WHAT TO DO IF YOUR SCREENING MAMMOGRAM IS ABNORMAL

Introduction

Welcome to Jefferson.

The following video was made to help women who have been told that their screening mammogram results are abnormal.

We realize you may have many questions and concerns about your mammogram result. We want to help you understand what’s going to happen and what you should do next.

Remember, everyone here at Jefferson — your doctors, nurses and staff — are here to answer questions and support you along the way.

Most importantly, you are in charge of your health care. You have the right to ask your physician, radiologist (the physician that performs the imaging tests) and technicians questions until you feel you have all the information you need to make the right decision for your health.

Your Mammogram Results

This is what you need to know: if after your screening mammogram, you are asked to come back for more imaging and evaluation – it doesn’t always mean something is wrong.

There are many reasons why you may be asked to return for a follow up test. Some of the most common reasons are:

- The images from your first exam were not clear enough and they need to take more pictures.

- If you had a previous exam, these new images may appear different and more images are needed to better see the changes that have occurred.

- It could be a common cyst – a fluid filled sac.

- There are lumps of fatty tissues.

- A Fibroadenoma, which is a common rubbery lump found in breasts.

- Small lumps or deposits of calcium in the breast, called calcifications.

- Or it could be cancer in your breast.

Many women, in their lifetime will have some issue with their breasts that will need further evaluation.

Most of the time these additional exams are normal. But, if you are found to have breast cancer – early detection and treatment increase your chances of survival.

You should schedule a follow up exam as soon as possible. If you delay your follow up exam by just 3 months – and there is something wrong – your chances of survival may be reduced.
Types of Tests

The doctor may recommend one or more types of follow-up tests.

**Diagnostic Mammogram** – this is the same procedure you went through before, during your screening mammogram. – But this time, additional views of your breast will be done.

**Breast Ultrasound** – during this procedure, a gel will be put on your breast and a wand will gently move over your breast tissue to produce images. Ultrasound uses sound waves to identify abnormalities, lumps, cysts, etc.

**Breast MRI** – A breast MRI is another useful x-ray that uses a magnet, radiowaves and a computer to produce pictures of your breasts to evaluate an abnormality. During this exam – you will lay on a movable exam table face down with your breasts hanging freely into cushioned openings. Once you're comfortable and in position, a technician will move the table into an open tube. You simply have to lie very still and let the machine do its work.

If these test results are normal, the radiologist will recommend when you should schedule your next appointment for a mammogram.

If one of these tests shows that you have a cyst – the radiologist may recommend that the fluid be drained from the cyst. This procedure is called a fine needle aspiration.

Remember – cysts are never cancer. However, they can cause pain or tenderness during your menstrual cycle. By having the fluid drained, you may be more comfortable.

Fine-needle aspiration involves guiding a very fine needle into the cyst and drawing fluid from it. Once the fluid is drained the cyst will disappear.

But, if your follow up exam does show something suspicious, the radiologist will recommend another procedure – a **breast biopsy**.

A breast biopsy is a procedure performed to remove tissue or cells from the breast for examination under a microscope. Breast biopsies may be performed under local anesthesia (numbing medicine at skin level) or with some form of general anesthesia (medicine which makes you drowsy) Breast biopsies are typically done as an outpatient (you go home same day).

There are a few ways to perform a breast biopsy. The best choice depends on your situation. Some of things the doctor will consider: how suspicious the lump or abnormality in your breast looks, how large it is, where it is (location) in your breast, how many lumps are present, other medical problems you may have, and your personal preference.

**Non-surgical biopsies include:**

**Fine need aspiration biopsy** - the doctor (surgeon, radiologist) uses a thin needle attached to a syringe and places it into the lump or suspicious area to remove a small sample of fluid and/or tissue.

If the area to be biopsied can be felt, the needle can be guided into the area of the breast change while the doctor is palpating (feeling) it.

If the lump can't be felt easily, the doctor may use an ultrasound or mammogram to see the area to be biopsied on a screen to help guide them with the needle. This would either be an ultrasound guided biopsy or mammogram guided biopsy.
Core Needle Biopsy - is much like a fine needle aspiration biopsy but a hollow needle is guided into a lump or suspicious area to remove small pieces of tissue. This biopsy is mostly done with local anesthesia (numbing at skin) and you are awake the whole time. The doctor may use ultrasound or mammogram to help guide them with the needle to the suspicious area in your breast.

Stereotactic Core Breast Biopsy - uses x-ray and a computer to pinpoint exactly where to place the needle in the abnormal area seen in your breast. This type of biopsy is often used to biopsy small calcifications (calcium deposits) in your breast.

Surgical biopsy - is done in the Operating Room by a Surgeon. The surgeon removes part or all of a lump or suspicious area through an incision into the breast. There are two types of surgical biopsies. – Incisional and Excisional. These biopsies are often done by giving local anesthesia (numbing your breast area) and you may also be given medicine to make you drowsy.

During an incisional biopsy, a small part of the lump is removed and sent to pathology for the pathologist to review under the microscope.

During an excisional biopsy, the entire lump or abnormal area is removed and also a surrounding margin of normal-looking tissue. This tissue is sent to pathology for the pathologist to review under the microscope.

Usually it takes 3 to 5 business days to get your results. The doctor who performed the biopsy (radiologist or surgeon) will notify you about the results either by phone or having you come into the office.

If a benign (not cancer) condition is diagnosed, the doctor will give you instructions on when to have your next mammogram and any other needed follow-up care or treatment.

If the results of the biopsy indicate you have breast cancer it is important to remember you are not alone. The Jefferson Breast Care Team is here for you to provide information and help you decide on your best treatment option.

Facing a major illness like breast cancer is stressful and may make you feel afraid or angry. Reaching out for support from family, friends, the community and love ones can help you.

You can also count on the Jefferson Breast Care team to give you support throughout your treatment. Our team will help guide and coordinate your care and assist you with making treatment decisions.

We have doctors specializing in breast disease, including surgeons, radiologists, medical and radiation oncologists, a breast care coordinator, nurses, social workers and staff to make sure you receive the best care.
Getting The Information You Need

As we discussed in the beginning of this video, you have the right to ask questions until you feel you have all the information you need to make decisions about your care.

Some questions you may want to ask are:

• Where do I go for my follow up exam?
• Will my insurance cover follow up exams?
• What do I do if I don’t have insurance?
• Do I need a prescription in order to get my follow up exams?
• Does this mean I have cancer?
• How long will the procedure take?
• Can I come alone or should I bring someone with me?
• What type of breast biopsy are you recommending and why (if biopsy is recommended)?
• May I shower and eat and drink food before the biopsy (if biopsy is recommended)?
• Will the procedure be done in the hospital or in an outpatient facility?
• How will I find out about the results? Will they be mailed or will I be called? Who will call me to tell me about the results?
• How long does it take to get results?
• What do I do next if it is cancer?

Information Your Doctor May Need

There is some important information your doctor may need to know to better help you. Some information may include:

• Have you or anyone in your family ever been diagnosed with breast cancer?
• Do you smoke or use other tobacco products?
• What medications are you taking?
• Do you have children? How old were you when you delivered your first child?
• Have had any surgeries?
• What is your medical history (any health problems)?

Taking care of your breast health and yourself is important. Getting regular screening tests is the best way to know early whether there is something wrong. Early detection and treatment of breast cancer can save your life.

At Jefferson we are here to support you every step of the way.

To schedule a mammogram call 215-955-5400.

To schedule an image guided breast biopsy call 215-955-5400.

To schedule an appointment for a Jefferson Breast Care Doctor call 1-800-JEFF-NOW (215-533-3669).