

Patient information

Having a skin biopsy

This leaflet explains the process of undergoing a skin biopsy, along with the benefits and risks of the procedure. Please feel free to speak to a doctor or nurse caring for you with any questions.

What is a skin biopsy and why do I need it?

Skin biopsies are for diagnosing skin conditions and removing abnormalities, such as moles.

A biopsy involves a small piece of skin being removed from the affected area to be looked at closely under a microscope. This will be removed under local anaesthetic which means it will feel numb and pain-free. You will be awake for the procedure. There are no alternatives to a skin biopsy to make a correct diagnosis.

Before your biopsy

If you are taking any blood thinning medications also known as antiplatelets or anticoagulants, please let a member of staff know. Examples of blood thinning medications include warfarin, rivaroxaban, aspirin or clopidogrel. If you are unsure if your tablets are blood thinning, please speak to a member of staff. We do not recommend you stop taking these medications, but if you take warfarin we will check your INR (blood clotting level) on the day of surgery. If this is elevated, we may postpone your procedure.

If you have a pacemaker, or other heart device such as a defibrillator, please let your team know. If you are allergic to any medications, or have had previous reactions to local anaesthetic, for example during a dental procedure, please inform us.

Depending on the type of biopsy, you may or may not need stitches to close your wound. Please inform a member of the team if you have planned to travel within two weeks after your biopsy, as it will affect having stitches taken out if you have them after 7-10 days. Alternatively, we may put dissolving stitches in.

On the day of your biopsy, eat and drink as normal. Some people experience light-headedness after their procedure so this may help.



Consent – asking for your consent

Before we begin your procedure, we will ask you to sign a consent form after discussing the risks and benefits of the procedure. If you are happy to proceed, the consent form states you agree to have the treatment and understand what is involved. If you would like more information about our consent process, please speak to a member of staff caring for you.

The short term risks of a biopsy include infection, bleeding and swelling of your wound. Although the biopsies taken are not large, you will have a scar.

What happens during my skin biopsy?

Once the consent form is signed, we will mark the area to biopsy and clean the area. We will give an injection of local anaesthetic to the area and allow this time to go numb. It may feel like a bee-sting for a few seconds, but after this you will not feel any pain. It is normal to feel pulling or pressure during the procedure whilst we take the biopsy. Sometimes we may need to take more than one biopsy, but this will be discussed beforehand if that is the case. The wound will either be cauterised and left to heal by itself, or closed with stitches. Stitches will need to be removed by your GP surgery. Usually, the procedure takes up to 30 minutes.

What happens after the procedure?

A nurse will dress your wound and explain how to look after it at home. This will be written on an aftercare leaflet given to you after the procedure. If you have stitches, your nurse will also discuss arrangements for their removal. You will be able to leave hospital as soon as you feel ready, and can eat and drink as soon as you wish.

Will I have any pain or discomfort?

The local anaesthetic will begin to wear off about 30 minutes after the operation. If you experience any discomfort from your wound, you can take simple painkillers such as paracetamol. Please avoid aspirin or other non-steroidal anti-inflammatory tablets such as Ibuprofen for the first 48 hours post-surgery. Always follow the instructions on the packet and never take more than the recommended dose. Check that the painkillers will not react with any other medicines you are taking. If you are unsure or if you have allergies to any medicines, speak to your pharmacist.

Large print and other languages

This information can be made available in alternative formats, such as easy read or large print, and may be available in alternative languages, upon request. For more information, speak to your clinical team.

এই তথ্যগুলো সহজে পড়া যায় অথবা বৃহৎ প্রিন্টের মত বিকল্প ফরম্যাটে পাওয়া যাবে, এবং অনুরোধে অন্য ভাষায়ও পাওয়া যেতে পারে। আরো তথ্যের জন্য আপনার ক্লিনিক্যাল টিমের সাথে কথা বলুন।

Na żądanie te informacje mogą zostać udostępnione w innych formatach, takich jak zapis większą czcionką lub łatwą do czytania, a także w innych językach. Aby uzyskać więcej informacji, porozmawiaj ze swoim zespołem specjalistów.

Macluumaadkaan waxaa loo heli karaa qaab kale, sida ugu akhrinta ugu fudud, ama far waa weyn, waxana laga yabaa in lagu heli luuqaado Kale, haddii la codsado. Wixii macluumaad dheeraad ah, kala hadal kooxda xarunta caafimaadka.

Bu bilgi, kolay okunurluk veya büyük baskılar gibi alternatif biçimlerde sunulabilir, ve talep üzerine Alternatif Dillerde sunulabilir. Daha fazla bilgi için klinik ekibinizle irtibata geçin.

یہ معلومات متبادل فارمیٹس میں دستیاب کی جا سکتی ہیں، جیسا کہ پڑھنے میں آسان یا بڑا پرنٹ اور درخواست پر متبادل زبانوں میں بھی دستیاب ہو سکتی ہیں۔ مزید معلومات کے لیے، اپنی کلینکل ٹیم سے بات کریں!۔

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Please contact us if you need general information or advice about Trust services:

www.bartshealth.nhs.uk/pals

Reference: BH/PIN/1143

Publication date: June 2022

All our patient information leaflets are reviewed every three years.