Pediatric Nephrology
Renal Biopsy

**Why is a renal biopsy necessary?**
Renal biopsies evaluate the cause of the various kidney diseases.

**Who performs the renal biopsy?**
A renal biopsy performed by the pediatric nephrology team.

**What happens during a renal biopsy?**
- Patients are sedated before the procedure. A critical care medicine doctor will monitor the child’s airway, heart rate, blood pressure, oxygenation, and respiratory rate throughout the procedure.
- The pediatric nephrologist will use an ultrasound to locate the kidneys before the biopsy is performed on one kidney.
- The area above the skin is sterilized with Chloraprep or Betadine. A numbing solution will be injected through the skin down to the level of the kidney to reduce discomfort after the procedure.
- A small needle is placed in the numb area to remove a piece of the kidney. The removed tissue is the width of a pencil lead and one-third of an inch long.

**What to expect after the biopsy:**
A Band-Aid will be placed on the back – stitches are not necessary. Typically no activity, no jumping around, and bed rest are requested for 6-8 hours after the biopsy. The doctor will review these instructions.

The doctor will offer pain medication after the biopsy to relieve discomfort. Anti-nausea medication will also be provided for nausea caused by the biopsy or anesthesia.

**What are the risks of renal biopsy?**
- Visible blood in urine (occurs in approx. 10 - 20 percent of children)
- Inadequate tissue sample requiring a repeat biopsy at a later date (approx. 1 percent of children)
- Damage or harm to the kidney that requires surgical intervention or blood transfusion (approx. 1 in 800 children)

**How long does it take to receive biopsy results?**
The biopsy specimen is sent to a lab where a pathologist examines it under a microscope. Results are typically available within two weeks. The nephrologist will review the biopsy results with you at a follow-up appointment.

**Location and Appointments**
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**Notes:**