasound scanning, the doctor will insert needle through the incision into the kidney for tissue collection.
6. Patient has to hold the breath during the procedure as instructed by doctor.
7. Patient remains conscious throughout the procedure which can be completed smoothly with patient's cooperation.

Possible risks and complications

- Death: occurrence rate: < 0.1%
- Mild haematuria: So mild that it is invisible to the naked eye but can be detected with a microscope or strips. Occurrence rate: 100%. No obvious symptoms and not serious.
- Serious haematuria: Occurrence rate: 2-5%. Condition usually improves in 24 hours or may last for few days.
- Perinephric haematoma: Occurrence rate: 90%. No clear symptoms. Heals in 2-3 months.
- Anomalous arteriovenous fistula: Occurrence rate: 0.3-19%. No clear symptoms and not serious. Heals in 3-20 months.
- Other rare complications: Perforation of another organ such as the intestines and spleen, pneumothorax and wound infection.

Rare complications

- Bleeding is the most common and more serious type of complication, and there are cases when blood transfusions are needed. If bleeding is uncontrollable, a surgical operation will be needed to stop it (occurrence rate: 0.6%).
- For more serious cases, surgical kidney removed is necessary (occurrence rate:0.01%)

Before the Procedure

1. Your doctor will explain to you the reason, procedure and possible complications. You will need to sign a consent form.
2. Blood taking for laboratory test to ensure the safety of the procedure.
3. If instructed by doctor, aspirin, anti-platelet agents and anti-coagulant/ warfarin may need to be withhold 5-7days before the surgery. Please inform your doctor if you are taking any kind of this medication.
4. Skin cleansing and sterilization. Removal of hair in the lumbar region if necessary as instructed by your doctor.
5. Fasting 4-6 hours before the procedure.
6. Analgesic or tranquilizing drug may be administered to patient according to doctor's instruction 30 minutes before procedure.
7. Patient learns how to inhale and exhale deeply so that he/she can hold the breath in an exhaling state.
8. Change to operation attires and remove loose objects (e.g. dentures, jewelry, contact lens etc.) and empty bladder before surgery.



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After the procedure

A. Hospital care

1. Dressing and covering with pressure bandage on the wound after the procedure is to prevent bleeding.
2. Patient shall lie down on his back and remain bed-rested for at least 24 hours to minimize the risk of bleeding. He/she should avoid vigorous body movement.
3. Nurses will check the patient's blood pressure and urine frequently for early detection of the blood loss or profuse bleeding.
4. Patient should drink more water (at least 2 liters daily) to prevent from urinary obstruction expect for some special cases.

B. Home care

1. Patient should avoid any vigorous physical exercise or activity during the first two weeks to prevent secondary bleeding. He/she should keep the abdomen free from pressure (do not cough or sneeze if possible).
2. Contact your doctor if persistent lumbar pain, haematuria, dizziness, any signs of bleeding or fever (body temperature above 38°C or 100°F) etc.
3. Resume aspirin, anti-platelet agents and anti-coagulant/ warfarin as prescribed.
4. Follow up on schedule as instructed by your doctor.

Remarks

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. Should a complication occur, another life-saving procedure or treatment may be required immediately. For further information please contact your doctor.

Reference

Hospital Authority – Smart Patient Website

I acknowledge that the above information concerning my operation/procedure has been explained to me by Dr. _____. I have also been given the opportunity to ask questions and receive adequate explanations concerning my condition and the doctor's treatment plan.

Patient / Relative Name

Signature

Relationship (if any)

Date