Intervention in the neck - Biopsy techniques.

www.headandneckultrasound.co.uk

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Fine Needle or Core Biopsy?

- First line – cytology.

- If cytology can’t give the answer – core biopsy.

- ?Lymphoma – core biopsy.
Needles – Ultrasound.

- Positioning.
- Equipment.
- Technique.
Needles.

- Positioning.
- Parallelism.
Needles.

• Positioning.

• Equipment.
Technique.

- Avoid contamination – cling film.
- Short axis approach.
- Rotation, rotation, rotation.
- Aspiration or no aspiration?
- Release pressure before withdrawal.
- Increase specimen yield – preparation.
Technique.
In practise?

• Knowledge
• Hand/eye coordination.
• Needle/probe.
• Needle/monitor.
Normal lymph nodes.
Normal lymph nodes.
Normal lymph nodes.
Normal lymph nodes.
Lymphoma?
Lymphoma
Metastatic lymph nodes
Malignant lymph nodes.
Metastatic lymph nodes
Metastatic lymph nodes
Metastatic lymph nodes
Normal lymph nodes.
Normal lymph nodes.
Malignant lymph nodes.
Malignant lymph nodes.
Malignant lymph nodes.
Malignant lymph nodes.
Fine Needle Aspiration.

- No aspiration technique.
- Spinal needle.
- Deep lesions.
- Haemorrhage.
Signs?
In practise?

• Knowledge
• Hand/eye coordination.
• Needle/probe.
• Needle/monitor.
Core Biopsy.

• Non Advancing needle.
Positioning : see the gate.
Core Biopsy.

- Plan approach – always short axis.
- Anaesthesia under ultrasound control.
- Practice the click.
- Catch the needle, see the gate.
- Flat surface – parallelism.
- Position the gate – click coming.
- Smooth and easy!