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GS24 Punch Biopsy of a Skin Lesion

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Information about COVID-19 (Coronavirus)

On 11 March 2020 the World Health Organization confirmed COVID-19 (coronavirus) has now spread all over the world (this means it is a 'pandemic'). Even though lockdown has been eased, there is still a risk of catching coronavirus. Hospitals have very robust infection control procedures, however, it is impossible to make sure you don't catch coronavirus either before you come into the hospital or once you are there. You will need to think carefully about the risks associated with the procedure, the risk of catching coronavirus while you are in hospital, and of not going ahead with the procedure at all. Your healthcare team can help you understand the balance of these risks. If you catch the coronavirus, this could affect your recovery and might increase your risk of pneumonia and even death. Talk to your healthcare team about the balance of risk between waiting until the pandemic is over (this could be many months) and going ahead with your procedure.

Please visit the World Health Organization website: <https://www.who.int/> for up-to-date information.

Information about your procedure

Following the Covid-19 (coronavirus) pandemic, some procedures have been delayed. As soon as the hospital confirms that it is safe, you will be offered a date for your procedure. Your healthcare team can tell you about the risks of coronavirus.

It is up to you to decide whether to have the procedure or not. The benefits of the operation, the alternatives and any complications that may happen are explained in this leaflet. You also need to consider the risk of getting coronavirus while you are in hospital. If you would rather delay the procedure until you feel happy to go ahead with it, or if you want to cancel the procedure, you should tell the healthcare team.

Coronavirus is highly contagious (meaning it spreads easily from person to person). The most common way that people catch it is by touching their face after they have touched a person or surface that has the virus on it, so it's important you try not to touch your face, especially if you have not washed your hands.

Wash your hands with alcoholic gel or soap and water when you enter the hospital, at regular intervals after that, and when you move from one part of the hospital to another.

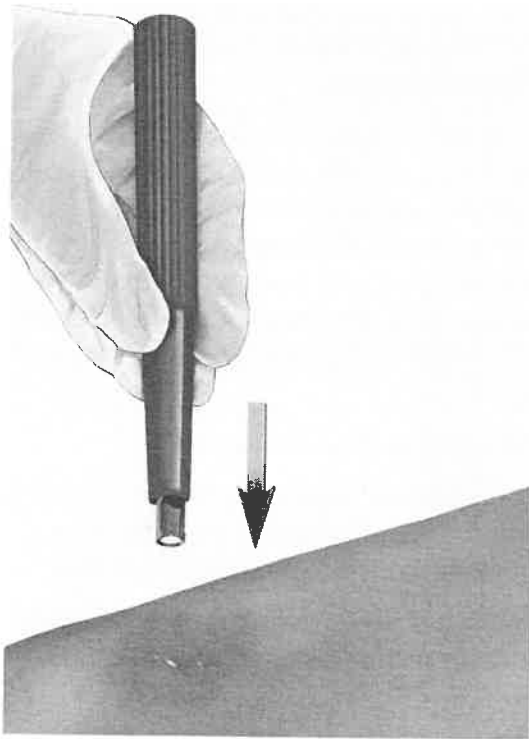
Be aware of social distancing. Chairs and beds are spaced apart. If your healthcare team need to be close to you, they will wear personal protective equipment (PPE). If you can't hear what they are saying because of their PPE, ask them to repeat it until you can.

You may not be allowed to bring anyone with you into the hospital but they may be allowed to wait outside or in the car.

Your procedure is important and the hospital and health professionals looking after you are very well equipped to perform it in a safe and clean environment. Guidance about coronavirus may change quickly — your healthcare team will have the most up-to-date information.

What is a punch biopsy?

A punch biopsy involves removing a small piece of skin using a circular blade called a punch. The procedure is performed by a doctor or specially-trained healthcare practitioner.



A punch biopsy

Your doctor has recommended a punch biopsy. However, it is your decision to go ahead with the procedure or not.

This document will give you information about the benefits and risks to help you to make an informed decision. If you have any questions that this document does not answer, ask your doctor or the healthcare team.

What are the benefits of a punch biopsy?

Your doctor may be concerned about a skin lesion, which is a lump or spot on or just below your skin, or they may need to confirm the cause of a skin rash or eruption.

Some skin lesions can become malignant (cancerous).

The tissue that your doctor removes will be examined under a microscope to help make the diagnosis or help your doctor to decide the best treatment for you.

If a problem is found, the healthcare team will discuss the appropriate treatment with you. If the biopsy is normal, the healthcare team will reassure you.

Are there any alternatives to a punch biopsy?

A blood test or scan may give more information and show that you have a problem. However, a biopsy will help to find out exactly what is causing the problem and will help your doctor to decide the best treatment for you.

What will happen if I decide not to have a punch biopsy?

Your doctor may not be able to confirm what the problem is or decide the best treatment for you. If you decide not to have a punch biopsy, you should discuss this carefully with your doctor.

What does the procedure involve?

Before the procedure

The healthcare team will carry out a number of checks to make sure you have the procedure you came in for. You can help by confirming to your doctor and the healthcare team your name and the procedure you are having.

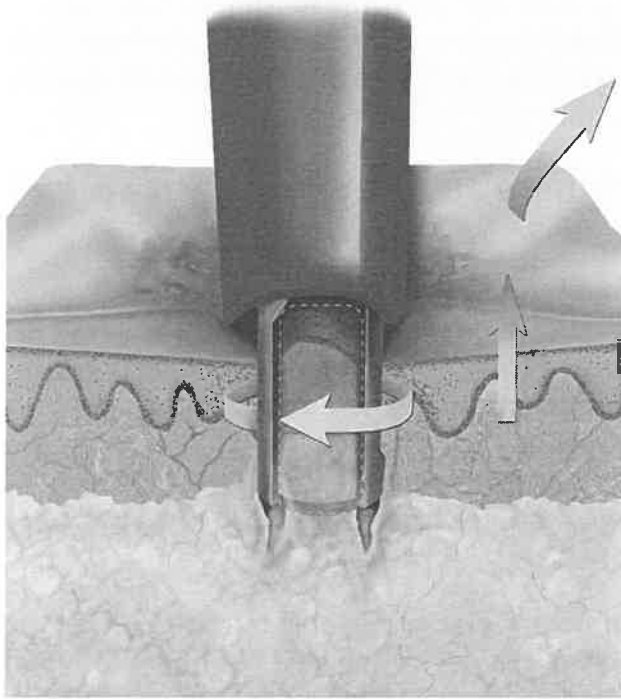
The healthcare team will ask you to sign the consent form once you have read this document and they have answered your questions.

In the treatment room

The procedure is performed under a local anaesthetic and usually takes 10 to 15 minutes. Your doctor will only begin the procedure when both of you are satisfied that the local anaesthetic is working.

Your doctor will use antiseptic to clean the area and will inject local anaesthetic into the area. This stings for a moment but will make the area numb, allowing your doctor to perform the procedure with much less discomfort for you.

Your doctor will stretch your skin to make it easier to use the punch to remove a sample of tissue. The amount of tissue removed is usually less than 4 millimetres in diameter and about 1.5 millimetres deep (see figure 2).



The blade goes down to the layer of fat

Your doctor or a nurse will press firmly for a few minutes over the hole to stop any bleeding. They may need to use a diathermy instrument that uses heat to cauterise the area.

They will either close the hole with stitches or use a dressing. The hole usually heals to leave a small straight scar. The stitches may be dissolvable. If not, they are usually left for 5 to 7 days.

What should I do about my medication?

Let your doctor know about all the medication you take and follow their advice. This includes all blood-thinning medication as well as herbal and complementary remedies, dietary supplements, and medication you can buy over the counter.

What complications can happen?

The healthcare team will try to make the procedure as safe as possible but complications can happen. Some of these can be serious. The possible complications of a punch biopsy are listed below. Any numbers which relate to risk are from studies of people who have had this procedure. Your doctor may be able to tell you if the risk of a complication is higher or lower for you.

- Pain. The local anaesthetic will start to wear off after about two hours. After this time you may feel some pain where the tissue was removed. You may need simple painkillers such as paracetamol.
- Bleeding after the procedure. Any bleeding is usually little but may cause bruising or temporary swelling under your skin. More serious bleeding can happen. The risk is higher if you take blood-thinning medication.
- Infection of the surgical site (wound) (risk: less than 5 in 100). It is usually safe to shower if you keep your wound dry and covered. Let the healthcare team know if you get a high temperature, notice pus in your wound, or if your wound becomes red, sore or painful. An infection usually settles with antibiotics but you may need an operation.
- Unsightly scarring of your skin.
- Wound breakdown, if the hole fails to heal. This is usually treated with dressings that allow your wound to heal without needing more stitches.

You should discuss these possible complications with your doctor if there is anything you do not understand.

How soon will I recover?

You may need to lie down and raise the area where the biopsy was performed. This reduces the risk of bleeding. The healthcare team will check you regularly for any signs of bleeding. After a short while you will be able to go home.

Do not drive, operate machinery or do any potentially dangerous activities (this includes cooking) for at least 24 hours and not until you have fully recovered feeling, movement and co-ordination. You should also not sign legal documents or drink alcohol for at least 24 hours.

You should be able to return to work the next day unless you are told otherwise.

If you needed to stop taking blood-thinning medication, your doctor will tell you when you can start taking it again.

Do not have a hot bath for two to three days. Do not do strenuous exercise for the first week and not until the biopsy area has healed.

Keep your wound clean and dry until any stitches come out. The healthcare team will tell you if you need to have any stitches removed.

If your wound starts to bleed, lie down and ask someone to press firmly on your wound for 15 to 20 minutes and then gradually release the pressure. If the bleeding continues, do not use a tourniquet (a tight strap). Keep on pressing firmly on your wound and call an ambulance or go immediately to your nearest Emergency department.

Results from the biopsy will not be available for at least a few days so the healthcare team may arrange for you to come back to the clinic for these results. The healthcare team will discuss with you any treatment or follow-up you need.

Lifestyle changes

If you smoke, stopping smoking will improve your long-term health.

Try to maintain a healthy weight. You have a higher risk of developing complications if you are overweight.

Regular exercise should improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

Summary

A punch biopsy is usually a safe and effective way of finding out if there is a problem with your skin. However, complications can happen. You need to know about them to help you to make an informed decision about the procedure. Knowing about them will also help to detect and treat any problems early.

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics are taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you.

This document is intended for information purposes only and should not replace advice that your relevant healthcare team would give you.

Acknowledgements

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