



BIOPSY

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Many medical conditions, not only cases of cancer, may be diagnosed by removing a sample of tissue for lab examination. This procedure is called a biopsy, which is performed by a variety of techniques. After the doctor obtains the skin biopsy specimen, it is sent for examination to another doctor, the dermatopathologist or pathologist, who prepares a written report with information designed to help manage the condition properly.

TYPES OF BIOPSIES

Excisional biopsy: The entire lump or tumor is removed (excised).

Incisional biopsy: A portion of the lump is removed surgically. This type of biopsy is most commonly used for tumors of the skin to distinguish benign conditions and diagnose cancers and other tumors. This can be done by 'shave', 'curette' or 'punch' methods.

A "**shave**" slices a surface portion off with a blade. A "**curette**" scrapes off the surface. These are often done to remove a small growth and confirm its nature at the same time.

A "**Punch**" biopsy is typically used by dermatologists to sample skin rashes and small masses. After a local anesthetic is injected, a biopsy punch, which is basically a small (1 to 4 mm in diameter) version of a cookie cutter, is used to cut out a cylindrical piece of skin. The hole may be closed with a suture and heals with minimal scarring.

Fine needle aspiration: A needle no wider than that typically used to give injections is inserted into a lump (tumor), and a few cells are drawn up (aspirated) into a syringe.

SPECIMEN PROCESSING

After the specimen is removed from the patient, it is processed into thin, stained slices mounted on a glass slide. Frozen sections, a more rapid technique allows one to have a diagnosis within a few minutes of removing the specimen. This is often done when growths are removed in a hospital or by a Mohs surgeon. Unfortunately, the quality of the sections is not nearly as good as those of the regular ('permanent') slides.

PATHOLOGIC EXAMINATION

This is the interpretation of the slides. The report produced has three main parts: the gross description (how the specimen as it looks to the naked eye, and its size and shape), the microscopic exam (the appearance of the cells under the microscope) and the diagnosis (the "bottom line" of the report).

The biopsy test is not an exact science. In cases of difficult or unusual problems, second opinions can be helpful.

This information has been provided to you compliments of the American Osteopathic College of Dermatology and your physician.

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