

ASCENSION ST VINCENTS

THYROID PROCEDURE PATIENT HANDOUT

Radiologist who performed your procedure:

Procedure Description:

- An image-guided thyroid fine needle aspiration (FNA) is a procedure used to take a sample of a thyroid nodule found on an imaging study. The procedure helps find out if the nodule is benign (not cancer) or malignant (cancer). During the procedure, a radiologist uses imaging to precisely target the nodule. The skin is cleaned with antiseptic, and local anesthetic is used to numb the area. Several very thin needles are used to obtain cell samples from the nodule. The samples are sent to the pathology department for testing. It is sometimes necessary for the radiologist to use a slightly larger needle to obtain core biopsy tissue samples from the nodule.
- The procedure itself usually takes 15-30 minutes.

Benefits:

- Minimally invasive: The procedure uses small needles with no incision or stitches.
- Accurate diagnosis: The procedure provides the best non-surgical way to determine if a thyroid nodule is benign or malignant.
- Help guide treatment: The results allow doctors to decide the best course of treatment.
- Prevents unnecessary surgery: Many nodules are benign. Biopsy results can prevent patients from undergoing thyroid surgery when it is not needed.
- Low risk of complications: The risk of serious complications is low, with most side effects being mild and temporary.
- Rapid recovery: Most patients return to normal activities soon after the procedure.

Risks & Potential Complications:

- Pain: Pain can occur (about 10-20% of cases). The pain is usually mild, usually goes away within a few days and can be managed with over-the-counter pain medicine.
- Bleeding: Bruising is common. Minor bleeding can occur (up to 2% of cases). Significant bleeding requiring medical treatment is rare (less than 0.1% of cases).
- Infection: Infection is rare (less than 0.2% of cases). Most infections are mild and can be treated with antibiotics.
- Inconclusive results: The procedure may not provide enough material always give a clear answer (about 10-20% of cases).
- Inaccurate results: Results showing no cancer when the nodule is cancer (up to 5% of cases) and results showing cancer when the nodule is not cancer (less than 1% of cases) can occur. Sometimes a repeat procedure or surgical biopsy may be needed.
- Vasovagal reaction: Feeling faint or lightheaded can occur during or after the procedure (about 1% of cases).
- Allergic reaction: A reaction to the local anesthetic, topical antiseptic or other medications is rare (less than 1% of cases).

- Voices changes: Temporary voice changes / hoarseness can occur (less than 1% of cases). Permanent voice changes / hoarseness are rare (less than 0.1% of cases).
- Internal injury: Injury to nearby structures (windpipe or larger blood vessels) is rare (less than 0.2% of cases).

Alternatives:

- Observation: Some nodules are followed with periodic ultrasound to determine if the nodule is growing.
- Surgical biopsy: Traditional surgery can be used to biopsy a nodule in rare cases.
- No further evaluation: Some patients choose not to investigate the nodule, although this carries the risk of missing or delaying a cancer diagnosis and is generally not recommended.

Aftercare:

- A bandage will be applied over the procedure site. You may remove the bandage 24 hours 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 instructed to do so.
- If you were provided with an ice pack, apply it to the procedure site periodically for 20-30 minutes after your procedure.
- Avoid strenuous physical activity for at least 24 hours. Then increase your activity level as tolerated.
- 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.
- There are nerves located near the thyroid gland. Local anesthetic can occasionally flow over these nerves and cause numbness/weakness, which can take up to several hours to go away.
- 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 308-8401 (Riverside), 296-3886 (Southside), 602-1360 (Clay) or 691-1297 (St Johns). 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.

How Do I Receive Procedure Results?

- Results can take up to 5 days (sometimes longer) to become available. Please contact your provider's office to obtain results and for follow-up instructions.