

# Online Patient Information Breast Fine Needle Aspiration (FNA)

# What is a Fine Needle Aspiration (FNA)?

Your doctor has referred you for a fine needle aspiration (FNA) because a lump or area of breast tissue identified on ultrasound or a mammogram requires further investigation.

A FNA is a procedure where a special needle is inserted into the breast to take a small sample of breast tissue cells or fluid from an area of concern, so that it can be sent to a laboratory for testing. The procedure is performed by a specialist doctor, called a radiologist, using ultrasound to guide the positioning of the needle. The cells are then sent off to be examined by a specialist doctor, called a pathologist, under a microscope. The information from this procedure helps your doctor with a diagnosis, and if necessary, plan treatment you may require. A FNA may not give a definitive answer. It is not always possible to confirm or exclude abnormalities and you may need more tests.

# How long will the procedure take?



The procedure will be performed under ultrasound guidance and the entire procedure usually takes about half an hour, depending on how many samples the radiologist requires to be confident that they have adequate tissue samples. You may be observed for a short time afterwards.

#### Is there any special preparation required?

No special preparation is required; however a breast FNA can be uncomfortable and may be painful. You may wish to ask a relative or a friend to attend the appointment with you if you think that you may need support before or after the procedure, however they will not be allowed to stay with you during the procedure. You may wish for someone to drive you home.

When booking your appointment, it is essential that you inform our staff if you have any allergies, take blood thinning medication, or are pregnant or breastfeeding.

Please list or bring all of your prescribed medications, including those medications that you buy over the counter, including herbal remedies and supplements.

If you take blood thinning medication, you may need to stop taking these for a few days or reduce your dose. It is very important that you do not stop any blood thinning medications or change the dose without consulting with our radiology clinical staff and your own doctor. They will give you specific instructions about when to stop and restart the medication. These drugs are usually prescribed to prevent stroke or heart attack, so it is very important that you do not stop taking them without being instructed to do so by your doctor or our clinical staff, or both. Aspirin is usually not stopped.

A blood test may be required to check your blood clotting on the day before the procedure. You should continue with pain medication and all other medications as usual.

## What do I need to do on the day of the procedure?

On the day of your appointment, please wear a two-piece outfit, as you will need to have your upper body uncovered for the procedure.

On the day of your appointment, please ensure you bring:

- Your referral form (if you have it)
- All previous relevant scans or x-rays
- Medicare and healthcare cards (e.g. DVA card or concession card)
- List of all medications

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### What happens during the procedure?

An antiseptic solution is used to clean the skin, and a sterile drape may be applied to the area to reduce the risk of infection. The procedure may involve the injection of local anaesthetic into the skin to reduce or prevent pain by numbing the surrounding skin, but it will not put you to sleep. The use of the local anaesthetic will be determined by the radiologist.

Under the guidance of ultrasound, the radiologist will place a fine needle (similar to that used to take a blood sample) into the breast lesion to collect some fluid or cells. It is common for two to three samples to be collected.

At the end of the procedure, a small waterproof dressing will be placed over the area and an ice pack may be applied to assist in reducing bruising.

#### Are there any after effects from the treatment?

Any discomfort after the FNA can be relieved with simple 'over the counter' painkillers, such as paracetamol.

Bleeding or bruising is more likely if you take blood thinning medication or fish oil supplements. This can be minimised by good compression and the application of an icepack on the skin at the site of the FNA.

A breast FNA does not leave a scar on the skin and there is a low risk of infection.

### What happens after the procedure?

Our staff will provide you with clear written instructions on ways to look after yourself following an FNA. This includes information such as, avoiding strenuous activity for a few days, arranging a follow-up appointment with your referring doctor and how to look after the FNA site.

#### What are the benefits?

If there is an area of concern in your breast, FNA samples of this area are taken for examination by a pathologist. FNA is a quick and simple procedure to investigate a breast lesion and gain accurate information without the need for an operation to surgically remove the tissue for testing.

Breast FNA can be used when other needle biopsy procedures are not possible; for example, if you are using anticoagulant medication, have an allergy to anaesthetic or have a breast implant.

#### Are there any risks?

In referring you for this procedure, your doctor believes that the benefits of this procedure for you are greater than the risks. There are some risks and complications associated with a FNA. The use of ultrasound to guide the procedure minimises these risks.

- Bleeding or bruising at the site can occur and it may take several weeks for this to disappear. It is more likely if you take blood thinning medication or fish oil supplements.
- Everyone has an individual pain threshold so tell our nurse or specialist doctor, the radiologist, if you
  feel pain during the FNA.

If you sometimes faint during medical procedures, please tell the radiologist before the FNA starts. Some people may have an allergy to injected drugs (e.g., local anaesthetic), or the procedure may not be possible due to medical and/or technical reasons. There is a very small risk of infection; in the unlikely event that this occurs, it can be treated with a course of antibiotics.

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Before the FNA, the radiologist will discuss the procedure with you in detail, including any risks specific to you. You will be provided with the opportunity to ask questions. It may be necessary to do a formal consultation to ensure this procedure is the most appropriate for you.

#### When do I get the results?

The radiologist will send a report outlining the procedure to your referring doctor (this could be your family doctor, a breast surgeon or a breast physician) and your regular GP. It is important that you make a follow-up appointment with your referring doctor so that they can discuss the results with you.

The pathologist who studies the FNA samples will provide a detailed report to your referring doctor. The pathology results are usually available and sent to your doctor within 3 days. Usually your doctor will already have made arrangements to discuss the results with you.

#### I still have questions, who can I ask?

Medical information can be complex, and you may receive information that you do not fully understand. It is important for you to consider the risks and outcomes of the procedure as well as your personal needs before making a decision to undergo the procedure.

If you have read this online information and are still unsure if this is the correct procedure for you; before making a booking, you should discuss your questions or concerns with your referring doctor in the first instance. Your regular GP and/ or your family may also be a useful resource. Your referring doctor can answer questions about the risks and benefits of not having the procedure and other options for treatment.

If you have questions before your appointment about what is involved on the day, our staff would be happy to assist. Please contact the imaging centre where you have made your appointment.