



**INFORMED CONSENT TO FINE NEEDLE ASPIRATION/CORE BIOPSY**  
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PATIENT NAME: \_\_\_\_\_

1. I hereby authorize and direct Mai Gu, MD, of PathCare Diagnostics Inc. to perform fine needle aspiration (FNA) and/or core biopsy in my \_\_\_\_\_.
2. The details of FNA and/or core biopsy procedure have been explained to me clearly as follows:
  - a. FNA is a minimally invasive, simple, safe, and accurate diagnostic procedure to determine the nature of a palpable lump in any parts of the body.
  - b. The procedure starts with cleansing the skin overlying the palpable lump. This will be cold.
  - c. The skin may or may not be sprayed or injected with anesthetics (please let the doctor know if you are allergic to Novocain or xylocaine).
  - d. The doctor will then insert a 27-gauge needle into the lump followed by gentle poking back and forth a few times. This will only take 5 – 10 seconds before the needle is removed.
  - e. The aspiration may be repeated until adequate material is obtained. In most patients, it ranges from 1 to 3 times. Every time a needle is placed into the lump, a new sterile needle will be used.
  - f. After the completion of the procedure, a bandage will be placed over the aspiration site to prevent infrequently occurring bleeding. Routine activity can be carried out immediately after the procedure. No specific precaution is necessary.
  - g. When core biopsy is formed, local anesthesia will be applied. An 18-gauge needle will be used to obtain tissue cores for histologic diagnosis and other ancillary studies.
3. The risks, complications, and expected benefits of FNA and/or core biopsy procedure have been explained to me clearly as follows:
  - a. The risks of FNA are, for the most part, clinical. A definite diagnosis may not be made in 5-10% of cases. Rarely a false negative or positive result may occur.
  - b. The complications of FNA are rare. These include minor bleeding at the aspiration site, possible bruising, tenderness, small hematoma, and remote possibility of localized infection. On exceedingly rare occasions, if the patient is anxious or apprehensive about needle punctures, he/she may experience lightheadedness or may faint before, during, or after the procedure.
  - c. The benefits of FNA include efficiently providing the patient and the referring physician with the diagnostic information needed to plan for appropriate follow up or treatment. The benefits of core biopsy include confirmation of cytologic diagnosis and procurement of tissue for further studies.
4. The alternative forms of diagnosis and treatment have been explained to me clearly as open surgical biopsy. The benefits are similar; however, the possible complications include those of surgery associated with higher cost.
5. As part of quality assurance procedure at PathCare Diagnostics Inc, I agree to be contacted for any follow-up information of the mass (nodule) biopsied. If any surgery is performed or to remove the mass (nodule), I authorize PathCare Diagnostics Inc. to obtain pathology report and/or slides for correlation purposes.

***YOUR SIGNATURE BELOW CONSTITUTES THAT: (1) YOU HAVE READ, UNDERSTOOD, AND AGREED TO THE CONDITIONS OF THIS DOCUMENT; (2) THE PROCEDURE SET FORTH ABOVE HAS BEEN ADEQUATELY EXPLAINED TO YOU, YOU HAVE HAD THE OPPORTUNITY TO ASK QUESTIONS, AND YOU HAVE RECEIVED ALL OF THE INFORMATION YOU DESIRE CONCERNING FNA AND/OR CORE BIOPSY PROCEDURE, AND (4) YOU AUTHORIZE AND CONSENT TO THE PERFORMANCE OF THE BIOPSY AND ANY LOCAL ANESTHESIA REQUIRED IN CONNECTION WITH SUCH PROCEDURE.***

\_\_\_\_\_  
DATE

\_\_\_\_\_  
TIME

\_\_\_\_\_  
SIGNATURE OF PATIENT (OR LEGAL GUARDIAN)

\_\_\_\_\_  
WITNESS