

Percutaneous ultrasound guided thyroid biopsy

What is it?

A thyroid biopsy is a procedure in which tissue samples from a thyroid nodule or mass are removed for examination under a microscope to look for signs of cancer or other disease processes. The procedure will be performed by a doctor (radiologist) using ultrasound guidance.

Before the procedure

Your doctor will explain the procedure to you and answer any questions that you may have about the procedure. Risks include, but are not limited to, the following: bleeding, infection, discomfort/bruising at the procedure site, and damage to adjacent tissues/organs. Most complications require only additional observation, although administration of fluids, medications or blood products may be needed. Rarely, surgery could be needed if a life-threatening complication is encountered.

Thyroid biopsy may be contraindicated in patients with bleeding disorders or active infection.

You will be asked to sign a consent giving permission to undergo the procedure.

Inform the doctor if you have any drug allergies, a known bleeding disorder or if you take an anticoagulant (blood thinner), aspirin, ibuprofen, or any other medication that may affect blood clotting. In most cases, these medications may need to be temporarily discontinued prior to undergoing this procedure. Additional lab work may be required in order to verify your blood is not too thin.

Do not eat or drink anything after midnight prior to procedure. Please make sure someone is available to drive you home if the procedure is performed on an outpatient basis.

During the procedure

The skin of your neck will be cleaned with an antiseptic solution then draped to create a sterile field. Local anesthetic (e.g. lidocaine) will be used to numb the skin and soft tissue. This may cause a brief stinging sensation.

A small needle will be inserted through the numbed area and into the thyroid gland with imaging guidance to acquire the biopsy samples. You may feel some pressure as the needle is advanced into the thyroid.

Usually 5-6 samples are acquired for a fine needle aspiration (FNA), repeating the above procedure for each sample. Occasionally, a core biopsy of a nodule may be performed. This requires using a slightly different device to take a tissue sample (through the area that is already anesthetized). The doctor will discuss this with you at the time of the procedure if he feels this is advisable. Once adequate specimens have been acquired, the biopsy needle will be removed. Pressure will be applied at the site until any bleeding has stopped, and then a bandage will be placed at the site.

After the procedure

If there are no complications, you should be able to be discharged following the procedure. Once you are medically cleared for discharge, you must have someone to drive you home.

The biopsy site may be sore for several days after the procedure. Take a pain reliever for the soreness as recommended by your regular doctor; acetaminophen (Tylenol) is a good over the counter option. Aspirin and certain other pain relievers could increase the risk of bleeding. Be sure to only take medications approved by your doctor.

Avoid strenuous activity and heavy lifting for at least 3 days.

If you discontinued a blood thinner prior to undergoing this procedure, please contact the doctor who sent you for this study to determine when you can safely resume taking this specific medication.

Notify your doctor or report to the ER if you experience and of the following:

- ❖ Fever and/or chills
- ❖ Redness, swelling, draining, or bleeding at the procedure site
- ❖ Worsening pain at the procedure site or elsewhere
- ❖ Chest pain, shortness of breath and/or difficulty breathing

If you have any questions before and following your procedure call the Radiology nurse at 662-293-1404

Date: _____

(Patient Signature)

(Witness)