



SW9238



Queensland Government

Breast Aspiration under Imaging

Facility:

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex: M F I

A. Interpreter / cultural needs

- An Interpreter Service is required? Yes No
If Yes, is a qualified Interpreter present? Yes No
A Cultural Support Person is required? Yes No
If Yes, is a Cultural Support Person present? Yes No

B. Procedure

The following will be performed (*Doctor/doctor delegate to document – include site and/or side where relevant to the procedure*)

.....
.....
.....

A breast aspiration is a procedure that removes liquid from a pool of fluid (collection) in the breast. Collections may contain clear fluid, pus or blood. This procedure may require the injection of local anaesthetic.

C. Risks of the procedure

In recommending a Breast Aspiration, the doctor believes the benefits to you from having this procedure exceed the risks involved.

The risks and complications with this procedure can include but are not limited to the following.

Common risks and complications include:

- Pain or discomfort at the puncture site. This may require medication.
- Bleeding or bruising may occur. This is more common if you take Aspirin, Warfarin, Clopidogrel (Plavix and Iscover) or Dipyridamole (Persantin and Asasantin).
- Failure of local anaesthetic which may require a further injection of anaesthetic or a different method of anaesthesia may be used.
- Nerve damage, is usually temporary, and should get better over a period of time. Permanent nerve damage is rare.

Less common risks and complications include:

- Infection, requiring antibiotics and further treatment.
- Damage to surrounding structures such as blood vessels, organs and muscles, requiring further treatment.
- Excessive bleeding from the puncture site. This may require other treatment and/or corrective surgery.
- An allergy to injected drugs, requiring further treatment.

- The procedure may not be possible due to medical and/or technical reasons.

Rare risks and complications include:

- Pneumothorax, collection of air around the lining of the lungs. This usually stops by itself but sometimes may require the insertion of a tube into the chest.
- (*Mammography only*) An increased lifetime cancer risk due to the exposure to x-rays.
- Seizures and/or cardiac arrest due to local anaesthetic toxicity.
- Death as a result of this procedure is very rare.



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D. Patient consent

I acknowledge that the doctor/doctor delegate has explained the proposed procedure.

I understand;

- the risks and complications, including the risks that are specific to me.
- the anaesthetic required for this procedure. I understand the risks, including the risks that are specific to me.
- that no guarantee has been made that the procedure will improve my condition even though it has been carried out with due professional care.
- if immediate life-threatening events happen during the procedure, they will be treated based on my discussions with the doctor/doctor delegate or my Acute Resuscitation Plan.
- a doctor/doctor delegate undergoing further training may conduct this procedure.

I have been given the following Patient Information Sheet/s:

Breast Aspiration under Imaging

- I was able to ask questions and raise concerns with the doctor/doctor delegate about the proposed procedure and its risks. My questions and concerns have been discussed and answered to my satisfaction.
- I understand I have the right to change my mind at any time including after I have signed this form but, preferably following a discussion with my doctor/doctor delegate.
- I understand that image/s or video footage may be recorded as part of and during my procedure and that these image/s or video/s will assist the doctor to provide appropriate treatment.
- I understand that Queensland Health may release my relevant de-identified information obtained from this and related procedures for education and training of health professionals.

On the basis of the above statements,

I request to have the procedure

Name of Patient:

Signature:

Date:

Patients who lack capacity to provide consent

Consent must be obtained from a substitute decision maker/s in the order below.

Does the patient have an Advance Health Directive (AHD)?

Yes ▶ Location of the original or certified copy of the AHD:

No ▶ Name of Substitute Decision Maker/s:

Signature:

Relationship to patient:

Date: PH No:

Source of decision making authority (tick one):

- Tribunal-appointed Guardian
- Attorney/s for health matters under Enduring Power of Attorney or AHD
- Statutory Health Attorney
- If none of these, the Adult Guardian has provided consent. Ph 1300 QLD OAG (753 624)

E. Doctor/delegate Statement

I have explained to the patient all the above points under the Patient Consent section (D) and I am of the opinion that the patient/substitute decision-maker has understood the information.

Name of Doctor/delegate:

Designation:

Signature: **Date:**

F. Interpreter's statement

I have given a sight translation in

.....
(state the patient's language here) of the consent form and assisted in the provision of any verbal and written information given to the patient/parent or guardian/substitute decision-maker by the doctor.

Name of Interpreter:

Signature: **Date:**

DO NOT WRITE IN THIS BINDING MARGIN

Consent Information - Patient Copy Breast Aspiration under Imaging

1. What is a Breast Aspiration?

A breast aspiration is a procedure that removes liquid from a pool of fluid (collection) in the breast. A collection may contain clear fluid, pus or blood.

A breast aspiration is where a needle is put into the breast and the collected fluid is removed. If needed, a sample may be taken and sent to pathology for testing.

These procedures are done with guidance from imaging machines such as Ultrasound or Mammography.

2. Will there be any discomfort, is any anaesthetic needed?

This procedure may require an injection of local anaesthetic. It is used to prevent or relieve pain, but will not put you to sleep.

3. Preparation for the procedure

The medical imaging department will give you instructions on how to prepare for your procedure.

- Please tell the staff if you are or suspect you might be pregnant.
- If you take Aspirin, Warfarin, Clopidogrel (Plavix and Iscover) or Dipyridamole (Persantin and Asasantin) or any other drug that is used to thin your blood ask your doctor/health practitioner if you should stop taking it before the procedure as it may affect your blood clotting.
- List or bring all your prescribed drugs, those drugs you buy over the counter, herbal remedies and supplements.
- Do not drink any alcohol and stop recreational drugs 24 hours before the procedure as these may alter the affects of the sedation anaesthetic. If you have a drug habit please tell your doctor.

4. During the procedure

Pictures will be taken of the procedure site.

The doctor will inject local anaesthetic.

Using imaging as a guide the doctor will insert a needle. Once the needle is in the collection, the fluid will be removed.

You must remain as still as possible. At times, you may be asked to hold your breath.

At the end of the procedure, the needle will be removed and a dressing applied.

5. After the procedure

The recovery time varies between 15 minutes to 2 hours.

Staff will discuss with you what level of activity is suitable after your procedure.

6. What are the risks of this specific procedure?

The risks and complications with this procedure can include but are not limited to the following.

Common risks and complications include:

- Pain or discomfort at the puncture site. This may require medication.
- Bleeding or bruising may occur. This is more common if you take Aspirin, Warfarin, Clopidogrel (Plavix and Iscover) or Dipyridamole (Persantin and Asasantin).
- Failure of local anaesthetic which may require a further injection of anaesthetic or a different method of anaesthesia may be used.
- Nerve damage, is usually temporary, and should get better over a period of time. Permanent nerve damage is rare.

Less common risks and complications include:

- Infection, requiring antibiotics and further treatment.
- Damage to surrounding structures such as blood vessels, organs and muscles, requiring further treatment.
- Excessive bleeding from the puncture site. This may require other treatment and/or corrective surgery.
- An allergy to injected drugs, requiring further treatment.
- The procedure may not be possible due to medical and/or technical reasons.

Rare risks and complications include:

- Pneumothorax, collection of air around the lining of the lungs. This usually stops by itself but sometimes may require the insertion of a tube into the chest.
- *(Mammography only)* An increased lifetime cancer risk due to the exposure to x-rays.
- Seizures and/or cardiac arrest due to local anaesthetic toxicity.
- Death as a result of this procedure is *very rare*.

7. What are the safety issues when you leave hospital?

Take care not to injure or bump area that has been numbed with the local anaesthetic as you will not be able to feel it.

Go to your nearest Emergency Department or GP if you become unwell or have;

- pain, unrelieved by simple pain killers
- continuous bleeding or swelling at the puncture site
- redness or inflammation at the puncture site
- fever
- other warning signs the doctor may have asked you to be aware of.