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- You should have been given an appointment to see the doctor again.
- If you have not heard from the hospital within **10 days** of the biopsy you should telephone the consultant's secretary to make another appointment.

Contact details

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This leaflet can be made available in alternative languages/formats on request.

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Having

A

Lung Biopsy

**Patient Information
Leaflet**

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Your doctor has advised that you need a test called a lung biopsy. This leaflet explains a bit more about it.

Reasons for the procedure

A lung biopsy is a way of getting a sample of tissue from the lungs using a small needle. It helps us to find out what is wrong. You will receive a letter or phone call telling you when and where to report. The biopsy will normally be done within 2 weeks.

Nature of the procedure

- A routine blood test is needed to check that your blood clotting time is within acceptable limits.
- On the day of the procedure you may have a light breakfast before the test – a cup of tea and a slice of toast, for example.
- The doctor you saw in the clinic will have checked your medicines with you. Please ask if you are to take them. **You should NOT be taking medication to thin the blood for 5 days prior to the procedure, such as Warfarin, Aspirin, Dabigatran, rivaroxaban or apixaban . Clopidogrel should be stopped 7 days before the procedure.**

- Some diabetes medication also needs to be discontinued.
- A lung biopsy is done under local anaesthetic – a small injection is used to numb the skin.
- The doctor who performs the test is an x-ray specialist, called a radiologist. An x-ray, computerised tomography (CT) scan, or ultrasound machine is used to let the doctor know exactly where to take the samples from.
- The doctor then gives a local anaesthetic and passes a small needle into the relevant area in the lung and takes some tiny

samples of tissue. The samples are then sent to the laboratory and are examined under the microscope by a specialist called a pathologist.

- It is usually a short procedure, but will take a minimum of 30 minutes.
- After a period of observation on a ward a chest X-ray will be taken before you can go home. Most people are able to go home after a few hours, **but there must be someone to stay with you overnight.**

Please bring an overnight bag with you in case you need to stay in overnight

Benefits of the procedure

Having a lung biopsy helps the doctor to establish your diagnosis. This is important for the doctor to know in order to plan treatment which is appropriate to the diagnosis.

Risks of the procedure

- The risks associated with having a lung biopsy varies from person to person. This would have been discussed with you in clinic before the lung biopsy was requested, based on your individual circumstances.
- It is quite common for a little air to escape into the space around the lung during the biopsy. This may cause the lung to partially collapse. We call this a Pneumothorax. Recent research shows this may happen in around 1 in 5 procedures.

- Usually a Pneumothorax is small and does not cause any problems. Rarely, (in up to 3 out of 100 procedures), a lot of air leaks out and causes a big Pneumothorax. If that were to happen then we would treat it by either:
 - sucking the air out again with a needle (this is called aspiration)
 - or by putting in a tube to let the air out (the tube is called a chest drain). If this happened you would probably have to stay in hospital for a day or two.
- It is quite normal to cough up some streaks of blood at the time or for a day or two after the procedure. Very rarely a more significant bleed can occur, **in which case you should contact your GP or Accident & Emergency Department.**
- Most people have no problems.

If you suddenly become short of breath or have severe chest pain, this may mean that there has been an air leak (a Pneumothorax) You need to go to the Accident & Emergency Department.

Discomforts of the procedure

The procedures should not be painful at the time it is carried out. Some people have a bit of pain afterwards once the anaesthetic has worn off. If you do have any pain you can take a painkiller like paracetamol (up to 2 tablets, 4 times a day).

Alternatives to the procedure

There are limited alternatives to the procedure. If thought appropriate, your doctor may have previously arranged a test called a Bronchoscopy. A Bronchoscopy examines the central airways. However, this test has limitations and is not always

appropriate if the abnormal area in the lung is beyond the reach of the bronchoscope.

Consequence of not having the procedure

If you choose not to have the lung biopsy you may experience delay in establishing a diagnosis. This can cause delay in starting treatment of your illness. Diagnostic uncertainty may also increase your anxiety.

General Questions

Can I drive after the biopsy?

- Someone must drive you home after the test.
- You should be able to drive again the next day if you feel well.

Are there any problems flying in an aircraft after a biopsy?

- Normally you should **Not** fly for 6 weeks.
- If you wish to fly in less than 6 weeks please discuss this with your hospital doctor.

When can I go back to work?

You should be able to go back to work the day after the lung biopsy, unless advised otherwise. However, light duties **Only** must be undertaken for several days following the procedure.

When will I get the results?

- It can take up to a week for the results to come back to the doctor who asked for the test.