

Fine Needle Aspiration (FNA) Biopsy

FNA biopsies are performed and read by our Cytopathologist, Dr. Somma, and are available to the entire Downstate community and beyond.

Outpatients can generally be accommodated within a few days.
Inpatients will generally be seen within 24 hours.

Contact and Insurance Information

Phone 718-270-1666

Outpatients are currently evaluated and biopsied only at our University Hospital facility located at:
450 Clarkson Avenue
Brooklyn, NY 11203

For insurance information, see:

http://www.downstate.edu/uhb/mcare_welcome.html

Clinical Indications

- Any palpable lesion / mass of concern (generally 1 cm or more in greatest dimension)
- Common sites for FNA biopsy include
 - Lymph nodes
 - Thyroid and salivary glands
 - Other head & neck lesions
- Ultrasound guided FNA biopsies starting in 2013 for non-palpable, sub-centimeter and other appropriate lesions (e.g. deep thyroid nodules, complex cystic lesions, etc.)

Advantages to Cytopathologist Performed FNA Biopsy

Many of the following advantages stem from the optimized clinical pathologic correlation that results from the same physician evaluating the patient, performing the procedure and reviewing the pathology.

- A portion of the biopsy sample is viewed microscopically at the time of biopsy:
 - Allowing **immediate preliminary diagnosis** and providing rapid alleviation of patient anxiety.
 - Allowing appropriate triaging for special studies (e.g. immunostaining, flow cytometry, microbiology, etc.).
 - Allowing prompt planning or ruling out of subsequent investigative procedures.
- Sample is optimally prepared (i.e. smeared, fixed, etc.).
- Non-diagnostic / unsatisfactory results are minimized.
- Final cytologic diagnosis is more precise.
- Management recommendations are tailored for each patient.

General Information and Benefits of FNA Biopsy

FNA biopsy is a fast, exceptionally safe, minimally invasive and highly cost effective procedure similar to routine phlebotomy (blood draw). Most lesions for which a biopsy is clinically indicated are amenable to sampling by FNA.

When performed by an experienced physician, FNA biopsy will typically either:

1. Provide reassurance by confirming the benignity of a lesion, or
2. Establish an initial or recurrent pathologic diagnosis.

In the minority of cases for which the FNA biopsy result is inconclusive, patients will be appropriately triaged for either close clinical follow up or core versus open biopsy.

In fact, there are several advantages to the initial evaluation of lesions by FNA biopsy when compared to core biopsy or open biopsy.

- Minimal discomfort during and after procedure
- No scarring
- Anesthesia is generally unnecessary
- Multiple lesions can be sampled with minimal trauma
- Can be performed in high risk (virtually any) patient

- Can be performed as an outpatient procedure
- May serve as both a diagnostic and therapeutic procedure for some lesions such as cysts and abscesses
- Rapid turnaround time for final diagnosis