

Breast Imaging Done for Breast Discharge

- 1. Review patient history. Is discharge bilateral, multi-pore, blood-negative, and expressed-only? This is usually benign and typically not evaluated with imaging. If the discharge is unilateral, single pore, and watery, serous, serosanguinous, or sanguinous, then it is much more likely to represent an underlying malignancy and is more likely to undergo imaging with mammography, ultrasound, MR, or ductography.
- 2. Review patient questionnaire. Any palpable lump or breast pain?
- 3. Search for specific items on scan (for many of these, comparison with prior examinations is crucial):
 - a. Breast parenchyma. Mass (breast cancer, breast duct papilloma, fibrocystic disease), asymmetry, calcifications, architectural distortion, dilated ducts, filling defects within the ducts (best seen at ductography but also seen on MR and US).
 - b. Breast skin. Skin thickening or retraction.
 - c. Axilla. Primary axillary mass, lymphadenopathy.
- 4. Examine remainder of scan for significant incidental findings.

BREAST PARENCHYMA	
Mass, asymmetry, malignant calcifications, architectural distortion, and/or dilated duct(s) upstream from obstructing lesion.	Breast cancer
Mass, dilated duct(s) upstream from obstructing lesion.	Breast duct papilloma
Mass, asymmetry, skin thickening.	Paget Disease
Mass, asymmetry.	Fibrocystic disease
Dilated duct(s).	Ductal ectasia
BREAST SKIN	
Skin thickening, skin retraction.	Breast cancer
Skin thickening.	Paget Disease
AXILLARY TISSUE	
Mass (primary axillary tail tumor), lymphadenopathy (metastases).	Breast cancer
Lymphadenopathy (inflammation or metastases).	Paget Disease

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DICTATION TEMPLATE WITH PROMPTS FOR MAMMOGRAPHY PERFORMED FOR BREAST DISCHARGE

BILATERAL FULL FIELD DIGITAL DIAGNOSTIC MAMMOGRAM

CLINICAL INFORMATION: [Diagnostic mammogram performed for breast pain].

COMPARISON STUDIES: []

TECHNIQUE: []

BREAST COMPOSITION: []

FINDINGS:

Parenchyma: [Mass (breast cancer, breast papilloma, Paget disease, fibrocystic disease). Architectural distortion (breast cancer, scar). Single dilated duct (breast cancer, papilloma) or multiple dilated ducts (breast cancer, ductal ectasia).]

Skin: [Skin thickening (breast cancer, Paget disease, scarring). Skin retraction (breast cancer, scarring).]

Axillary tissue: [Mass (primary axillary tail tumor, lymphadenopathy from metastases or inflammation). Multiple masses (lymphadenopathy from metastases or inflammation).]

IMPRESSION:

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DICTATION TEMPLATE WITH PROMPTS FOR BREAST ULTRASOUND PERFORMED FOR BREAST DISCHARGE

BREAST ULTRASOUND

CLINICAL INFORMATION: []

COMPARISON STUDIES: []

TECHNICAL INFORMATION: []

FINDINGS:

Parenchyma: [Mass (breast cancer, breast papilloma, Paget disease, fibrocystic disease). Architectural distortion (breast cancer, scar). Single dilated duct (breast cancer, papilloma) or multiple dilated ducts (breast cancer, ductal ectasia).]

Skin: [Skin thickening (breast cancer, Paget disease, scarring). Skin retraction (breast cancer, scarring).]

Axillary tissue: [Mass (primary axillary tail tumor, lymphadenopathy from metastases or inflammation). Multiple masses (lymphadenopathy from metastases or inflammation).]

IMPRESSION: []