

UAB MEDICINE BREAST IMAGING SCREENING GUIDELINES

Purpose: Regular screening mammograms help ensure that breast cancer can be detected as early as possible. To facilitate appropriate imaging-based screening, it is essential to implement evidence-based screening guidelines to promote optimal decision-making and proper utilization of image-based breast screenings. These guidelines are recommendations for ordering and obtaining breast imaging-based screenings, and they are in accordance with the American College of Radiology (ACR) Appropriateness Criteria for Breast Screening.

- UAB Medicine Breast Imaging Guidelines: No Personal History of Breast Cancer
- UAB Medicine Breast Imaging Guidelines: Personal History of Breast Cancer
- UAB Medicine Breast Imaging Guidelines: Special Cases

LEGEND

ABUS	Automated Breast Ultrasound
ACR	American College of Radiology
CEM	Contrast-Enhanced Mammography
DBT	Digital Breast Tomosynthesis
LTR	Lifetime Risk for Developing Breast Cancer
MG	Mammogram
NCCN	National Comprehensive Cancer Network
T-C7,8	Tyrer-Cuzick Risk Assessment Model Version 7, Version 8
US	Ultrasound

UAB BREAST IMAGING SCREENING GUIDELINES: NO PERSONAL HISTORY OF BREAST CANCER

Patient Population	Breast Density	Recommended Screening Method	Age to Start & Interval	Imaging Reference & Additional Information
Average and Intermediate Risk: <20% LTR (TC-7,8)	Fatty/Scattered (A,B)	DBT	40 yo, annual	ACR Appropriateness Criteria for Breast Screening (2017)
Average and Intermediate Risk: <20% LTR (TC-7,8)	Heterogeneously/Extremely Dense (C, D)	DBT -MRI is recommended for supplemental screening if desired by the patient -CEM if unable to have an MRI	40 yo, annual	Breast Cancer Screening for Women at Higher-Than-Average Risk: Updated Recommendations From ACR. (JACR, May 2023)
High Risk: LTR ≥ 20% *No Surgery	Any Density	DBT plus MRI -CEM if unable to have MRI -Prior to 1 st MRI, schedule visit with NP in Breast Health Clinic	DBT - 30 yo, annual MRI - 30 yo, annual *NCCN caveat	Breast Cancer Screening for Women at Higher-Than-Average Risk: Updated Recommendations From ACR. (JACR, May 2023) *NCCN Guidelines Version 1.2023 -DBT-10 years prior to youngest family member not prior to age 30 -MRI-10 years prior to youngest family member not prior to age 25
High Risk: Thoracic radiation between ages 10-30 *No Surgery	Any Density	DBT plus MRI -CEM if unable to have MRI -Prior to 1 st MRI, schedule visit with NP in Breast Health Clinic	DBT - 25 yo or 8 years after radiation treatment (whichever is later), annual MRI – same as DBT	Breast Cancer Screening for Women at Higher-Than-Average Risk: Updated Recommendations From ACR. (JACR, May 2023)
High Risk: Genetic mutation carriers/untested first-degree relatives *No Surgery	Any Density	DBT plus MRI -CEM if unable to have MRI -Prior to 1 st MRI, schedule visit with NP in Breast Health Clinic	DBT - 30 yo (40 if annual MRI) MRI - 25-30 yo	Breast Cancer Screening for Women at Higher-Than-Average Risk: Updated Recommendations From ACR. (JACR, May 2023)
High Risk: Prophylactic Bilateral Mastectomy with or without reconstruction	N/A	NONE	N/A	ACR Appropriateness Criteria – Imaging after Mastectomy and Breast Reconstruction (2020) – Variant 4,5,6

UAB BREAST IMAGING SCREENING GUIDELINES: PERSONAL HISTORY OF BREAST CANCER

Patient Population	Breast Density	Recommended Screening Method	Age to Start & Interval	Imaging Reference & Additional Information
Post-Lumpectomy or unilateral mastectomy with or without reconstruction ≤50 years of age	Any Density	DBT of the native breast plus MRI -CEM if unable to have MRI	Age at diagnosis, annual	Breast Cancer Screening in Women at Higher-Than-Average Risk: Updated Recommendations from the ACR (JACR, 2023) First diagnostic MG 6-12 months post-radiation then MG will be diagnostic for 2 years annually post treatment. If patient cannot tolerate MRI or CEM, ABUS can be considered.
Post-Lumpectomy or unilateral mastectomy with or without reconstruction >50 years of age	Fatty/Scattered (A,B)	DBT of the native breast	At age of diagnosis, annual	Breast Cancer Screening in Women at Higher-Than-Average Risk: Updated Recommendations from the ACR (JACR, 2023) First diagnostic MG 6-12 months post-radiation then MG will be diagnostic for 2 years annually post treatment.
Post-Lumpectomy or unilateral mastectomy with or without reconstruction >50 years of age	Heterogeneously/Extremely Dense (C, D)	DBT of the native breast plus MRI -CEM if unable to have MRI	Age at diagnosis, annual	Breast Cancer Screening in Women at Higher-Than-Average Risk: Updated Recommendations from the ACR (JACR, 2023) First diagnostic MG 6-12 months post-radiation then MG will be diagnostic for 2 years annually post treatment. If patient cannot tolerate MRI or CEM, ABUS can be considered.
Bilateral mastectomy with or without reconstruction	N/A	NONE	N/A	ACR Appropriateness Criteria-Imaging After Mastectomy and Breast Reconstruction (2020) - Variant 1,2,3 If there is a substantial amount of residual tissue, DBT or MRI can be considered.

UAB BREAST IMAGING SCREENING GUIDELINES: SPECIAL POPULATIONS

Patient Population	Breast Density	Recommended Screening Method	Age to Start & Interval	Imaging Reference & Additional Information
Transgender Woman (male birth): Average risk and ≥5 years of hormone use	Any Density	DBT may be appropriate	40 yo, annual	ACR Appropriateness Criteria for Transgender Breast Screening (2021)-Variant 1
Transgender Woman (male birth): High-risk and ≥5 years of hormone use	Any Density	DBT	25-30 yo, annual	ACR Appropriateness Criteria for Transgender Breast Screening (2021)-Variant 2
Transgender Woman (male birth): Average risk and <5 years or NO hormone use	Any Density	None	N/A	ACR Appropriateness Criteria for Transgender Breast Screening (2021)-Variant 3
Transgender Woman (male birth): High-risk and <5 years or NO hormone use	Any Density	DBT may be appropriate	25-30 yo, annual	ACR Appropriateness Criteria for Transgender Breast Screening (2021)-Variant 4
Transgender Man (female birth): History of bilateral mastectomy	N/A	NONE	N/A	ACR Appropriateness Criteria for Transgender Breast Screening (2021)-Variant 5
Transgender Man (female birth): History of reduction mammoplasty or no chest surgery	Any Density	As per standard screening guidelines for density and risk	As per standard screening guidelines for density and risk	ACR Appropriateness Criteria for Transgender Breast Screening (2021)-Variant 7 Breast Cancer Screening in Women at Higher-Than-Average Risk: Updated Recommendations from the ACR (JACR, 2023)

UAB BREAST IMAGING SCREENING GUIDELINES: SPECIAL POPULATIONS

Patient Population	Breast Density	Recommended Screening Method	Age to Start & Interval	Imaging Reference & Additional Information
During Pregnancy: Any Risk	Any Density	Follow the same screening guidelines for density and risk in non-pregnant patients with the exception of MRI. -MRI is not indicated for screening in pregnant women.	Follow the same screening guidelines for density and risk in non-pregnant patients	ACR Appropriateness Criteria - Breast Imaging of Pregnant and Lactating Women (2018) ABUS; evidence not available. May be considered. However, false positives should be considered
During Lactation: Any Risk	Any Density	Follow the same screening guidelines for density and risk in non-lactating patients	Follow the same screening guidelines for density and risk in non-lactating patients	ACR Appropriateness Criteria - Breast Imaging of Pregnant and Lactating Women (2018) Tissue will be dense; expressing breast milk just prior to examination by breast feeding or pumping improves accuracy.
Implant Integrity: Any Risk (not for cancer screening)	Any Density	MRI -US only if MRI is not able to be performed as MRI is the most sensitive examination	FDA – 5-6 years following implant placement and every 2-3 years thereafter. *ACR does not recommend asymptomatic screening	FDA - https://www.fda.gov *ACR Appropriateness Criteria - Breast Implant Evaluation (2018) does not recommend asymptomatic screening. Implant evaluation by imaging is done only when there is a symptom of rupture or BIA-ALCL, and that is a diagnostic study, not a screening.