


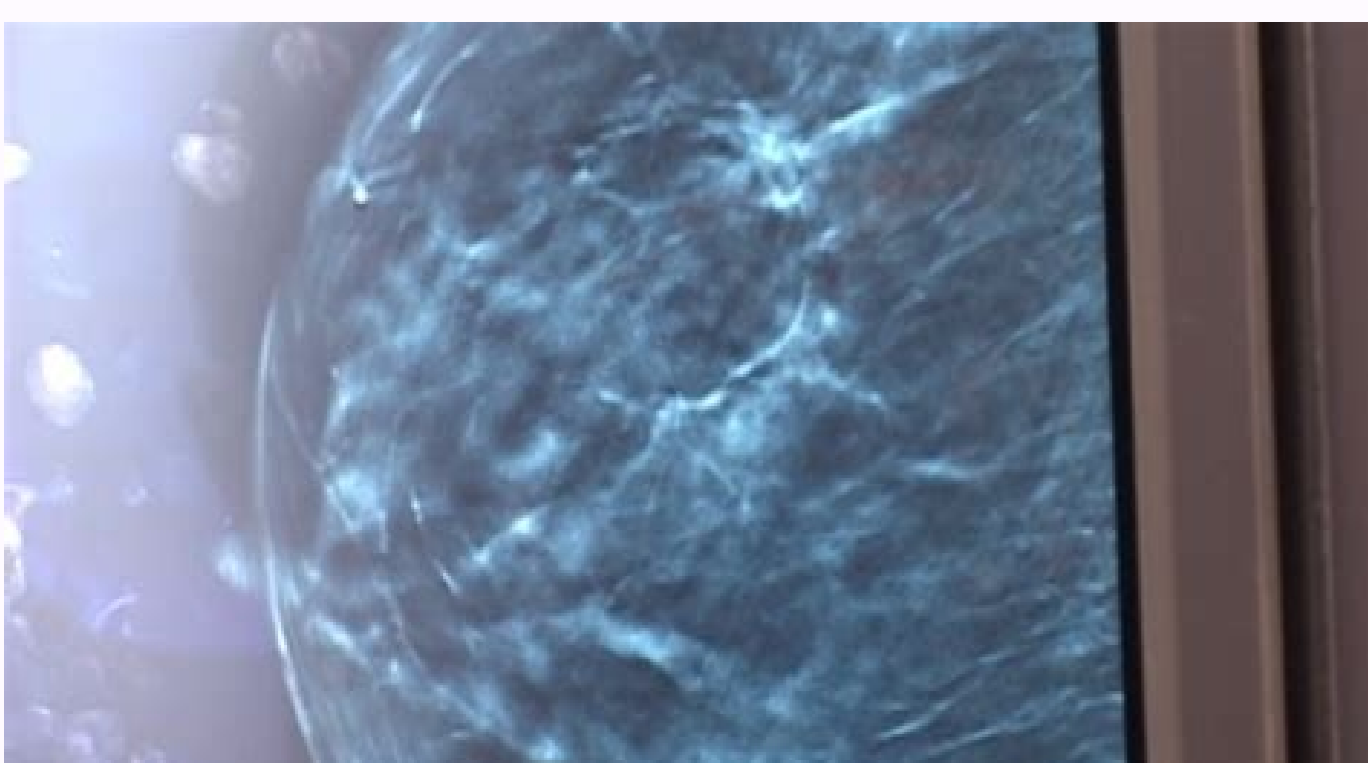
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Table 3. Breast Cancer Screening Methods

Age (y)	Methods	Comments
Starting 20s	Breast self-exam: technique should be reviewed by a health professional during physical exam	Women may find a breast lump by chance or be aware of what is abnormal (lump, swelling, skin irritation, dimpling, nipple pain, or retraction). Women may feel stressed by trying to perform the self-exam technique correctly
20s to 30s	Clinical breast exam by a health professional at least every 3 y	Provides an opportunity for women and health professionals to discuss any changes in their breasts, early detection testing, and risk factors
40s and older	Per ACS, mammogram every year and continue as long as in good health. The USPSTF recommends biennial screening mammography for women aged 50-74 y	Very effective and valuable method to detect breast cancer; however, mammogram will miss some cancers and sometimes give false-positives
High-risk women	MRI and mammogram every year for women having a lifetime risk of breast cancer $\geq 20\%$ ; <i>BRCA1</i> or <i>BRCA2</i> gene mutation (or first-degree relative); radiation therapy to the chest between ages 10 and 30 y; or certain genetic syndromes <sup>a</sup>	MRI is not recommended for women with a lifetime risk of breast cancer $< 15\%$ . MRI can detect cancer better than mammogram, but it can miss some cancers that mammogram can detect

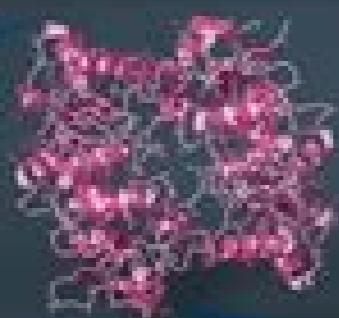
<sup>a</sup> Li-Fraumeni syndrome, Cowden syndrome, Bannayan-Riley-Ravuloba syndrome, or first-degree relatives with one of these syndromes. ACS: American Cancer Society; BRCA: breast cancer susceptibility gene; USPSTF: U.S. Preventive Services Task Force. Source: References 1, 17.



### ACS Screening Recommendations for High-Risk Women

An annual screening mammogram and bilateral breast MRI are recommended for women with the following:

Known *BRCA1* or *BRCA2* gene mutation



Had radiation therapy to the chest wall when they were between

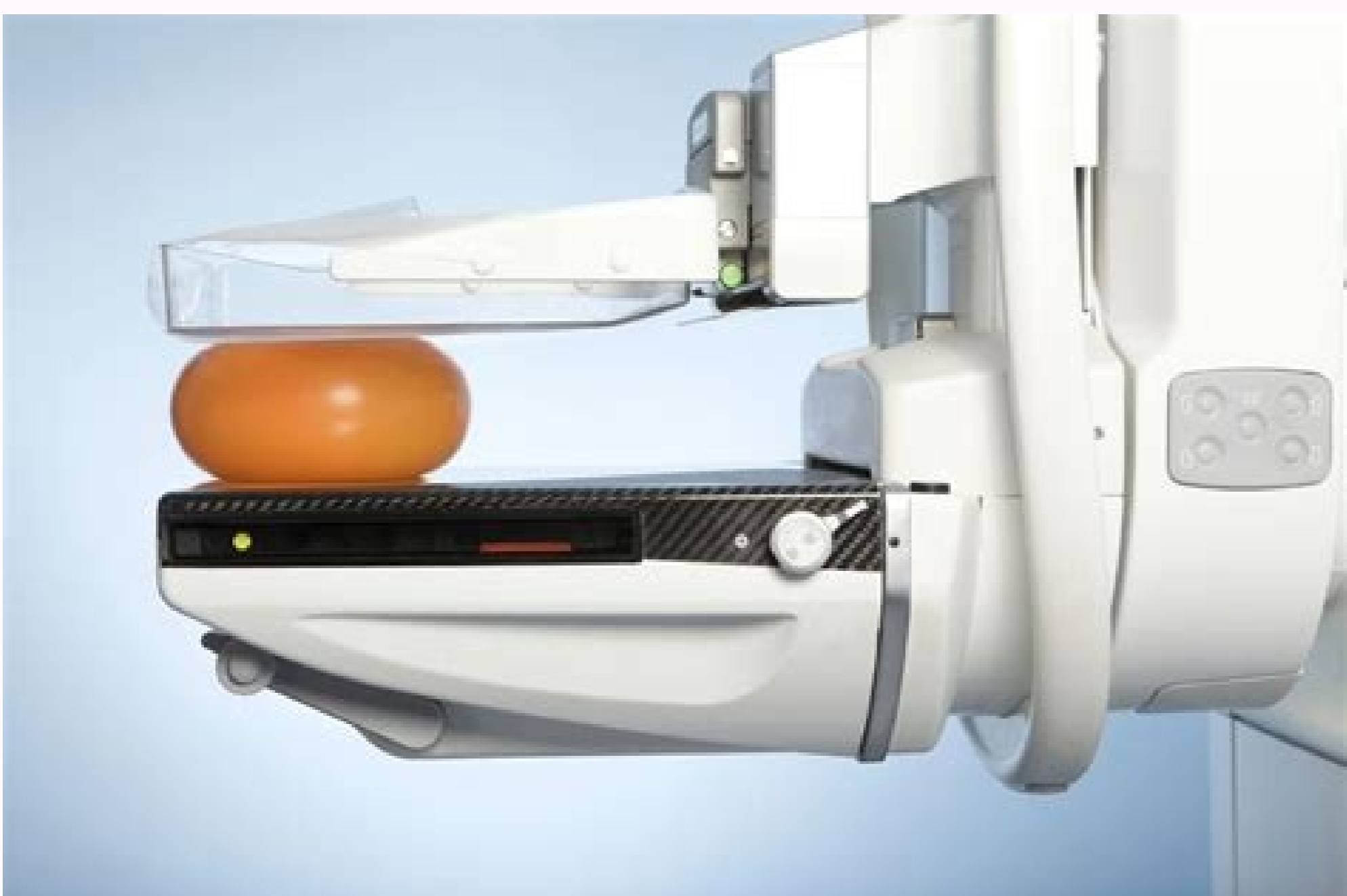
10 YEARS OLD & 30 YEARS OLD



for lymphoma, etc

First-degree relatives with a *BRCA1* or *BRCA2* gene mutation and who have not been tested themselves for the gene

- For most women at high risk of breast cancer, screening with MRI and mammography should begin at age 30 years and continue as long as the woman is in good health.



DOI: 10.1186 / S40 659-017-0140-9 Vreugdenburg TD, Willis CD, Mundy L, Hiller Je. Typical and atypical presenting breast cancer symptoms and their associations with diagnostic intervals: evidence from a national cancer diagnostic audit. DOI: 10.1007 / S13 244-011-0122-3 AKRAM M, IQBAL M, Daniyal M, Khan Au. Which radiologists need to know about the diagnosis and treatment of inflammatory breast cancer: a multidisciplinary approach. X-ray. Philadelphia, PA: Lippincott, Williams & Wilkins. DOI: 10.1007 / S10 549-012-2393-X Lee Ci, Chen Le, Elmore JG. Posted on 5 November 2018. Breast cancer screening: thermogram no substitute for mammography. DOI: 10.5152 / TJBH.2015.2711 Sinclair N, Littenberg B, Geller B, Muss H. started writing marketing materials for a major hospital and published an essay for the women's lifestyle magazine. Pain prevention strategies in mammography: an observational study of breast pain and mechanics recorded simultaneously throughout the breast compression cycle. Women's health BMC. Published 2017 Oct 2, 2017; 48: 140 á ~ "146. 2005; 35 (3): 149-153. Published on 2016 Jan 1. Limitations of mammograms. Miglioretti, D., Lange, J., Van Den Broek, J. MRI accurately depicts underlying ICDs in a patient with breast disease without palpable mass and mammography findings. Giapponese Journal of Clinical Oncology. Doi: 10.1016 / J.Canej.2017.04.010 Yalaza M, Á Á ~ nan A, Bozer M. 2013; 33 (7): 2003-2017, 164 (4): 205-14. 2016; 12 (1): 1 á ~ "8. Benefits and harms of mammographic screening. Res Breast Cancer. 2011; 2 (6): 653-670. DOI: 10.1148 / RG.337 135 503 Horsley Rk, Kling JM, green s, Jorans r, temkit hi, Patel bk, Ann int Med. Pain reported following mammographic screening. Archives of Internal Medicine. Doi: 10.1093 / jico / hy044 yeh ed, jacene ha, bellon jr. 2003; 163 (7): 833. In the Malley transitioned into a freelance writing career. Doi: 10.2214 / AJR.10.5442 Jain M, Jain A, Hyzy MD, Werth G. Awareness Current knowledge of breast cancer. - BIOL RES. Breast implants imaging - a pictorial review. Insight in Imaging. DOI: 10.1016 / JJACR.2018.07.002 Juanpere S, Perez E, Huc O, Motos N, Pont J, Pedraza S. Risk-based breast cancer screening: implications of breast density. Med Clin North Am. 2017; 101 (4): 725 á ~ "741. Breast cancer. 2014; 120 supplementation 16 (0 16): 2540 - 2548. DOI: 10.1148 / RG.2 016 150 178 Seely JM, Allasan T. Baseline Mammography: What is it and why is it important? Silver Spring, Maryland; Updated on 27.05.17. 2016; 36 (3): 623-639. DOI: 10.1111 / 1754-9485.11 / 1754-9485.12 502 Amano G, Harris, J., Lippman M., Morrow, M., Osborne, C., Eds. Screening for Breast Cancer in 2018-What should we do today?. "Curr Uncle. Patient's poor understanding of abnormal results of mammography.Á j gennter med. 2016; 61 (1): 24-28. Bio writer Susan Malley is an innovative professional with over 15 years of experience developing and writing corporate communications documents. 2011; 197 (5): 1268-1273. 2017; 50 (1): 33. Doi: 10.1001 / Archinte.163.7.833 Karliner Ls, Patricia Kaplan C, Juarbe T, Pasick R, PÁ Á @ ground floor EJ. A pictorial review of the changes in the bi-rads fifth edition. X-ray. KOO MM, VON WAGNER C, ABEL GA, McPhail S, Rubin GP, LyRatzopoulos G. Wolters Kluwer Salute: LippinCott Williams & Wilkins; 2013. DOI: 10.1111 / J.1525-1497.2005.40 281.x RAO AA, Feneis J, Lalonde C, Ojeda-Fournier H. 5 Á ED. DOI: 10.1186 / S12 905-015-0185-2 Sharp PC, Micleutte R, Freimanis R, Cunningham L, Spangler J, Burnette V, Lee NC, Wong FL, Jamison PM. 2016, 2016; 164 (4): 205 á ~ "214. U.S. Food and Drug Administration. A cross-sectional survey of women screened mammography.Á Journal of the American College of Radiology. A systematic review of elastography, electrical impedance scanning and thermography. 5102. 5102 oiggam "Á l l otacilbuP. 1421-51M / 6237.01 :iOD ones la orcnac led otmemattar e acrcieR, ones la orcnac led isongaid al e gmineercs ol rep elatigid issorarfini. eraC. eraC yramiP ni ygolocnOA Á GM esoR 1421-51M/6237.01:iOD ypolocnO noitaidar dna gnigani lacideM fo lanrujÁ Á detisivor qniececs tsaerB IRM TSAF .nemoW rof senilediUG qniececs recnaC tsaerB .tsaerB eht fo ssesesaesesaesesi D J4102(,734Á Á Á tsaerB elaM 421SÁ R sisongaid & smotpmYS .gro.recnaCtsaerB secnerefeR .71/90/01 detadpu :aigroeG .atnaltA .qniececS yhpargommaM latigiD morf ytilatroM dna ecnedicnl recnaC tsaerB decudnl-noitaidarR .JJ keorB ned nav J egnal .LD itteroilgiM 5000000330 7102.ancm.j/6101.01:iOD .JG neteeH ned .AC negrebrmR .JM sredeorB .EJ toorG ed 02882.rcnc/2001.01:iOD .yteicoS recnaC naciremA 0773.52.oc/7473.01:iOD .deM nretnl nnÁ Á ~ydtuS gniledoM A :gmineercS yhpargommaM latigi D morf ytilatroM dna ecnedicnl recnaC tsaerB

May 01, 2017 · As you get older, your body isn't the only thing that's changing. So are the guidelines for taking care of it. Breast cancer screening guidelines are a case in point. The current U.S. Preventive Services Task Force (USPSTF) guidelines recommend a mammogram every two years for women ages 50 to 75 with an average risk of developing breast cancer. May 01, 2017 · As you get older, your body isn't the only thing that's changing. So are the guidelines for taking care of it. Breast cancer screening guidelines are a case in point. The current U.S. Preventive Services Task Force (USPSTF) guidelines recommend a mammogram every two years for women ages 50 to 75 with an average risk of developing breast cancer. Jul 27, 2017 · Screening Mammogram. A screening mammogram is performed to detect any breast cancer as early as possible for the best possible prognosis. The American Cancer Society (ACS), the American Medical Association (AMA) and the American College of Radiology (ACR) recommend yearly screening mammograms beginning at the age of 40 and annually thereafter. Jan 14, 2022 · The American Cancer Society (ACS) breast cancer screening guidelines consider having had either a 2D or 3D mammogram as being in line with current screening recommendations. The ACS also believes that women should be able to choose between 2D and 3D mammography if they or their doctor believes one would be more appropriate, and that out ... We include the guidelines below to make you aware of the options and help you make informed decisions. American Cancer Society (ACS) Breast Cancer Screening Guidelines recommend that women start regular mammograms no later than age 45 and that those who want to start at age 40 should have insured-access to mammograms. What is breast tomosynthesis? Breast tomosynthesis, also called three-dimensional (3-D) mammography and digital breast tomosynthesis (DBT), is an advanced form of breast imaging, or mammography, that uses a low-dose x-ray system and computer reconstructions to create three-dimensional images of the breasts. Breast tomosynthesis aids in the early detection and ... Jan 14, 2022 · The American Cancer Society (ACS) breast cancer screening guidelines consider having had either a 2D or 3D mammogram as being in line with current screening recommendations. The ACS also believes that women should be able to choose between 2D and 3D mammography if they or their doctor believes one would be more appropriate, and that out ... A doctor called a radiologist will categorize your mammogram results using a numbered system. Talk to your doctor about your mammogram results and what you need to do next. Doctors use a standard system to describe mammogram findings and results. This system (called the Breast Imaging Reporting ... Mar 27, 2018 · However, after an older woman is treated for breast cancer, it is less clear when mammography can safely stop as women age. Follow-up care guidelines for breast cancer survivors from the American Society of Clinical Oncology (ASCO) and American Cancer Society recommend that women have a mammogram on any intact breast every year. Mar 25, 2014 · Contact the National Cancer Institute (1-800-4-CANCER) or the American Cancer Society (1-800-ACS-2345) for assistance. Another option is the National Breast and Cervical Cancer Early Detection Program (1-888-842-6355), which provides low-cost or free cancer screenings for women without health insurance. Aug 27, 2021 · Women ages 40 to 44 should have the choice to start annual breast cancer screening with mammograms (x-rays of the breast) if they wish to do so.; Women age 45 to 54 should get mammograms every year.; Women 55 and older should switch to mammograms every 2 years, or can continue yearly screening.; Screening should continue as long as a woman is in ...

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