Kidney Biopsy

Fact Sheet

A kidney biopsy is an essential tool in the diagnosis of kidney disease

What is a Renal (Kidney) biopsy?
A kidney biopsy is an important test to diagnose kidney disease and to monitor kidney transplants. A biopsy is a very small sample, which is used to examine kidney structure in minute detail.

Where and when is the biopsy done?
You should arrive at the outpatient biopsy suite at 8:00 am on the morning of the biopsy.
The address is 622 West 168 th Street, 14 th Floor in the Transplant Clinic. TEL: (212) 305 6781.

What should I do about diet and medications?
Eat a light breakfast.
Take all medications and insulin as usual.
If you are on Coumadin (warfarin) please let the doctor know at the time of scheduling the biopsy.
Aspirin or painkillers containing aspirin, motrin, alleve (and similar drugs) should be stopped 1 week before the biopsy.
Tylenol is the only painkiller that is allowed.

How is the biopsy performed?
Your doctor with the help of an ultrasound machine does all renal biopsies.
The biopsy is taken from one kidney.
If it is a biopsy of your own kidney, you are asked to lie on your tummy. The skin over your back just below the ribs is cleaned with antiseptic. Some local anesthetic is put into the skin which stings a little at first. More local anesthetic is then put into the muscle of the back. When the skin and tissues are completely numb the doctor localizes the kidney with ultrasound and then takes the biopsy with a needle. You should not be aware of any pain but may feel a little pressure when the biopsy needle is used. The doctor may need to repeat the procedure a few times to ensure an adequate sample.

If it is a biopsy of a transplant kidney you will be asked to lie on your back, and the local anesthetic will be put into the skin and then the muscles of your tummy over the transplant. The biopsy is then taken in the same way.

What happens after the biopsy?
Following the biopsy, you will rest in bed for at least 6 hours. Your blood pressure and pulse will be monitored at regular intervals. The first urine you pass should be given to the nurse, to see if there is any bleeding. You will be able to eat and encouraged to drink plenty of fluids. 1 or more blood samples may be drawn to look for internal bleeding.

When do I get the results?
It takes 24 hours for the laboratory to give a preliminary report and up to a full week to get a full written report. Your doctor will discuss the results of the biopsy with you at the clinic shortly after the biopsy.
What are the risks of renal biopsy?
Complications of renal biopsy are rare. The most important is bleeding, and you are monitored after the biopsy to detect bleeding. Changes in pulse rate, blood pressure and blood in the first urine after the biopsy may be signs of bleeding. The majority of bleeding is minor and needs no special treatment.

If there is an unexpected amount of bleeding, you may need a blood transfusion, and in very rare cases a further special X-ray called an angiogram is done to find the bleeding point and a procedure may be required to stop the bleeding. Visible blood can appear in the urine in 3-5% of cases. Requiring a blood transfusion or angiogram is very rare, less than 1% of cases.

You may have mild pain or discomfort after the biopsy. You can take Tylenol 1-2 tablets every 6-8 hours for the first day. If you have more severe pain after the biopsy, you should contact your physician.

Do not take any aspirin, aspirin containing painkillers or anti-inflammatory drugs for 1 week after the biopsy - unless you have been given other instructions.