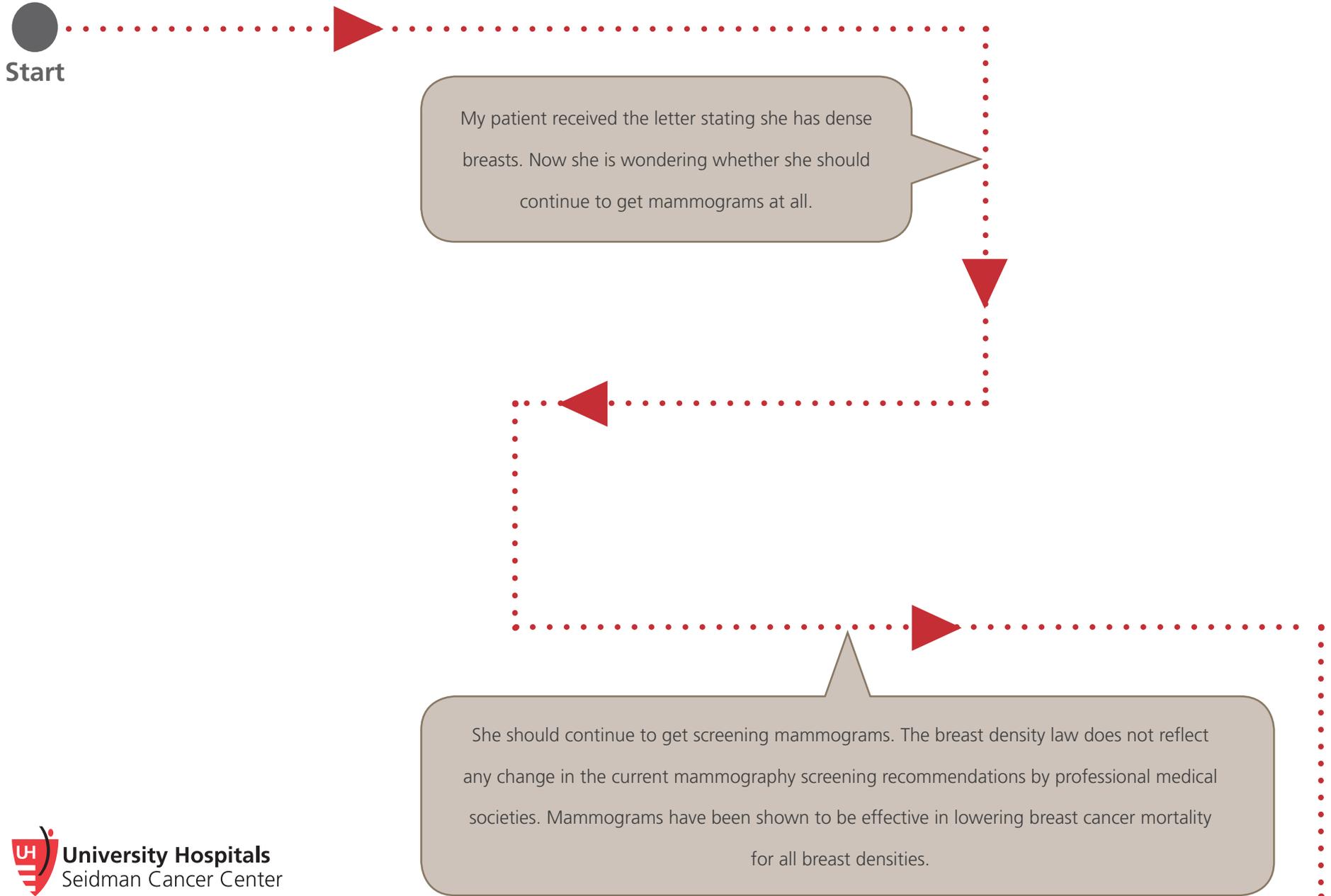
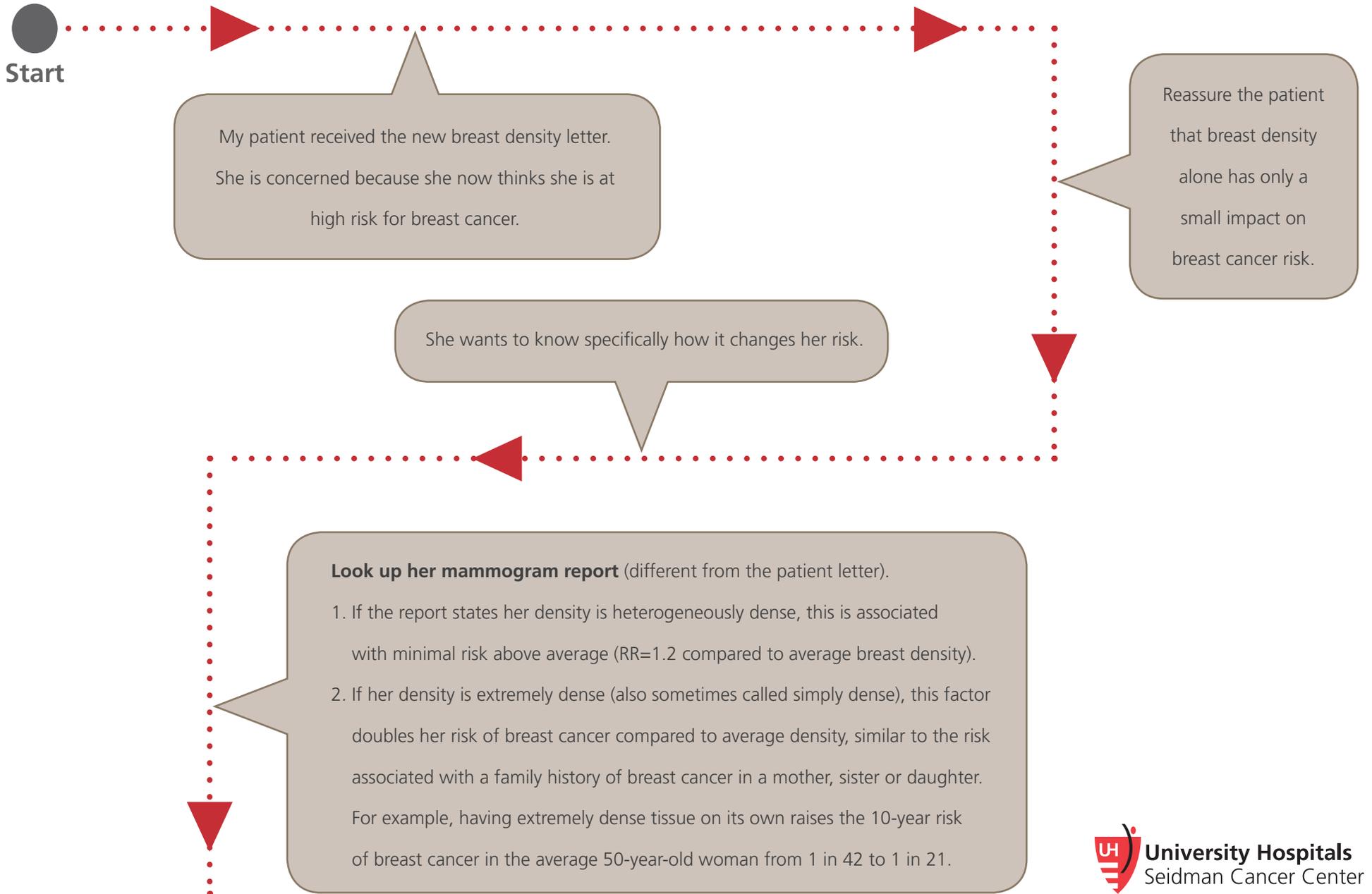


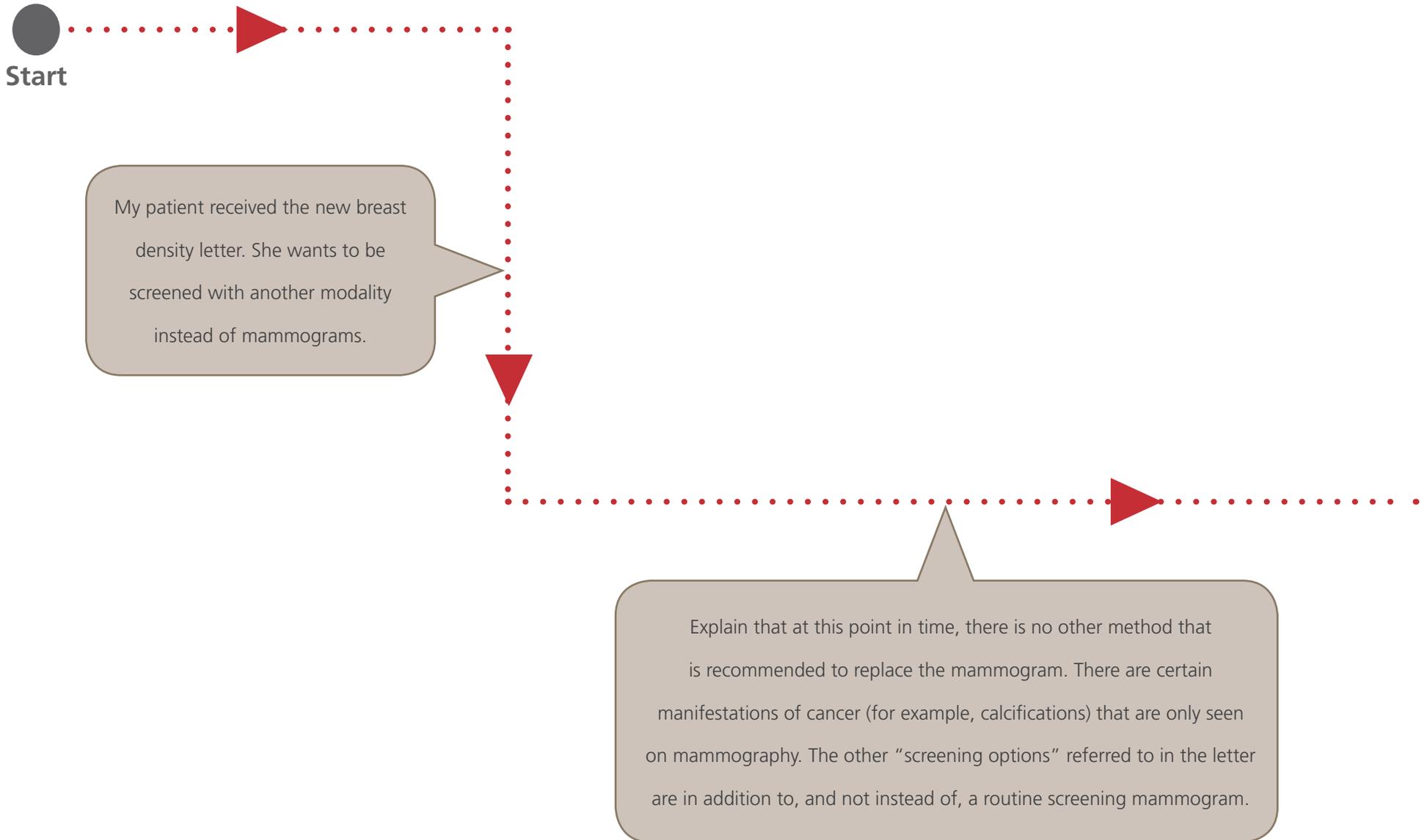
Patient received letter



Patient thinks she is at high risk for breast cancer



Patient wants to be screened with something other than mammogram



Patient wants additional tests to be screened for breast cancer

Start

My patient received the new breast density letter. She wants to get additional tests to be screened for breast cancer.

Does she have a first-degree relative (mother, sister, daughter) who had premenopausal breast or ovarian cancer, or a male relative with breast cancer? Or, does she have a history of atypia (ADH, ALH) or LCIS on a previous breast biopsy?

If the patient does not have other breast cancer risk factors, reassure her that her risk remains low. Tomosynthesis is an additional screening test with current results showing an increase in cancer detection and decreased false positives. Tomosynthesis has been shown to increase cancer detection in women with dense breast tissue. Educate the patient about the risks and benefits of screening MRI and ultrasound (higher cancer detection, but also higher false positive biopsy rates and short-term follow-up recommendations). UH offers screening tomosynthesis, ultrasound and MRI. Explain that she should check with her insurance carrier to confirm coverage of additional tests. Assist the patient in making the best personal choice to meet her needs based on these factors, using a shared decision-making process.

No

Yes

She would likely benefit from a breast cancer risk assessment. This could be performed by a physician with experience in breast cancer risk model selection and interpretation. This is available at the UH Center for Breast Cancer Prevention (216-844-BRST) at UH Cleveland Medical Center, UH St. John Medical Center and UH Chagrin Highlands Health Center.

Patient has heterogeneously dense or extremely dense breasts



Start

My patient has “heterogeneously dense” or “extremely dense” breasts and she also has other risk factors. She has completed a risk assessment showing her overall risk to be high (e.g., calculated >20 percent lifetime risk or >5 percent 10-year risk), or has a BRCA mutation or history of mantle radiation.

Recommend annual breast MRI and annual mammogram for screening. Screening breast MRI is typically covered by insurance for high-risk women. If a woman is being screened annually with MRI and mammogram, no additional screening tests (such as ultrasound) are needed. Because of the patient’s high risk, she would likely benefit from a breast cancer risk assessment. This could be performed by a physician with experience in breast cancer risk model selection and interpretation. This is available at the Center for Breast Cancer Prevention (216-844-BRST) at UH Cleveland Medical Center, UH St. John Medical Center and UH Chagrin Highlands Health Center.

