



University Hospitals Birmingham
NHS Foundation Trust



Excision Biopsy of a Breast Lump

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Introduction

This booklet is designed to give you information about having an excision biopsy of a breast lump. It is not meant to replace the discussion between you and your surgeon and breast care nurse, but help you to understand more about what is discussed.

What is an excision biopsy?

This is a small operation to remove a lump or area of abnormal breast tissue. It is performed under general anaesthetic. The tissue is tested to tell the surgeon whether the area is benign (harmless) or malignant (cancerous). Sometimes the surgeon will ask you to have an ultrasound scan of the area before the surgery to mark the area if it cannot be felt easily.

What are the risks of an excision biopsy operation?

Possible risks and complications include:

- **Bleeding from under the stitches or inside the wound:**
You should not be concerned if you find a small amount of blood spotting on your wound dressing, but if more bleeding than this occurs after your discharge you should contact the breast care nurses or GP immediately
- **Infection:** If your wound becomes inflamed, red, hot, sore or oozes pus you should contact your breast care nurse or GP for assessment and possible antibiotic treatment
- **Thrombosis:** This is a risk with all surgery and occurs when a blood clot forms in a vein, usually in the leg. You will be given blood thinning (anticoagulation) injections and you will be advised to wear support stockings whilst in hospital and for a few days until you are fully recovered.

The breast care nurses are available to give advice, information and support. Please do not hesitate to contact them at the hospital if you are worried, or have any questions that you would like to ask.

What happens before the operation?

Before your admission you will be asked to attend a pre-operative assessment clinic. Here, relevant tests and examinations are done i.e. physical examination, blood tests and possibly heart monitoring also known as electrocardiogram (ECG). These can take two to three hours.

You will normally be admitted on the morning of your operation.

You will be asked not to eat, drink or smoke for at least six hours prior to your operation.

Please bath or shower prior to admission if possible. You will be asked to remove all make-up and nail varnish before your operation and all jewellery except a wedding ring.

How will I recover from the operation?

The operation itself takes about half an hour and is usually under a general anaesthetic. After the operation time is spent in the Recovery Room until you are awake enough to return to the ward. You will be offered painkillers on the ward and to take home if you have any discomfort.

When can I return home?

Most people go home a few hours after the operation, providing they feel well. Once you are back at home, you may find that you have a few days feeling low or anxious about the operation results. If you would like to talk further, please feel able to ring the breast care nursing team.

How should I care for the wound?

Your wound will be covered with a waterproof dressing which should be left in place for 7–10 days. You will be able to bath or shower as usual during this time. You may find bathing relieves

discomfort. Any stitches (sutures) will be dissolvable and will not require removal.

Steri-strips (small strips of plaster) may be used to give extra support to the wound. You can get these wet and they will start to loosen after about ten days when they can be eased off as you would a plaster.

Please wear your bra during the daytime, straight after the operation. Your bra should be comfortable and supportive but we do not advise elasticated crop tops due to the lack of support.

What will happen after discharge?

You can expect to feel a little sore for a few days. Please take your pain killers regularly as directed. If these are not effective, please tell your GP.

There is no reason why gentle exercise should not be resumed as soon as you feel comfortable, usually about two to three weeks after surgery. More strenuous exercise can be resumed when your own doctor, breast care nurse or consultant advises that it is safe to do so.

When can I drive?

You can drive as soon as you can make an emergency stop without discomfort in the wound. This may be about ten days after the operation. You must also be comfortable wearing a seat belt.

You should speak to your insurance company about any restrictions following surgery.

When can I return to work?

If you work then you may return when you wish. Although most women feel ready to go back after a week, this differs from person to person. Your GP will supply you with a sick note and advise you further.

What follow up treatment will I have?

This will be discussed at your outpatient appointment when the results from your operation and your treatment plans are finalised. In some cases further treatments are required as this operation is simply to make a diagnosis. If the lesion is benign (harmless) then you are likely to be discharged.

Who are the breast care nurses?

You may have met one of the breast care nurses in the outpatient clinic before your admission. They are happy to offer you and your partner advice, information and support throughout the course of your treatment and follow-up. They will see you regularly at your request – don't hesitate to ask for support if anything is worrying you.

Please contact:

Queen Elizabeth Hospital team: **0121 371 4499** or **07771 940 368**
or Solihull Hospital team: **0121 424 5306**

Further information is available from the Patrick Room in the Cancer Centre. The telephone number is **0121 371 3537** or you can drop in for advice. Cancer support workers are also available for advice in the oncology departments on all sites.

It is important that you make a list of all medicines you are taking and bring it with you to all your follow-up clinic appointments. If you have any questions at all, please ask your doctor or breast care nurse. It may help to write down questions as you think of them so that you have them ready. It may also help to bring someone with you when you attend your outpatient appointments.

Glossary of medical terms used in this information

Anaesthetic: A drug that causes a loss of feeling or sensation

Anticoagulant: Any substance that prevents blood clotting

ECG: Also known as an electrocardiogram is a test which measures the electrical activity of the heart

Intravenous: Fluids given into a vein

Thrombosis: A blood clot attached to the wall of a vein

Local sources of further information

University Hospital Birmingham NHS Foundation Trust

The Patrick Room

Cancer Centre

Heritage Building (Queen Elizabeth Hospital)

Mindelsohn Way, Edgbaston

Birmingham B15 2TH

Telephone: **0121 371 3537**

Breast Care Nursing Team

Queen Elizabeth Hospital: **0121 371 4499** or **07771 940 368**

or Solihull Hospital: **0121 424 5306**

Please use the space below to write down any questions you may have and bring this with you to your next appointment.



A series of horizontal dotted lines for writing, spanning the width of the page below the introductory text.

If you require this information in another format, such as a different language, large print, braille or audio version please ask a member of staff or email **patientexperience@uhb.nhs.uk**.

Breast Care
Queen Elizabeth Hospital Birmingham: **0121 371 4499**
Solihull Hospital: **0121 424 5306**
