Transjugular Liver Biopsy

WHY IS THIS TEST DONE:
A liver biopsy is a procedure in which small pieces of liver tissue are extracted and sent to a laboratory for evaluation. Usually the biopsy is performed by inserting a needle through the skin into the liver; this can sometimes result in bleeding from the liver into the abdomen.

A child with increased risk of bleeding or with a large amount of fluid in the abdomen will require a different type of biopsy, called a transjugular liver biopsy. During this procedure, we thread a catheter (a thin tube) through the internal jugular vein in the neck and into the liver. This way, if the liver bleeds, blood goes into a vein, instead of the abdomen.

WHAT TO EXPECT:
The patient will arrive at the hospital and enter at the main entrance. The patient will report in to register and review insurance. The patient should have a copy of the orders as a precaution. The patient will be brought back to the department where we will confirm the patient’s identity, explain the procedure, and review their history.

Using ultrasound and live X-ray (fluoroscopy) for guidance, the doctor will insert the catheter into the vein in the neck and guide it into the primary vein in the liver. A tiny needle will be inserted through the catheter and into the liver to obtain pieces of tissue. (Your child will be protected by an X-ray shield during the procedure.)

Your child will be asleep, either through IV sedation or general anesthesia. We might have to place an IV for sedation. Your child will feel a needle prick when we inject local numbing medicine before we place the IV.

Your child may experience some discomfort and will need to stay in bed for four hours in the recovery area. After approximately four hours, a blood count (CBC) will be taken to monitor your child for any bleeding. If the test is normal, children who are outpatients will be able to go home.
Leave the bandage on your child’s neck for 24 hours. Then you may remove the gauze and the clear bandage; do not remove the Steri-Strips® (white strips). If the Steri-Strips haven’t fallen off after seven days, you may remove them.

Your child shouldn’t shower or take a bath for 24 hours. After that, your child may have a sponge bath or a regular bath, as long as you keep the neck dry. Once the Steri-Strips fall off, regular baths and showers are fine.

Your child should rest the day of the procedure. The next day, your child can return to light activities but should avoid strenuous activity and contact sports for one week.

**HOW LONG WILL IT TAKE?**
The procedure takes approximately one hour.

**PREPARATION:**
If your child was given a copy of the exam order or a prescription for the exam, you must present it at time of registration. Patients should expect to receive instructions from a radiology nurse two to three days prior to procedure.

**PRECAUTIONS:**
The precautions of the actual procedure will be discussed with the Pediatric Radiologist.

Contact us immediately if your child experiences any of the following:

- Fever higher than 101° Fahrenheit
- Bleeding at bandage site
- Dizziness
- Pain, especially in the right shoulder

Monday through Friday, call EPCH Radiology Department at (915) 242-8510. After hours, you may call EPCH Emergency Department at (915) 298-5443.

**CONTRAINDICATIONS:**
Please notify your physician and the Imaging staff if you have any allergies, especially to local anesthetics such as lidocaine.

**MEDICATION ISSUES:**
If the patient was given an order (prescription) for the exam, they must have that with them at the time of the exam. Patient should avoid taking anti-inflammatory medication 24-48 hours prior to procedure (ex: Advil, Motrin, ibuprofen, Aleve, naproxyn, etc), aspirin, plavix, coumadin,
or any other blood thinners should be stopped prior to exam. Please be sure to discuss discontinuation or prescribed medications with your physician, they will tell you how many days prior to the procedure to discontinue you medications. Do not discontinue without consultation with your physician first.