Understanding the Procedure
Your physician has recommended that you undergo a stereotactic breast biopsy. Understandably, you have questions regarding this procedure. This pamphlet will answer many of your questions. It will help you understand why the procedure is necessary and what to expect.

Why do I need a Stereotactic Biopsy?
Probably by now your physician has explained to you that your mammogram has revealed an abnormality in your breast. In the past, these abnormalities, or lesions, were treated in one of two ways. Either they were “followed” over a period of time by the physician to see if there was a significant change, or the patient had surgery to remove the lesion completely (surgical excisional biopsy).

However, a large percentage (about 80 per cent) of these abnormalities are benign and present no health risk to the patient. For this reason, the technology of stereotactic breast biopsy was developed. Physicians agree that the stereotactic breast biopsy is a less painful, less invasive way to obtain the tissue sample needed for diagnosis. This procedure requires much less recovery time than does an excisional biopsy, and there is no significant scarring to the breast.

How is the Stereotactic Biopsy performed?
The procedure will be performed by a physician with help from a radiologic (X-ray) technologist. Before you arrive, the physician will have studied your mammogram to become familiar with the location of the abnormality. After checking in, you will be asked to change into a hospital gown. The physician will ask you to sign a consent form. In the biopsy room, the technologist will ask you to lie on your side on a stretcher.

The first part of the procedure will seem much like your mammogram, except that you are lying down instead of standing up. Your breast will be compressed with a compression paddle, just as it was during your mammogram. A confirming X-ray will be taken to ensure that the area of the breast containing the lesion is correctly centered in the paddle window. When the position is confirmed, two stereo X-rays will be taken. They are called stereo images because they are images of the same area from different angles. With the help of a computer, the exact positioning of the biopsy needle is determined from these stereo images.

Using this information, the physician will then position the device which holds the biopsy needle for the correct angle of entry. Next, the physician will numb the biopsy area by injecting a local anesthetic into your breast. This will be done with a very tiny needle and you may feel a slight sting in your breast at the injection sight.

After the local anesthetic has taken effect, the physician will insert the biopsy needle into your breast. Another set of stereo X-rays will then be taken to ensure proper needle placement. Once placement is confirmed, the physician will tell you to hold very still while the tissue samples are acquired. When the physician has retrieved all the samples, the compression paddle will be released from your breast. The physician will then apply pressure to the biopsy site for five to ten minutes to prevent bleeding. Afterwards, a dressing will be applied which you will wear home. You will then be given some post-procedure care instructions.
Will it hurt?
Because the physician uses a local anesthetic, there is only a small amount of pain during the procedure. However, as individuals, each of us has a slightly different pain threshold. Most patients occasionally report that they feel pressure or a slight discomfort in the biopsied area, as the procedure is being done.

Will I be able to resume my normal activities right away?
After the technologist or physician has applied a dressing to the biopsy site, you may get dressed. Most women feel fine after the procedure and return to their normal routine right away. However, we recommend that strenuous exercise or activity be avoided for 24 hours. We recommend that you go home after the procedure, put your feet up, and simply relax.

What instructions should I follow after the biopsy?
The physician performing the biopsy will give you instructions for your biopsy aftercare. These instructions will be specific to your individual case.

When can I expect the results of my biopsy?
The physician performing the biopsy will send the tissue sample to a pathologist who will look at it under a microscope. The pathologist will examine the tissue and send a report to the referring physician within a few days. Your referring physician will contact you to discuss your results.

What if I have more questions?
Our staff feels it is very important that all of your questions about the biopsy procedure are answered and that you have all the information you need. If you have additional questions or concerns that are not addressed in this pamphlet, please don’t hesitate to ask the technologist or physician who will perform your procedure.

If you have any questions or concerns, please contact the Diagnostic Imaging Department at 416-431-8107 (General campus).