

About Breast Biopsy

Breast cancer is often first suspected when a lump is felt during a clinical breast exam or an abnormal area is found on a mammogram. Follow-up tests, such as a diagnostic mammogram or ultrasound imaging, can provide additional information about suspicious lesions. However, to make a definite diagnosis of breast cancer, cells or tissue must be removed from the abnormal area of the breast. They are then examined under the microscope. The procedure that removes the cells or tissue is called a biopsy.

Answers to the following questions will help you understand the procedures involved.

Q: Where will the procedure take place?

A:

Q: What type of biopsy will I have? Why do you recommend this type? Will the entire lump be removed or just part of it?

A:

Q: Can the lump be aspirated (fluid or cells removed with a needle) with a needle? How reliable is a needle biopsy?

A:

Q: How long will the biopsy or aspiration take?

A:

Q: Can the biopsy be done on an outpatient basis? Will I be awake? What will I feel during the procedure?

A:

Q: What medications should I avoid before the biopsy and for how long? When can I resume my usual medications?

A:

Q: Will the biopsy scar be visible?

A:

Q: Are there any aftereffects of a biopsy? If so, what are they? (i.e., tenderness, pain, numbness along the scar). What problems should I report?

A:

Q: When will I be able to return to my normal routine? (i.e., drive, go back to work, do household chores).

A:

Q: After the biopsy, how soon will I know the results?

A:

Q: If cancer is found, who will talk with me about my treatment options? When must I make a decision on my treatment choices?

A: