Ultrasound Guided Core Needle Breast Biopsy

What is Core Needle Breast Biopsy?
Ultrasound imaging or sonography uses sound waves to produce pictures of the inside of the body. Ultrasound exams do not use radiation. A radiologist uses ultrasound guidance to sample a breast mass. Once the sample is obtained it is sent to an independent pathologist to determine a diagnosis.

CPT Codes
19081 Stereotactic guidance
19083 Ultrasound guidance
19085 MRI guidance

Indications
Abnormal breast mass detected with breast ultrasound, or palpable abnormality.

Contraindications
Current Aspirin, Ibuprophen, Warfarin, or Heparin uses are relative contraindications and will be discussed with the patient prior to the procedure.

How Does The Patient Prepare?
Warfarin or heparin therapy should be discontinued seven (7) days prior to the biopsy. Ibuprophen or aspirin therapy should be discontinued three (3) days prior to the biopsy. Referring physician should have the following blood work drawn within 24 hours prior to the biopsy: PT, PTT and INR. Patient should wear a loose-fitting, two-piece outfit. She does not need a driver. She should plan to be off work the day of the procedure, but can return to normal activities the following day.

What Happens During the Test?
The patient will be asked to disrobe from the waist up and will be provided a gown or blanket. She is positioned lying face up on the examination table. The radiologist will use ultrasound guidance to view the breast mass. The patient’s breast will be cleansed with antiseptic soap. The skin and tissue around the mass will be numbed with lidocaine. A guide needle is placed next to the mass and several (5 to 10) samples are taken with a spring loaded biopsy needle. The needle will be removed and a small marking clip will be placed in the area biopsied, which will identify the site for future reference. The patient’s skin will be covered with either dermabond or steri-strips to protect the biopsy site and promote healing. Following the procedure, a mammogram is performed to ensure proper placement of the clip. The procedure takes approximately 60 minutes to complete.

After the Test
The patient will be sent home with an ice pack, steri-strips, and post-procedure instructions. The site will be tender for a few days and bruising will likely be present. Most women experience a mild to moderate ache, which is usually controlled by an ice compress and acetaminophen. She should not engage in any strenuous activities and get plenty of rest. She may bathe the morning after the biopsy, being careful not to soak or scrub the biopsy site.
When to notify us:
1) If she is bleeding 24 hours after the biopsy. Some blood should be present on the bandage at first, but it should decrease throughout the day. If a constant flow of blood occurs, apply firm pressure to the site for 15 to 20 minutes. Call us if the condition persists.
2) If there are signs of infection in the first two weeks. This would include a whitish discharge, increasing redness, swelling of the skin, or fever. While some redness at the site is normal, she should be aware of these changes.

**The Results**

Samples are sent to an independent pathologist. Referring physicians are contacted by phone if a surgical referral is needed. In addition, a signed report will be sent to the physician within 24-48 hours.

(Information adapted from www.radiologyinfo.org and Dr. Jill Westercamp)

This information is intended for use as merely a guideline for referring physicians and their staff members only. It contains information pertaining to the most commonly ordered exams and indications. However, Shawnee Mission Medical Center Radiology does not recommend any particular examination. Individual radiologist preference or patient circumstances may dictate ordering alternative studies. Although contrast codes are not needed to place an order, the following contrast codes may be used in placing orders:

CT Contrast Q9967, MRI contrast A9577 and A9579.