

## Interventional Bone Biopsy

Your doctor would like you to have a Bone Biopsy and has arranged for you to visit our department. We would like your visit to be as pleasant as possible and hope this leaflet will answer some of the questions you may have. Should you have any questions regarding your appointment please contact us on the appropriate telephone number below:

Eastbourne DGH Appointments: 01323 414917  
Conquest Hospital Appointments: 0300 131 4500 ext. 147422

### What is a Bone Biopsy?

Imaging tests will have shown there is an abnormality in one of your bones. A biopsy is a way of taking a small piece of tissue out of this abnormal area, using only a tiny incision, so that a pathologist, an expert in making diagnoses from tissue samples, can examine it under a microscope. Because this biopsy is done through the skin, it is called a percutaneous biopsy.

### Who will be doing the bone biopsy?

A specially trained doctor called an interventional radiologist. They have particular expertise in performing procedures under image guidance. There will also be at least one specially trained nurse and a radiographer in the room during the procedure.

### Where will the procedure take place?

This procedure will take place in the angiography suite within the x-ray department. This is similar to an operating theatre into which specialised x-ray equipment has been installed.

### How do I prepare for a bone biopsy?

You will need to be admitted to hospital either as a day case or for an overnight stay.

- For **morning admissions, please do not eat or drink anything from midnight** – you can drink water for up to four hours before the procedure.
- For **afternoon admissions**, you may eat a light breakfast but **please do not eat anything after 6am** – you can drink water for up to four hours before the procedure.

Take your medicines as normal, with a sip of water, unless your doctor or nurse tells you not to.

**If there is a possibility you could be pregnant, please inform the radiology department before the procedure.**

If you have any allergies, you must let your doctor know. You must also tell your doctor if you have previously had a reaction to intravenous contrast medium, the dye used for certain x-rays and CT scanning.

**If you are taking warfarin or any other blood thinning medication, please call the interventional radiology department.**

### What actually happens during a bone biopsy?

Before the procedure, the interventional radiologist will explain the procedure and related risks and ask you to sign a consent form. Please feel free to ask any questions that you may have,

and remember that even at this stage, you can decide against going ahead with the procedure if you so wish.

You will be asked to get undressed and put on a hospital gown. A small cannula (thin tube) will be placed into a vein in your arm so that the radiologist can give you a sedative or painkillers should this be necessary. Once in place, this will not cause any pain.

You will lie on the CT, ultrasound or scanning table, in the position that the consultant radiologist has decided is most suitable.

The radiologist will keep everything sterile and may wear a theatre gown and operating gloves. Your skin will be cleaned with antiseptic and you will have some of your body covered with a theatre towel.

The radiologist will use the ultrasound machine or the CT scanner to decide on the most suitable point for inserting the biopsy needle. Your skin will be anaesthetised with local anaesthetic and the biopsy needle inserted into the abnormal tissue. While the first part of the procedure may seem to take a while, actually doing the biopsy does not take very long at all and the needle may be in and out so quickly that you barely notice it.

### **What are the potential risks?**

Bone biopsy is a safe medical procedure, but there is always a small risk of complication.

- There may be bruising around the biopsy area due to bleeding into the skin. This should not be painful and will heal.
- There is a very small chance of a skin infection or that the bone will become infected (osteomyelitis) or will not heal well. In rare cases, the bone may become weak and break (fracture) at a later time.
- Unfortunately, not all biopsies are successful. This may be because, despite taking every possible care, the piece of tissue which has actually been obtained is normal tissue rather than abnormal. Alternatively, although abnormal tissue has been obtained, it may not be enough for the pathologist to make a definite diagnosis.

### **Will it hurt?**

When the local anaesthetic is injected, it will sting to start with, but this soon wears off and the skin and deeper tissues should then feel numb. After this, the procedure should not be painful.

There will be a nurse, or another member of clinical staff, in the interventional suite and looking after you. If the procedure does become uncomfortable for you, then they will be able to arrange for you to have some painkillers through the needle in your arm.

### **How long will it take?**

Every patient's situation is different and it is not always easy to predict how complex or how straightforward the procedure will be. As a guide, expect to be in the x-ray department for about an hour altogether.

### **What happens afterwards?**

You will be taken back to your ward on a trolley. 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. They will also look at the skin entry point to make sure there is no bleeding from it. You will generally stay in bed for a few hours, until you have recovered.

You will most probably be allowed home on the same day, but sometimes need to stay in hospital overnight. You will not be able to drive yourself home but should arrange if possible to be collected.

The results take 7-10 days to process and will go to your consultant or GP.

## What should I do when I go home?

When you get home you should:

- Rest for a minimum of 24 hours and if possible do not go to work on the day after the procedure.
- It is recommended that someone stays with you overnight, particularly if you had sedation.
- Continue with your normal medication as prescribed, and pain relief if necessary. If you take anticoagulants, restarting these will be discussed with you before you are discharged.

## What do I do if I have a problem at home?

If you have severe pain, swelling or are concerned please go to your nearest emergency department.

## Sources of information

British Society of Interventional Radiology

## Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

## Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: 0300 131 4500 Ext: 734731 or by email at: [esh-tr.patientexperience@nhs.net](mailto:esh-tr.patientexperience@nhs.net)

## Hand hygiene

The Trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

## Other formats

**If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.**

**Tel: 0300 131 4500 Email: [esh-tr.AccessibleInformation@nhs.net](mailto:esh-tr.AccessibleInformation@nhs.net)**

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

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## Reference

The following clinicians have been consulted and agreed this patient information:

Dr Mo Faris, Consultant Interventional Radiologist, ESHT

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The directorate group that have agreed this patient information leaflet:

Diagnostics, Anaesthetics and Surgery Division

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