Patient Information:
Breast Needle Localization With Surgical Excisional Biopsy

REASON FOR HAVING THIS PROCEDURE
This type of biopsy is done when something abnormal was seen on your mammogram/ultrasound test that cannot be felt. The needle localization procedure is performed to assist your surgeon in finding the exact area of concern so he can do a biopsy (tissue sample), and send it to a medical laboratory for evaluation. Biopsies are done to determine if a cancer is present so it can be treated.

PROCEDURE DESCRIPTION
The procedure involves placing a small thin wire into the breast tissue using the mammography machine for guidance. This is the needle localization part of the procedure, followed by an excisional biopsy in surgery (an incision is made in the skin and all or part of the abnormal tissue is removed for examination under a microscope). Done as an outpatient test, it is performed in two steps on the same day.

APPOINTMENT AND DAY OF ARRIVAL
Your surgeon’s office will call Parrish Medical Center to set up your appointment and give you instructions on your arrival time. Please wear comfortable clothes and do not bring valuables with you. Staff will help you get settled in our Peri-Op department on the second floor where you will be given a hospital gown to wear and asked to lie down on a stretcher. Radiology care partners will come to take you to the Women’s Diagnostic area on the hospital stretcher when it is time to begin the needle localization test.

DURING THE PROCEDURE
You will meet and be taken care of by a minimum of three care partners when you arrive in the Radiology Department—a registered nurse, certified mammography technologist, and radiologist (the doctor who performs the test). The exam will be done in a mammography room, but you will be seated in front of the machine instead of standing. The radiologist will numb the area of the breast with a local anesthetic. Your breast will be placed on the mammogram unit similar to the way you had mammogram pictures. A paddle may be used to hold the breast still. A second needle is inserted into the numbed breast, making sure the tip is at the area of interest. Several pictures may be taken for verification. A small thin wire is inserted through the needle, and then the needle is removed, leaving the wire. Your breast is then bandaged by the nurse and you will be helped to lie down on the stretcher again to go upstairs. Our nurses will make you as comfortable as possible until time for the surgical biopsy, which is the second step.