



For more information please visit us online at: <http://www.osmh.on.ca/diagnostics/>

If you or your support person do not clearly understand the procedure, please ask for clarification



LYMPH NODE BIOPSY

What is it?

A biopsy of a Lymph node may be requested by your Health Care provider. This can be done by either fine needle aspiration (FNA) or core biopsy. The procedure involves removing a small sample of cells or tissue from a lymph node using ultrasound guidance. Cells/tissue are removed through a small, hollow needle. The sample is sent to the lab for analysis. Results generally take 7-10 days.

You might notice a lump in your neck, underarm or groin area. Your healthcare provider can order this procedure to take a sample from the lymph node to test for abnormalities like infection or cancer.

Why do I need it?

Your ordering provider may order a biopsy in order to¹:

- Examine tissue for disease based on body imaging.
- To determine if the abnormal tissue is benign (non-cancerous) or malignant (cancerous).



HOW IS THE PROCEDURE PERFORMED?

Before

For specific questions regarding the clinical need for this procedure, please contact your ordering provider.

Patient Preparation:

You should wear loose-fitting clothing that is easy to change out of. You may want to arrange for someone to drive you home after the procedure. One support person (spouse, friend, caregiver, family member) may accompany you on the day of your appointment, but not into the procedure room.

Please bring a list of the medications you are currently taking and a list of any drug/medication allergies you may have.

You can eat and drink normally before the procedure. You may take your usual medications prior to the procedure. See next page if you take blood thinners.

Please phone the Diagnostic Imaging booking line at **705-325-2201 ext. 3505** for cancellations or rebooking if you are unable to attend your appointment.



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Bloodwork³

Bloodwork is **usually not needed** for this procedure.

However, it is required if you:

- Take Warfarin (Coumadin®)
- Have **prolonged bleeding**, risk of **thrombocytopenia** or **known thrombocytopenia**

If the above applies to you then your doctor will order:

- INR (must be ≤ 2.5 , ≤ 2.0 for ports or tunneled catheters)
- PTT
- CBC (platelets must be $\geq 20 \times 10^9/L$ or greater)

The bloodwork results must be current within **4 weeks of the procedure**.

If you take Warfarin (Coumadin), you'll need a new INR drawn **the day before** your procedure.

Important: Missing bloodwork may delay or reschedule your appointment.

Blood Thinners / Anticoagulants / Antiplatelets Medications³

Stop the listed medications as per the below schedule before your procedure unless instructed otherwise. If unsure, then consult your doctor or healthcare provider about which medications to pause, for how long, when to restart them, and any concerns you may have.

Medication	Withholding	When to Stop	Restart After
Coumadin® (Warfarin)*/**	Based on INR	Based on INR	NA or same day re-initiation for bridged patients
Cangrelor (Kengreal)	Yes	Defer procedure until off medication; if procedure is emergent, withhold 1 h before procedure	multidisciplinary decision making
Abciximab (ReoPro)	Yes	Withhold 24 h before procedure	multidisciplinary decision making
eptifibatide (Integrilin) tirofiban (Aggrastat)	Yes	4–8 h before procedure	multidisciplinary decision making
* consider bridging with heparin (need admission) for high thrombosis risk cases			
** consider using reversal agent if emergent or STAT			

Important Notes

- Patients on Warfarin (Coumadin®) need an **INR** test the **day before** the procedure.
- Those with **prosthetic valves**, **prior clots**, or **stroke-related atrial fibrillation** may need bridging therapy to prevent thrombosis.
- **Do not** stop blood thinners if you have **coronary or brain stents**—consult your doctor first.
- If anticoagulation is stopped, your doctor must provide instructions.
- Applies only to elective procedures, not emergencies.



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Coming to The Hospital

You must first sign-in with **Centralized Patient Scheduling & Registration (CPSR)**, which is located immediately to your left when you enter the hospital from the main entrance (off Dunlop Street, across from the gift shop). You will receive a patient wristband and be directed to the **Diagnostic Imaging department**.

Please bring to the hospital your OHIP card and a list of current medications you are taking.

During

Lymph node biopsies are done in the Interventional Radiology Department or Ultrasound Department of Diagnostic Imaging.

The duration of your appointment time will vary from 30 minutes – 60 minutes.

1. You will change from above the waist into a hospital gown.
2. A technologist will explain the procedure and answer any questions you have.
3. You will lay on a table or stretcher and will be awake for the procedure. The process takes about 20 to 30 minutes.
4. This is an aseptic procedure; the area to be biopsied will be aseptically cleaned and sterile drapes applied.
5. A radiologist will inject a numbing agent, called Lidocaine, at the biopsy site. This freezes the area of the biopsy. This should be the only pain or discomfort during the procedure.
6. The radiologist will use ultrasound to guide the biopsy needle and take samples.
7. A bandage is applied once the biopsy is completed.

Notes / Questions *(write down any notes or questions you may have for your doctor, healthcare practitioner, or the care team in Diagnostic Imaging on the day of your appointment. You can also use this space to write down a list of your current medications):*



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WHAT TO EXPECT AFTER



Recovery & Going Home

You may have some pain at the biopsy site. You may have a small amount of bleeding or bruising from the procedure site. You may take Tylenol (acetaminophen) for the next 48 hours. Follow the directions on the label.



Diet & Activity

- Resume normal activities as you feel able to tolerate them, unless otherwise directed by your doctor or the radiologist performing the biopsy.



Wound Care²

- It is normal to feel soreness in the area of the biopsy for 2 – 3 days.
- Keep a dressing / bandage over the biopsy site for the first day.
- It is important to keep the biopsy site clean and dry for 24hrs.



Bathing²

- You may shower 24 hours after the biopsy, if your doctor says it is okay. Pat the incision dry.
- **Do not** put creams, lotions, or ointments on the biopsy site.
- **Do not** take a bath, swim, or use a hot tub until the biopsy site is fully healed (no longer has a scab).



Medication²

- **If your doctor or healthcare provider advised you to stop any medications for this procedure then consult with them first about the safety of when you can start your medications again;**
- Otherwise, resume your normal medication schedule.
- If you **normally** take acetylsalicylic acid (Aspirin™) or another blood thinner medication, ask your doctor when to start taking it again. Make sure that you understand exactly what your doctor wants you to do;
- Otherwise, **do not** take (Aspirin™) or anti-inflammatory medicines (such as ibuprofen) for one **week** after the biopsy.



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WHEN TO SEEK HELP¹



Call 911:

If you believe you require emergency care – **call 911**. Reasons to call 911 include:

- You have passed out (lose consciousness), or become very dizzy, weak, or less alert
- You experience sudden chest pain and shortness of breath; and/or
- You have severe trouble breathing
- Significant bleeding from the biopsy site (i.e. bright red blood that won't stop)¹
- You have a fast or uneven pulse



Call your doctor, healthcare provider, or Health Connect Ontario immediately if you experience¹:

- Increased pain, swelling, warmth, or redness at the biopsy site
- Redness or warmth around the biopsy site or pus or blood draining from the biopsy site
- A fever (more than 100°F / 38°C)
- Chills, with or without fever
- Bright red blood has soaked through the bandage / dressing over the biopsy site.
- You have new or worse pain at the biopsy site.
- A fast or skipping heartbeat.
- Bruising or swelling at the biopsy site that is getting bigger.
- An upset stomach and you can't keep fluids down (you're throwing them up).
- Difficulty swallowing

Health Connect Ontario may be reached 24-hours a day, including weekends, by:

- Calling 811
- Calling 1-866-797-0007 (TTY – teletypewriter service)
- Visiting <https://healthconnectontario.health.gov.on.ca/> and selecting “Chat with us”

BRING THIS INFORMATION PACKAGE WITH YOU SHOULD YOU URGENTLY NEED TO SEE YOUR DOCTOR OR GO TO THE EMERGENCY DEPARTMENT OF YOUR NEAREST HOSPITAL.

Use this material for your information only. It does not replace advice from your doctor or other health care professionals. Do not use this information for diagnosis or treatment. Consult with your health care provider about a specific medical condition.

References:

1. General Biopsy. RadiologyInfo.org For Patients. Accessed June 27, 2023. <https://www.radiologyinfo.org/en/info/biopgen>
2. Needle Biopsy of the Liver. Accessed June 27, 2023. MyHealth.Alberta.ca Network. <https://myhealth.alberta.ca/health/Pages/conditions.aspx?hwid=hw232128>
3. Patel et al. Society of Interventional Radiology Consensus Guidelines for the Periprocedural Management of Thrombotic and Bleeding Risk in Patients Undergoing Percutaneous Image-Guided Interventions—Part II: Recommendations. JVIR 2019; 30:1168–1184.

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