What is a Sentinel Lymph Node Biopsy?

- The purpose of a sentinel lymph node biopsy is to find out if any cancer has left the breast.
- A tracer is injected into the breast, either the morning of surgery, or while you are asleep during surgery.
  - A radioactive tracer may be used. In this case you will go to nuclear medicine the morning of your surgery for the injection.
  - Blue dye may be used. In this case, you will not go to nuclear medicine, but instead the injection will be done during your surgery. Blue dye can turn your urine green or blue for a couple of days after surgery, and some patients develop a small lump right at the injection site.
- The tracer is picked up into the first lymph node that drains the breast. It is located between the breast and underarm. This is called the “sentinel node”. This may be 1-3 nodes.
- In selected situations, during your surgery, the sentinel node is sent to be looked at under the microscope. The pathologist will call up to the O.R. to tell your surgeon whether or not the node contained cancer cells.
- If the node contained cancer cells (a “positive” node), your surgeon may choose to take more lymph nodes from the underarm area. This is called an “axillary lymph node dissection”. Often this can be avoided, particularly in women having radiation.
- You will have an incision in the underarm area. This is frequently more sensitive than the breast incision. Sometimes women experience numbness near the area that is usually temporary, but may be permanent.
- A sentinel node biopsy carries a 3% risk of lymphedema. See the Lymphedema Fact Sheet for more information on this topic.

What is an Axillary Lymph Node Dissection?

- There are two main reasons that surgeons will recommend an axillary lymph node dissection:
  1. To remove cancer from your body that may have spread into the lymph nodes.
  2. To get more information about the extent of your cancer, to help make treatment decisions down the line.
- You will have an incision in the underarm area. This is frequently more sensitive than the breast incision. Sometimes women experience numbness near the area that is usually temporary, but may be permanent.
- An axillary lymph node dissection may involve taking anywhere from 4-20 lymph nodes.
- An axillary lymph node dissection carries up to a 15% risk of lymphedema. See the Lymphedema Fact Sheet for more information on this topic.
- The combination of a mastectomy and axillary lymph node dissection is a common procedure known as a “modified radical mastectomy.”