

Quick Tips - Surgery

Biopsy – Incisional vs. Excisional?

Cheri Nielsen, DVM, MS, DACVS

Providing accurate treatment recommendations and prognosis for cancer patients requires a correct diagnosis. It is often tempting to perform marginal surgical excision in patients that present with a mass. **While excisional biopsy has its indications, it may compromise future treatment options if performed without consideration for tumor type.** To optimize patient care, FNA/cytology should be performed on all accessible masses prior to biopsy or excision. If cytology reveals mast cell tumor, soft tissue sarcoma, or another tumor that requires wide margins an appropriate resection can be planned as the initial surgical procedure. If cytology reveals a benign lesion, therapeutic excisional biopsy is appropriate. If cytology is non-diagnostic, the next step may be excisional or incisional biopsy. Excisional biopsy is typically reserved for small masses that can be readily removed without reconstructive efforts. When excisional biopsy is performed, the surgical area should be kept as small as possible because if a malignancy is identified, definitive surgery will need to include 3cm margins beyond the edge of the biopsy suture line, not the original tumor. Inadequate margins may compromise a potentially curative surgical attempt. If a benign tumor is diagnosed, narrow excision will have been adequate and is typically curative. **Incisional biopsy is indicated when the mass is large or located in an area that will be difficult to address surgically.** When performing incisional biopsy, always consider the possibility of a future definitive surgical excision. Tissue can be obtained by Tru-Cut needle, scalpel, or punch instruments. For deeper masses an incision is made in overlying skin or oral mucosa to expose the tumor prior to obtaining a sample by scalpel wedge or punch biopsy. It is important to obtain multiple tissue samples to maximize the chance of an accurate diagnosis, and all samples can often be collected via the same incision by directing the instrument to sample various regions of the tumor. **Keep in mind that the entire biopsy tract must be included in any future definitive surgical excision.** Do not advance the Tru-Cut needle or other instrument beyond the extent of the mass, and always enter directly over the tumor rather than at or beyond its edge.



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901 East Francisco Blvd.
San Rafael, CA 94901

415.456.7372
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