

CT: Guided Lung Biopsy

About your procedure

This handout explains a CT-guided biopsy of the lungs. It includes how to prepare for it, what to expect during and after your procedure, and how to get your results.



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What is a CT-guided lung biopsy?

CT stands for *computed tomography*. A CT scan uses a special X-ray machine to take detailed pictures of the body's organs and tissues.

A *needle biopsy* is the safest and easiest way to remove lung tissue from the body. To do a needle biopsy, the radiologist will insert a needle through your skin and into your tissue. A syringe or an automated needle may be used to take the tissue sample. This sample will be sent to the lab for evaluation and diagnosis.

How does it work?

You will lie inside the CT machine for the scan. Many X-ray beams will be passed through your body as the X-ray tube revolves around you.

The machine will take pictures from many angles, forming cross-section images (*slices*) of the area. Your doctor will view the pictures on a computer.

During a CT-guided biopsy, you will need to hold still on the CT table for up to 1 hour or more.

How should I prepare?

- If you have diabetes and take insulin, talk with the provider who manages your diabetes. You may need to adjust your insulin since you will not be able to eat for 6 hours before the scan.
- If you normally take aspirin or other *anticoagulant* medicine (blood thinners), follow the instructions for **not** taking it that the Imaging Services scheduling staff gave you. They have checked with our clinic doctors about taking blood thinners before your biopsy.
- Plan for a responsible adult to drive you home after your procedure.
- Tell your provider if you are pregnant.

On the Day of Your Procedure

At Home

- Eat your usual diet
- Except for insulin and blood thinners, take your other regular medicines as prescribed, unless your provider or the radiology clinic staff has told you otherwise.
- Check with your driver. Make sure they can take you home after your procedure.

At the Hospital

- We will ask you to change into a hospital gown for your procedure. All of your belongings will stay with you during your visit.
- You may be asked to remove hairpins, jewelry, eyeglasses, hearing aids, and any removable dental work that could affect the images.
- If there is any chance you may be pregnant, tell the radiologist or CT technologist **before** the scan begins.
- The radiologist who does the procedure, or an assistant, will explain this procedure to you in detail before your biopsy begins. They will describe how the biopsy is done, explain possible problems, and give you instructions and self-care tips for after your procedure. Be sure to ask all the questions you may have.
- You will need to sign a consent form that says you understand what you talked about and that you agree to have this procedure.
- We will check your kidney function before your procedure. If needed, you will receive fluids through the *intravenous* (IV) line that was started before your scan.



A CT technologist will help you get into position on the CT table.

How is the CT-guided biopsy done?

- First, the Radiology nurse will insert an IV line into a vein in your hand or arm. You may receive fluids or medicine through the IV during your procedure. We may also give you a mild *sedative* (medicine to help you relax) through your IV before your biopsy.
- The CT technologist will help place you on the CT table. We will place pillows to help you hold the correct position during your scan.
- We will use the first few scans to confirm the biopsy area and the safest way for us to reach this area.
- We will then mark the needle insertion site on your skin. We will scrub and disinfect your skin around the insertion site, and put a sterile drape over the area.

- Then we will inject a local *anesthetic* (numbing medicine) at the insertion site. This will numb the area so you do not feel the incision or the biopsy needle.
- Then, a small incision will be made in your skin. The biopsy needle will be inserted through this incision.
- You will be asked not to move or cough during your procedure. You may also be asked to hold your breath at different times. You must try to hold your breath each time you are asked to. It will ensure that the needle is getting tissue from the right area.
- Your doctor will use the CT image to guide the needle to the correct site and remove a small amount of tissue. Several tissue samples may be needed.
- After all the samples are taken, the needle will be removed.
- After any bleeding has stopped at the incision site, we will place a bandage over it. Bleeding will be minor and you will not need stitches.
- After your biopsy, you will go to the limited-stay area. There, you will be monitored to make sure there are no problems. Most patients are monitored here for 4 or more hours before they leave.

What will I feel during the procedure?

- When you receive the local anesthetic, you will feel a slight pin prick from the needle.
- You may feel a burning sensation as the medicine is injected and takes effect. The area will become numb in a short time.
- You may feel some pressure from the doctor's hands or from the biopsy needle itself.
- When the needle enters your lung, you may need to start coughing and some blood may come out of your mouth. This is normal, and usually it is not painful. It should stop after a few minutes.

What should I expect after the procedure?

- Most times, you may remove your bandage the day after your biopsy.
- You may also bathe or shower as normal the day after your biopsy.
- For 24 hours after your biopsy, do **not** do heavy physical exercise such as heavy lifting, a lot of stair climbing, or sports.
- You may return to your normal activities 2 days after your biopsy if you feel up to it.
- If you plan to travel by air within 24 hours after your biopsy, talk with your radiologist.

- Your biopsy site may be sore as the local anesthesia wears off, but it should get better 12 to 48 hours after your procedure.
- You may also cough up a little blood, especially if you are on blood-thinning medication. This should be very minor if you did not cough up blood during your biopsy. This symptom will slowly ease 12 to 48 hours after your procedure.

Who interprets the results and how do I get them?

The radiologist will send a detailed report to the provider who referred you for the biopsy. It may take a few days to a week, or more, for your provider to get these results. Your referring provider or nurse will talk with you about your results.

You may also read your results on your MyChart page. If you need copies of your images on disc, call 206.598.6206.

You and your provider will decide the next step, such as treatment for a problem, as needed.

Urgent Care

Call 911 and go to the nearest emergency room right away if you have any of these symptoms:

- Severe bleeding that will not stop, even after you apply pressure to the procedure site
- Chest pain
- Trouble breathing
- Slurred speech
- Balance problems or trouble using your arms or legs

Who to Call

University of Washington Medical Center and Northwest Hospital

Weekdays from 8 a.m. to 4:30 p.m., call the Interventional Radiology Department:

- Montlake: 206.598.6209, option 2
- Northwest: 206.598.6209, option 3

Harborview Medical Center

Weekdays from 8 a.m. to 4:30 p.m., call the Interventional Radiology Department at 206.744.2857.

Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

UWMC – Montlake:
206.598.6209, option 2

UWMC – Northwest:
206.598.6209, option 3

Harborview Medical Center:
206.744.2857

After hours and on weekends and holidays:
Call 206.598.6190 and ask to page the Interventional Radiology resident on call.