



screening mammogram

a written order is not required:

- for women 40 years and older who have no symptoms
- may include women who have lumpy / fibrocystic breasts, nonfocal breast tenderness, strong family history of breast cancer, previous benign biopsy, previous cyst aspiration, and nipple discharge that is milky or greenish.

a written order is required:

- for younger patients aged 30-39 for early screening if they are at increased risk for breast cancer. Give specific information about the history on the order. Turn this card over for more details on “specifics.”

diagnostic mammogram

a written order is required:

- personal history of breast cancer
- nipple discharge that is clear or bloody
- six-month follow-up for recent abnormal mammogram
- patient age 30 or younger, call our nurse 212-3607 or radiologist 212-3148
- all men with symptoms

Document symptoms clearly. Our radiologists need to know exactly what you have found on your clinical exam to completely work-up the symptom. Turn this card over for more details and “specifics.”

screening breast mri

requires radiologist approval

Screening Breast MRI is available to patients with a documented lifetime risk of breast cancer that is greater than 20%. Patients must be off hormonal medications for three (3) months prior to the exam. The MRI must be performed between days seven (7) and ten (10) of the menstrual cycle. If your patient needs assessment by a genetic counselor, one is available through the Cancer Center at Providence, 212-6874.

Scheduling & Registration (907) 212-3151

Clinical Questions (907) 212-3607

Toll-Free (888) 458-3151 www.provimaging.com

3340 Providence Drive, Anchorage AK 99508

Breast imaging is currently available in our Anchorage location only.





special situations

- **For Women with Clinical Symptoms**
Under age 30: targeted breast ultrasound; age 30 and older: bilateral diagnostic mammogram and targeted breast ultrasound.
- **Women with Strong Family History:**
Screening Mammogram or Screening Breast MRI (*see front of card*)
Young women with specific family history will need a written order, and could benefit from a free consultation with a genetic counselor to objectively quantify risk, available through the Cancer Center at Providence, 212-6874.
- **Focal Breast Pain**
Breast pain is subjective and must be assessed carefully. If the pain is focal or localized to a small area, diagnostic studies may be performed. Indicate the location just as you would for a breast lump. Screening mammography is usually sufficient for generalized pain or tenderness in a quadrant or more of the breast.
- **Nipple Discharge**
Spontaneous bloody or clear nipple discharge from one duct is considered a clinical symptom and should be worked up with diagnostic studies, which may include a ductogram. White, cloudy, or greenish discharge is usually not worrisome for cancer.
- **Fibrocystic Breasts**
Fibrocystic change is not generally considered a reason for diagnostic mammography. However, if you have an area of specific concern, please describe and indicate the specific area on the breast diagram on our Order Form.
- **Breastfeeding Women**
With a clinical symptom, diagnostic mammogram and targeted breast ultrasound. The woman will be instructed to nurse or pump her breast immediately prior to the exam.

Lactating women should wait about six months after they stop breastfeeding to resume screening mammograms.
- **Men with clinical symptoms**
Bilateral diagnostic mammogram, and targeted breast ultrasound if needed.



*established
in 1986,*

Anchorage's Providence Imaging Center is the first Alaskan facility to be recognized as a Breast Imaging Center of Excellence by the American College of Radiology. We provide an on-site breast imager five days a week, and proudly offer patients results for diagnostic mammography within 24 hours.

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