ASCENSION ST VINCENTS
BREAST LOCALIZATION PATIENT HANDOUT

Radiologist who performed your procedure: _____

Procedure Description:

- A breast localization procedure is performed prior to surgery to help a surgeon locate an area in the breast that needs to be removed. Often the area is too small or cannot be felt by hand. During the procedure, a radiologist uses imaging to precisely guide the placement of a device into the area that needs to be removed. The skin is cleaned with antiseptic, and local anesthetic is used to numb the area.
- For a wire localization procedure, a thin wire is inserted into the breast so that the end of the wire sits within the area to be removed. Part of the wire stays outside the skin to guide the surgeon during surgery performed the same day.
- For a RFID, Magseed, MOLLI or Saviscout localization procedure, a small needle is used to place the device into the area to be removed. The procedure is usually performed on a day sometime prior to surgery.
- The procedure usually takes 15-30 minutes.

Benefits:

- Minimally invasive: The procedure uses small needles with no incisions or stitches.
- Precise targeting: The procedure helps the surgeon find the correct to be removed.
- Tissue preservation: The procedure allows the surgeon to remove less normal breast tissue.
- Reduces repeat surgery: The procedure improves the chances of removing the entire area in one operation.
- Flexibility: Several localization methods (wire, RFID tag, Magseed, MOLLI or Saviscout) are available. The device is chosen based on the patient's case and surgeon preference.
- Low risk of complications: The risk of serious complications is low, with most side effects being mild and temporary.

Risks & Potential Complications:

- Pain: Pain can occur (up to 10% of cases). The pain is usually mild, usually goes away within a few days and can be managed with over-the-counter pain medicine.
- Bruising: Bruising can occur (up to 15% of cases). The bruising is usually mild and usually goes away on its own over several days.
- Bleeding: Formation of a collection of blood (hematoma) can occur (up to 15% of cases). Most cases are mild and do not need treatment. Serious bleeding that needs medical attention is rare (less than 0.5% of cases).
- Infection: Infection is rare (less than 0.3% of cases). Most infections are mild and can be treated with antibiotics.
- Device movement. The device can move from its original position (up to 10% of cases). If this happens, the radiologist may need to adjust or replace it before surgery.
- Vasovagal reaction: Feeling faint or lightheaded can occur during or after the procedure (up to 7% of cases). It is usually mild and goes away quickly.

- Serious complications: Serious complications needing medical care are uncommon (less than 2% of cases).
- Allergic reaction: A reaction to the local anesthetic, topical antiseptic or metallic clip is rare (less than 1% of cases).

Alternatives:

- Surgical excision without localization: This is only possible if the surgeon can feel the area by hand.
- Observation: Your provider may recommend follow-up imaging with mammogram, ultrasound or MRI instead of surgical excision.

Aftercare:

- The following aftercare instructions only apply to patients undergoing localization using RFID tag, Magseed, MOLLI or Saviscout. Patients undergoing wire localization should follow their surgeon's instructions.
- A bandage will be applied over the procedure site. Skin glue may also be applied to the site. You may remove the bandage 24 hours after your procedure, however, do not pick the glue off (allow it to flake off on its own over several days).
- If you were provided with an ice pack, apply it to the site periodically for 15-30 minutes after your procedure.
- You may shower and allow water to flow over the site 24 hours after your procedure, however, do not submerge the site in water (bath, pool, hot tub or ocean) until the site has healed.
- Do not apply lotion/ointment to the site until it has healed unless you are instructed to do so.
- Avoid strenuous physical activity for at least 24 hours after your procedure. Then increase your activity level as tolerated.
- Wear a form-fitting bra for at least 48 hours after your procedure to help decrease breast movement. This helps limit pain and bruising.
- It is normal to experience mild pain and bruising after your procedure. You can take acetaminophen (Tylenol), aspirin, ibuprofen (Motrin) or naproxen (Aleve) for relief. It is safe to take aspirin, ibuprofen or naproxen soon after your procedure, however you may experience more bruising if you do so.
- Contact Radiology or your ordering provider if you have any concerns or experience any of the following: persistent or significant bleeding, significant swelling, severe pain not responding to over-the-counter medications or signs of possible infection (significant redness or purulent drainage at the site, severe pain, fever or chills). Call 911 in the event of an emergency.
- Weekdays 8 am to 5 pm call 308-5488 (Riverside), 296-4277 (Southside), 602-1219 (Clay), 691-1286 (St Johns) or Optimal Imaging (450-6955). Weekdays 5 pm to 10 pm or weekends 6 am to 10 pm call 308-8401. If outside of these hours, call the hospital operator at 308-7300 and ask to speak to the Interventional Radiologist on call.