



**CHRISTIE CLINIC**  
*Medicine for Your Life*

# *Patient Discharge Instructions*

*Department of Radiology*

## **ULTRASOUND GUIDED THYROID FINE NEEDLE ASPIRATION**

**Patient Name** \_\_\_\_\_

**Type of procedure performed** \_\_\_\_\_

**Date of your procedure** \_\_\_\_\_

You had an ultrasound guided thyroid fine needle aspiration on the above listed date. Please keep this document for at least 3 days following the procedure.

### **Post Procedure instructions:**

1. You should go home and relax for the rest of the day following your fine needle aspiration procedure.
2. Do not take any blood-thinning medications or aspirin for seventy-two hours following your procedure. Tylenol may be taken as needed for any discomfort.
3. An ice pack has been sent home with you to apply to the site as needed or instructed by the physician. This will help lessen bruising and swelling, although some bruising and swelling should be expected.
4. Check the aspiration site periodically for any sign of excessive bleeding or infection.
5. You may call the radiology department (217-366-1285) regarding any questions you have following the procedure. The radiology department is staffed from 7:30 AM until 5:30 PM Monday through Friday. After these hours you may contact your physician or your local emergency room. When contacting anyone regarding complications to this procedure, please provide the type of procedure performed referenced at the top of this page.

**Patient Signature** \_\_\_\_\_

**Witness** \_\_\_\_\_