American College of Radiology and Society of Breast Imaging Guidelines for Early Breast Cancer Detection

• Yearly mammograms are recommended starting at age forty and continuing for as long as a woman is in good health.

• Women should know how their breasts normally feel and report any breast change promptly to their healthcare providers. Breast self-exam (BSE) is an option for women starting in their twenties.

• Clinical breast exam (CBE) should be part of a periodic health exam, about every 3 years for women in their twenties and thirties and every year for women forty and over.

• Women at high risk (greater than 20% lifetime risk) should get an MRI and a mammogram every year.

• Women at moderately increased risk (15% to 20% lifetime risk) should talk with their healthcare provider about the benefits and limitations of adding MRI screening to their yearly mammogram. Yearly MRI screening is not recommended for women whose lifetime risk of breast cancer is less than 15%. To calculate your risk, visit www.cancer.gov/bcrisktool/

We encourage you to contact your healthcare provider any time you experience a breast abnormality, whether or not you are due for your mammogram or physical exam.

For detailed directions, visit our website:
www.suburbanimaging.com
How you should prepare
• Schedule your clinical (physical) breast exam prior to your mammogram. If there is an area of concern, you will be scheduled for a diagnostic mammogram.
• Schedule your mammogram the week following your period.
• If you have breast tenderness, take a mild pain medication such as ibuprofen or acetaminophen (Tylenol®) about one hour before your scheduled mammogram. If caffeine causes breast tenderness, refrain from caffeinated beverages for one week prior to your mammogram.
• If you have had mammograms performed at another facility, it is important to obtain the images before your appointment. These previous images are a key component of every mammogram evaluation and will be used for comparison.
• Do not wear deodorant, lotion or body powder on your chest or underarm areas on the day of your appointment. These can appear on the mammogram images as calcium spots.
• Arrive 5-10 minutes prior to your appointment to complete registration.
• Bring your insurance card to your appointment.
• Please inform us if there is a possibility that you may be pregnant.

What happens during your exam
During your exam, a specially qualified technologist will assist you in positioning your breast on a platform on the mammography unit. Operated by the technologist, the mammography unit will gradually compress the breast for each x-ray image. The technologist will walk behind a glass partition and the image will be taken.
You will feel pressure on your breast as it is compressed. Although breast compression may cause discomfort, you should not experience significant pain. Inform the technologist if you do experience pain as there are ways to make the exam more tolerable.
You will be asked to remain still and may have to hold your breath for several seconds as the images are captured. This reduces the possibility of a blurred image. When your exam is complete, the technologist will determine if the images are adequate for the radiologist to interpret.
The exam will take approximately 15-30 minutes.

After your exam
Your images will be examined and interpreted by a board-certified breast imaging radiologist. The findings will be sent to your healthcare provider. We will also mail you a letter with the results.
In certain circumstances, you may need further diagnostic evaluation, such as a diagnostic mammogram or an ultrasound. This does not necessarily indicate an abnormality was found or that your mammogram was not properly obtained, but that additional images are needed to ensure all breast tissue is fully evaluated.

Digital mammography
Digital mammography is a technological advancement in breast imaging. Similar to conventional mammography, the breast is compressed and low-dose x-rays pass through the breast tissue. The difference is that the images are captured by means of an electronic digital detector and viewed on a computer instead of film.
These electronic images are digitally processed and stored. Using a specialized computer system, the radiologist is able to enhance, magnify or manipulate the electronic images for more detailed evaluation. Films can also be made from electronic images.
Digital mammography has the greatest benefit to women under the age of 50, premenopausal or perimenopausal, or who have dense breast tissue.