

PATIENT INFORMATION

BONE BIOPSY UNDER CT GUIDANCE



This leaflet tells you about the bone biopsy procedure and explains what is involved and any possible risks associated with the procedure. It is not meant to replace informed discussion between you and your doctor, but can act as a starting point for such a discussion.

If the bone biopsy is being undertaken as a pre-planned procedure, then you should have already discussed the procedure with your consultant.

What is a bone biopsy?

A bone biopsy is a minor procedure performed under x-ray guidance in the CT scanner room. The x-rays show the Radiologist exactly where to place the special bone biopsy needle. A small sample of abnormal bone is then removed. The bone sample is sent to the laboratory for a formal diagnosis to be made. You need to be aware there is a small chance of the result being inconclusive, meaning no diagnosis can be made. Your referring Doctor will be in touch should this be the case.

Who has made the decision?

Your consultant will have decided this is the best option for you. Having a biopsy will help your consultant to make a correct diagnosis so that you can get suitable treatment. Your doctor will have explained to you what they want to be biopsied and why. However, you will also have the opportunity for your opinion to be considered, and if, after discussion with your doctors, you do not want the procedure carried out, you can decide against it.

Who will be doing the bone biopsy?

A specially trained doctor called a radiologist. Radiologists have special expertise in using X-Ray and scanning equipment, and also in interpreting the images produced. They will look at these images while carrying out the procedure.

Where will the procedure take place?

In the X-Ray department in the CT scanner room.

How do I prepare for a bone biopsy?

You need to be an inpatient in the hospital. You can eat and drink as normal. You need to have a needle put into a vein in your arm in case you require any medicines during the procedure. You will be asked to put on a hospital gown.

Prior to admission we will arrange for you to have some simple blood tests.

Your normal medication

We will usually ask you to continue with your normal medication (except as instructed below) during your stay in hospital, so please bring it with you.

Aspirin/Dipyrimadole

If you are taking these medicines regularly, please stop 5 days before the procedure unless you have a high risk indication. e.g. have had a cardiac stent inserted within the last twelve months.

Clopidogrel, Prasugrel, Persantin, Clexane,

If you are taking any of these regularly, please ring the Imaging department on the numbers provided below.

We will need to know why you are taking this medication and discuss this with you.

You will need to stop taking these prior to your procedure, but this should only be done after discussion with the referring clinician.

Warfarin, Dabigatran, Rivaroxaban, Edoxaban, Apixaban

If you are taking any of the above, it may need to be stopped prior to the procedure and alternative medication should be arranged with your referring Clinician. Please ring the booking coordinator on 01527 503030 asking for extension 44603. We will need to know why you are taking this and what your target INR is.

If you don't feel well and have a cough, a cold or any other illness when you are due to come into hospital for your investigation, we will need to know. Depending on your illness and how urgent your investigation is, your procedure may need to be delayed.

What happens during a bone biopsy?

You will be transferred to the X-Ray department on your bed, by a porter and accompanied by a nurse from the ward. You will be taken into the procedure room by the nurse. A nurse and a doctor will be with you at all times. The biopsy procedure is performed under local anaesthetic (you are awake, but will only feel minimal discomfort). You might be given a strong pain killing injection into a muscle; and a sedative medicine into a vein to make you drowsy.

The radiographer will position you to make the biopsy as easy as possible. The nurse will check your blood pressure and pulse throughout the procedure. They will make sure that you are as comfortable as possible. The x-ray machine or CT scanner, used to guide the doctor, will pass over you but will not touch you. The biopsy is performed through the skin and directly into the bone. A special bone biopsy needle is used to take the biopsy. You will have a small dressing over the biopsy site afterwards. No stitches are required.

A bone biopsy is very quick. The whole procedure will take around 30 to 45 minutes plus safety checks and preparation (total 1 hour).

Will it hurt?

Unfortunately, it may hurt a little, for a very short period of time, but any pain you have can be controlled with painkillers.

The local anaesthetic will sting to start with, but this soon wears off and the skin and deeper tissues should then feel numb.

What happens afterwards?

You will be taken back to your ward on your bed. Nurses on the ward will carry out routine observations, such as taking your pulse and blood pressure, to make sure that there are no problems. You will generally stay in bed for a few hours, until you have recovered.

Are there any risks or complications?

Problems from a bone biopsy are rare, but the following can occur.

- There may be mild discomfort (aching) around the biopsy site for the first few hours after the procedure. This discomfort is usually well controlled with simple tablets like paracetamol, if suitable for you (follow the instructions on the pack). More severe, stronger pain killers can be obtained from your referring doctor or GP.
- There is a very small chance of skin or bone infection. If these happen, then this will be treated with antibiotics.
- There is a small risk of bleeding after the biopsy. The biopsy needle is very small. Some medications, as well as some bone tumours or other bone conditions, can increase the risk of bleeding after a biopsy. This is why you will need to stay in hospital for at least four hours after the procedure, so the nurses can keep an eye on you. There may be bruising around the biopsy area, but serious bleeding is very rare.
- There is a very small chance that the biopsy needle may break (fracture) the bone or injure a nerve, blood vessel, or organ near the biopsy site. This is rare and may be related to the bone problem. If this happens, then your doctor will advise you about it and whether any other treatments are necessary.
- Inadequate sampling. We might have to repeat the procedure in the near future if the samples are non-diagnostic or inadequate for all tests.
- Death. Rare.

Some of your questions should have been answered by this leaflet, but remember that this is only a starting point for discussion about your treatment with the doctors looking after you.

Other sources of information:

Additional Information

The following internet websites contain information that you may find useful.

- www.worcsacute.nhs.uk
Worcestershire Acute Hospitals NHS Trust
- www.patient.info
Information fact sheets on health and disease
- www.rcoa.ac.uk
Information leaflets by the Royal College of Anaesthetists about 'Having an anaesthetic'
- www.nhs.uk
On-line health encyclopaedia
- www.bsir.org
British Society of Interventional Radiology – patient information

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.