

## Renal Unit

# Having a kidney biopsy – a guide for inpatients and outpatients

### What is a kidney biopsy?

- A kidney (renal) biopsy is a simple, routine, procedure to obtain a sample (specimen) of tissue from the kidney.

### Why is this necessary?

- If you're reading this you have probably already been seen by one of the kidney doctors from Addenbrooke's, either in the outpatient clinic or on the ward. If a doctor from elsewhere has referred you, we may have only spoken to you over the telephone.
- In any case you will either have been told that you have a problem with your kidneys, or another illness that might affect them.
- Although some kidney diseases can be diagnosed by blood tests or imaging (ultrasound or x-ray), often the only way to make a full diagnosis is to obtain a sample of your kidney tissue (a 'biopsy specimen') and look at it under the microscope to see what changes are happening.
- We may also perform kidney biopsies to get information on conditions that are affecting other parts of your body, or to check the effect of treatment on your kidneys.
- The overall aim is to understand the disease that is affecting you and to treat you more effectively.

### Where does this happen?

- Biopsies are either performed whilst you are an inpatient at Addenbrooke's, or as a 'day case' procedure in the Medical Day Case Unit. Depending on the situation, the procedure is usually carried out in the procedure room. Occasionally they are carried out in theatre under general anaesthetic but this is a rare event.

### I have been asked to come to the Medical Day Case Unit – what does this mean?

- About half of our biopsies are performed on the Medical Day Case Unit.

- This involves attending the unit at about 0900, after which the nurses will check your blood results and blood pressure. (Blood may need to be taken by the nursing staff). If you have not already had one, you may also have an ultrasound scan of the kidneys at the same time. An ultrasound involves gel being applied directly to the skin over the kidney area, a probe will then be rubbed over the gel area to give an image on a screen.
- The blood tests are to ensure that the biopsy will be safe, and the results usually come back at about midday.
- You will then be seen by one of the kidney doctors who will explain the details of the procedure and obtain your written consent.
- Occasionally your biopsy will be cancelled – normally because your blood pressure is too high or if there is a problem with the blood tests. We may then change your medication and re-schedule the biopsy for when the results are satisfactory.

## What does the procedure involve?

- You will be asked to change into a hospital gown.
- You will be asked to lie on your front, with a pillow under your abdomen and the doctor will scan your kidneys with an ultrasound machine to see the correct site for the biopsy. They will then inject some local anaesthetic under the skin (this may sting). This will numb the area before taking the biopsy.
- The biopsy specimens are taken from one kidney with a fine needle. Normally a few specimens (each only a few millimetres in size) are taken, this may feel like a pin prick.

## What happens afterwards?

- After the biopsy you will be asked to lie on your back for the next six hours as this reduces the chance of bleeding. During this time you can eat and drink but you may have to use a bedpan/bottle.
- Your blood pressure and pulse will be taken as required to see if there are any signs of bleeding.
- If there are no problems you will then be free to go home (at about 1800-2000) but **please arrange for someone else to drive.**
- If you are an outpatient occasionally we may need to keep you in hospital if you have experienced any side effects.
- You should avoid strenuous activity and lifting for the next week.
- You may feel some bruising where the biopsy has been taken. This will go away and paracetamol is a safe painkiller to use if needed.

## What can go wrong?

- The most common problem (about 1 in 20 biopsies) is that we don't get enough kidney tissue to make an exact diagnosis. This may mean repeating the biopsy.
- Other problems relate to bleeding. About 1 in 20 patients will notice some blood in their urine – if this happens we may need to keep you in hospital (usually only for a day). 1 in 200 patients will need a blood transfusion.
- In about 1 in 1000 patients the bleeding will not settle down by itself and we will need to ask the radiologists or the surgeons to perform an operation. The worst scenario is that a kidney may need to be removed if bleeding does not settle – but this is very rare (about 1 in 10,000).

## When will I get my results?

- After the biopsy we send the specimens to the pathology laboratory to be examined under the microscope.
- Outpatients preliminary results are usually available a few days later, but the full results usually take two to three weeks. As an inpatient the results are usually back within two working days.
- Outpatients will be seen in clinic a month after the biopsy to discuss the results and further treatment, but we may contact you earlier depending on the results.

## I am having a transplant kidney biopsy – is the procedure the same?

- Yes – although you will be asked to lie on your back during the procedure.

## Where can I get more information?

- Please ask the doctors and nursing staff when you see us.
- "Kidney dialysis and transplants" and "Kidney failure explained", both by Dr Andy Stein and Janet Wild (Class Publishing London – original 1999), are two good books on the subject, published annually.
- The National Kidney Foundation website - [www.kidney.org](http://www.kidney.org) - has further information.

This document is also available in other languages, large print and audio format upon request – 01223 216032 or [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk)

本文件也可應要求，製作成其他語文或特大字體版本，也可製作成錄音帶。  
**Cantonese**

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**Gujarati**

A richiesta questo documento è anche disponibile in altre lingue, a caratteri grandi e in formato audio.

**Italian**

ئەم بەلگەییە ھەرۆھە بە زمانەکانی کە، بە چاپی درشت و بە شریتی تەسجیل دەس دەکەوێت

**Kurdish**

درخواست پر یہ دستاویز دیگر زبانوں میں، بڑے حروف کی چھپائی اور سننے والے ذرائع پر بھی میسر ہے۔

**Urdu**



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## Document History

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Contact number	01223 217827
Published	May 2006
Review date	May 2008
File name	Kidney_biopsy.doc
Version number	1
Ref	PIN596