



## Information on Breast Localization

### Introduction

1. Based on the results obtained from your recent mammogram or ultrasound, your physician may recommend that an area of your breast be excised for diagnostic purpose or as treatment option. If the lesion cannot be located with clinical technique, Breast Localization can assist the surgeon correctly and accurately in targeting the abnormal areas.
2. The purpose of breast localization is to place a guide wire within the breast at the point of concern either under ultrasound or Stereotactic X-ray guidance.

### The Procedure

1. The procedure will be performed under aseptic technique. The nurse will sterilize the field of procedure and cover it with sterilized towel.
2. The abnormal area is first located with either ultrasound or Stereotactic X-ray machine. A hook wire is placed under guidance until optimal position is obtained.
3. Duration of the procedure varies, depending on the complexity of the condition. It may take 40 - 60 minutes.
4. Before, during and after the procedure, your vital signs (like blood pressure and pulse rate) will be monitored.
5. After surgical removal of lesion, specimen radiography may be performed to ensure that the lesion was adequately excised.

### Before the Procedure

1. A written consent is required.
2. Under Stereotactic X-ray guidance:

#### Patient's Label

Patient Name: \_\_\_\_\_  
Hospital No: \_\_\_\_\_  
Episode No: \_\_\_\_\_

- Inform medical staff before the examination if the patient is or may be pregnant as the examination involves radiation that is harmful to a fetus. A pregnancy test may be necessary in case of any doubt regarding the examination has to be proceed.
- No contraceptive method is 100% effective.
- You should also tell our nurse or radiographer the date of your last menstrual period (LMP).
- You may be offered a pregnancy test (blood or urine) if necessary. However, please note pregnancy tests CANNOT exclude the possibility of a very early pregnancy.
- We will assess your likelihood of being pregnant, based on the available information.
- If you are pregnant or if the possibility of pregnancy cannot be excluded, doctor will re-assess the potential risk and benefit of performing this radiological examination to you and your fetus.
- If the benefit of performing this radiological examination is greater than the risk, we may continue with this examination if you agree. It is your right to decide whether you want to continue with this examination.
- If the risk of performing this radiological examination is greater than the benefit, we may consider arranging alternative investigations which do not use radiation, or to reschedule this examination.
- After the examination, in the case that you realise you might have already been pregnant on the date of this examination, please consult your clinical doctor for advice as soon as possible.



## Risk and Complication

1. Hookwires may be dislodged or may migrate prior to surgery.
2. Failure of needle localization (0-20%).
3. Pneumothorax.

Should a complication occur, another life-saving procedure or treatment may be required immediately.

## Is there any risk in local anaesthesia?

In general, local anaesthesia is a very safe technique and the risk directly associated with local anaesthesia is small. The complications include localized adverse effects and general adverse effects.

Localized adverse effects:

- Painful on injection
- Prolonged numbness, tingling, feeling of "pins and needles", or strange sensations
- Temporary or permanent nerve damage. Risk of nerve damage is rare, (between 1 in 5,000 to 1 in 30,000). The vast majority of those affected (92%–97%) will recover within four to six weeks. 99% of these people will recover within a year.

General systemic adverse effects:

General systemic adverse effects are due to the pharmacological effects of the anesthetic agents used. These adverse effects occur rarely and only if the amount of local anaesthetic drugs used exceed the recommended range.:

- Allergy to local anaesthetic drugs
- Convulsion
- Coma
- Respiratory depression
- Cardiac arrhythmia
- Death

## Disclaimer

This leaflet only provides general information pertaining to this procedure. While common risks and complications are described, the list is not exhaustive, and the degree of risk could also vary between patients. Please contact your doctor for detailed information and specific enquiry.

## Reference

Medscape. Retrieved on 12 Dec 2013, from <http://emedicine.medscape.com/article/1844520-overview>

Smart Patient Website by Hospital Authority: Breast Lump Excision (2013), Radiological Investigation Information to Women of Child-bearing Age (2019)

Hong Kong Baptist Hospital, Information on Procedures:

Information on Local anaesthesia (CI/MANT/1002v03/Jul20)

### Patient's Label

Patient Name: \_\_\_\_\_

Hospital No: \_\_\_\_\_

Episode No: \_\_\_\_\_

Patient's Signature : \_\_\_\_\_ Date : \_\_\_\_\_