



Scan with your
smartphone to get an
e-version of this leaflet.
You might need an app
to scan this code.



Fine needle aspiration of the breast

***Information for
patients and carers***

**Department of Pathology
Aberdeen Royal Infirmary**

Important information

Please tell the doctor if you ...

- **are taking medicine to thin the blood (such as warfarin)**
- **are allergic to sticking plasters or latex**

What is Fine Needle Aspiration (FNA) of the breast?

This is a simple test using a very thin needle, which is smaller than the one used to take a blood sample.

During the test, the doctor will gather samples of cells from your breast. These samples will then be examined in greater detail under a microscope.

Is any preparation required?

You do not need to prepare for this test, you can eat and drink as normal.

Who carries out an FNA?

It is usually carried out by a consultant cytopathologist (a specialist doctor who examines cells with a microscope to make a diagnosis and help guide treatment). The consultant cytopathologist has specialised in this technique.

Your FNA may be carried out by a doctor who is training in this area. If it is, the trainee will be supervised by the consultant.

Where is the test carried out?

The test is carried out in a room at the clinic.

What happens during an FNA?

Although you will have had the chance to read this leaflet, the doctor will explain the test again as it is carried out. If you have any concerns about the test or need any more information, please ask the doctor before your test.

The FNA is usually carried out with you lying on an examination couch. Occasionally it is easier to do when you are sitting up. You will need to remove your clothing from above the waist but there are gowns available to wear.

The doctor will clean the skin over the lump with a small skin wipe and then use one hand to make sure the lump does not move while the FNA is done. If the doctor is male, there will also be a nurse with you. Occasionally, students may also be present.

The FNA is performed **WITHOUT** local anaesthetic because this can affect the ability to feel the lump properly and most people have only a little discomfort. The doctor inserts the needle into the lump and moves it backwards and forwards to obtain cells from different areas of the lump. This only takes a few seconds.

The doctor then removes the needle and puts a cotton swab over the site. You will be asked to press on this for a few minutes until any bleeding stops and to prevent bruising.

Sometimes the doctor may wish to repeat the test, to make sure that enough cells have been sampled.

You do not need any stitches and there is usually no bruising. A small sticking plaster will be put over the needle site. You can take this off at any time after about half an hour.

What happens to the sampled cells?

While you are at your appointment, the cells sampled from the lump are spread onto glass slides. They are then examined under a microscope.

If the lump is a cyst, fluid will be removed with the needle and the lump will disappear.

Does an FNA test have any complications?

Although complications are very unusual and do not normally need any treatment, it is important that you know about the risks before agreeing to have an FNA.

Although rare, there are a few side effects, which you should be aware of. We would like to emphasise that they are **very uncommon and usually minor**.

- You may find the FNA painful. As it only takes a few seconds it is unusual for it to be intolerable. If it is, the doctor will stop.
- You may have some pain afterwards. Again, this is usually minimal and lasts a few hours. If it is severe or lasts for more than a day, please contact your GP for advice.
- There may be bruising and/or tenderness around the site of the FNA. This should not cause any problems.
- The site may become infected. If site becomes hot, swollen and tender (these are common signs of infection), please contact your GP who may prescribe antibiotics.
- **Very rarely**, the needle may puncture a lung and cause air to leak into the chest. This can cause chest pain and shortness of breath. It does not usually need any treatment but if you have these symptoms, please contact your GP. This complication occurs in less than 1% of FNAs (less than 1 in 100 patients) and is more likely to happen in thin women with small breasts or when the lump is near the armpit.

**This leaflet is also available in large print.
Other formats and languages can be
supplied on request. Please call Quality
Development on (01224) 554149 for a
copy. Ask for leaflet 0548.**

Feedback from the public helped us to develop this leaflet.
If you have any comments on how we can improve it,
please call (01224) 554149 to let us know.

Dr Mary McKean
Aberdeen Royal Infirmary
Leaflet supplied by:

revised May 2017
©NHS Grampian
Quality Development, Foresterhill