

# Image guided needle localisation

This leaflet gives information about needle localisation; a technique used to help the surgeon accurately remove small or difficult to feel lumps within the breast





## Why is a needle localisation done?

Some lumps or abnormalities within the breast, especially those found on a breast screening mammogram, are too small for the surgeon to feel.

For these small or difficult to feel lumps, the surgeon asks the breast radiologists to accurately locate the lump within the breast by inserting a wire guided by ultrasound or mammography before the operation on the day of surgery.

## How is it done?

This procedure is carried out in the breast unit, either in the mammogram or the ultrasound room, using the mammogram or ultrasound to guide the placement of the wire.

A mammogram or breast ultrasound may be performed before the procedure. The procedure is normally performed lying down, but is sometimes carried out in the seated position, especially if a mammogram is used to guide the needle.

Local anaesthetic is injected into your skin close to the site of the lump to avoid pain during the procedure. A special needle with a very fine wire inside it, is then inserted into your breast using the mammogram or ultrasound to guide the needle.

When the mammogram or ultrasound confirms that the tip of the needle is lying in or through the lump, the needle is removed but the wire stays in position, to guide the surgeon at the time of surgery.

A mammogram is performed at the end of the procedure to check the position of the wire in the lump or area of your breast to be removed.

## What will I feel during the procedure?

You will feel a pin prick and a stinging sensation during injection of the local anaesthetic. There should be no further pain as the special needle with the wire inside will only be inserted once the local anaesthetic is working (takes about 30 seconds to work).

There will be a sensation of pressure and there is sometimes a feeling of discomfort when the wire enters the lump – but this should not be very painful. If you do experience any pain during the procedure, please do let the radiologist know right away.

If the procedure is performed using a mammogram to guide the needle, there will be the additional discomfort of the mammogram since the breast will need to be compressed for several minutes during the procedure. However, most people find this tolerable and that the 'tightness' normally experienced when having a mammogram settles quite quickly.

### **What are the risks of having this procedure?**

Most people do not have any problems or complications from this procedure. There can be some bleeding at the site of the needle insertion but this is normally very minor and controlled by pressing on the skin at the time.

Sometimes the mammogram performed after the procedure shows that the wire is not in the most ideal position. In these circumstances, the radiologist will insert another wire but the first wire remains within the breast to be removed at the time of surgery.

Very occasionally, the wire can move away from the lump or the area that needs to be removed, after the check mammogram has been performed. In these circumstances, further surgery may be required.

### **What happens after the procedure?**

After the position of the wire has been checked by a mammogram, the radiologist will dictate a report of the procedure onto the hospital system, which is typed by the secretary and added to your medical notes.

This will complete the image guided needle localisation.

### **Need more information?**

Contact our Breast Clinical Nurse Specialists in the Bath Breast Unit by calling 01225 824057.



**You may wish to use this page for notes**

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