

When a doctor finds a lump in a patient's neck they may decide to take a biopsy. A biopsy is the removal of cells or tissue for analysis to determine the cause of the abnormality.

# **Different Types of Neck Mass Biopsy**

## Fine Needle Aspiration (FNA) Biopsy

This method utilizes a small needle. The needle is placed directly into the growth to draw out a few cells for analysis. The doctor may locate the growth by feel, ultrasound, or CT.

- **"By Feel" FNA**: If the doctor is able to physically feel the lump, they can place the needle directly into it to extract cells.
- Ultrasound-Guided FNA: If the tumor is difficult to locate or is near important structures, ultrasound imaging can be used to help the doctor navigate the needle directly into the mass.
- **CT-Guided FNA**: If neither of the above FNA techniques can sufficiently locate the tumor, the patient may undergo a few low-dose CT scans—first to localize the tumor and then to accurately insert the needle into the mass to extract cells.

#### **Core-Needle Biopsy**

This method utilizes a larger needle to extract a core of tissue from the lump. Removing more cells may provide more conclusive results than an FNA.



Please note that this information is intended for educational purposes. It does not replace consultation with your doctor, and it should not be interpreted as medical advice. We encourage you to speak to your health care provider if you have further questions or concerns regarding your medical care.

### **Open Neck Biopsy**

This method is more invasive and involves making an incision over the mass and removing either part of or the whole mass for further analysis. A doctor may consider this if less invasive methods aren't feasible.

## Sentinel Lymph Node Biopsy

Cancer cells from a primary tumor site can spread to regional lymph nodes. A sentinel lymph node biopsy identifies, removes and examines the first lymph node(s) that the cancer may have spread to. These lymph nodes are referred to as the sentinel lymph node(s). To help the surgeon locate the lymph nodes, the patient will receive an injection made up of a special radiolabeled material and/or blue dye near the site of the primary tumor. Once the first lymph node has been removed it is sent to a pathologist, who will examine whether the cells are cancerous or not. This information will allow the doctor to determine if removal of the remaining nearby lymph nodes is necessary.



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