



BreastScreen WA Information for Women

Core Biopsy



A core biopsy is a component of the “Triple Test”, which is the recommended way of investigating a new breast change or symptom.

The Triple Test comprises three main steps:

1. Medical history and clinical breast examination
2. Imaging tests - mammogram (breast x-ray) and/or ultrasound
3. Biopsy - Core biopsy and/or fine needle aspiration (FNA)

Although none of these tests alone is 100% accurate, their combined use gives the best chance of detecting or excluding breast cancer.

A core biopsy is a common breast biopsy technique performed by a radiologist. The patient receives a local anaesthetic and a small incision is made in the breast. A hollow needle is then inserted into the breast through this incision and is guided to the lesion with an imaging test or by palpation. It is usual to take a number of samples. If the area being biopsied is very small, a marker clip may be inserted into the breast to show the area biopsied on a post-test mammogram. The test usually takes 30 minutes to complete.

The sample is sent to a pathologist, who will study it under the microscope and provide a detailed report. The results will usually be available within a few days. Information on when and how to obtain the results will be given before leaving the clinic.

After the procedure, a dressing is used to cover the biopsy area and an ice pack will be given. Written information on how to care for the wound will also be provided.

It is important to note that:

- If there is discomfort after the local anaesthetic has worn off, paracetamol is recommended and a supportive bra may also help.
- Some bruising is normal after a biopsy. Aspirin should be avoided as this may worsen the bruising.
- If there is ongoing bleeding through the dressing, firm pressure should be applied and the clinic should be contacted for further advice.
- Strenuous activity should be avoided for 24 hours after the biopsy as this may also worsen the bruising.
- There may be a fine scar left after the wound has healed.
- Infection is a very rare complication.

Reference: Position Statement on the use of fine needle aspiration and core biopsy of the breast in the BreastScreen Australia program, Cancer Australia, 2019



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Fine needle aspiration



Fine Needle Aspiration (FNA) biopsy is a component of the “Triple Test” which is the recommended way of investigating a new breast change or symptom.

The Triple Test comprises three main steps:

1. Medical history and clinical breast examination
2. Imaging tests - mammogram (breast x-ray) and/or ultrasound
3. Biopsy - fine needle aspiration (FNA) and/or core biopsy

Although none of these tests alone is 100% accurate, their combined use gives the best chance of detecting or excluding breast cancer.

FNA is a common breast biopsy procedure undertaken by a radiologist. A fine needle is inserted into the breast and used to remove some fluid or cells from the breast lesion of interest. The needle is normally inserted several times in order to obtain a sufficient sample for analysis. Ultrasound may be used to guide the needle if the abnormal area is not easy to feel. The test only takes a couple of minutes, however you may be in the biopsy room for up to 30 minutes.

The sample is sent to a pathologist, who will study it under the microscope and provide a detailed report. The results will usually be available within a few days. Information on when and how to obtain the results will be given to you before leaving the clinic.

It is important to note that:

- The test may be uncomfortable, but it is rarely painful. Paracetamol can be taken if required and a comfortable bra may be helpful.
- Slight bruising at the site of the biopsy is normal.
- Aspirin should be avoided as it could worsen any bruising.
- Infection is a rare complication.

Reference: Position Statement on the use of fine needle aspiration and core biopsy of the breast in the BreastScreen Australia program, Cancer Australia, 2019

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