

General Surgery

Muscle, Temporal Artery and Lymph Node Biopsy

Introduction

You have been referred for a biopsy by the medical team (e.g. Rheumatology, Neurology or Haematology) caring for you, to enable them to find out more about your condition.

A biopsy is a procedure where a small sample of tissue is taken and examined in the laboratory. The biopsy is carried out by a surgeon and is usually performed as a day case procedure. You will be in hospital for a few hours and discharged home when the surgical team looking after you decide that it is safe to do so.

Why do I need this operation?

The medical team consider that a tissue biopsy is necessary in order to establish the best treatment plan for your condition. The tissue removed will be examined in the laboratory and the results will take from 7 days up to a month. The specialists caring for you will then consider the results and decide on the most appropriate treatment plan.

Consent

You will need to consent to this procedure once the risks and benefits have been explained to you

Anticoagulants (blood thinning medication)

Please note: If you are on this type of medication it may need to be stopped for some time before the biopsy. It is very important therefore if you are taking any medication which affects blood clotting such as Warfarin, Clopidogrel, Aspirin etc, that you inform your doctor or medical team as soon as possible before your biopsy.



How is the procedure carried out?

- Most biopsies are carried out using a local anaesthetic which is administered via an injection into the area to numb it. You may feel some pain for a few minutes until the area goes numb. In a few cases, sedation or a general anaesthetic may be considered necessary – this will be discussed with you. This might require a longer stay on the ward, usually half a day, for you to recover so that it is safe for you to be discharged.
- The required tissue will be taken and the incision will be closed with stitches. The length of the incision will vary from half to two inches. You will be informed when the stitches are to be removed or whether they will dissolve (this usually takes about two weeks)

What to expect afterwards

- You will return to the ward to recover from the anaesthetic
- You will be discharged when you are medically fit
- You are advised to have a responsible adult accompanying you home and staying with you for 24 hours after operation
- You will be given instructions with regard to suture removal at your GP practice
- You will also receive instructions on wound care before you leave hospital
- The wound should be kept dry for a few days
- You will have some discomfort and pain from the wound which can be treated with your usual painkillers e.g. - paracetamol, ibuprofen, codeine
- Your GP doctor will be informed about the operation as well as advice on suture removal

Complications

Complications are rare but can include:

- Bleeding, bruising and wound haematoma
- Wound infection
- Numbness around the wound
- Scarring

Patient Information

- Collection of fluid under the skin (seroma formation)
- Leaking of fluid from the wound (lymph fistula)
- Prolonged pain in the wound

Please contact your GP if you experience any of these or if you think you need urgent care you should attend your nearest Accident & Emergency department.

Results

The results will be sent to the medical team who have requested the biopsy. You should have a follow-up appointment to discuss the results and treatment plan.

If you need any further information please ask the medical team caring for you.

The Trust has access to interpreting and translation services. If you need this information in another language or format please ask and we will do our best to meet your needs.

The Trust operates a smoke free policy

Document History

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