Rolling Oaks Radiology
RadNet Imaging Centers

Medical Diagnostic Imaging
[redacted]

Ordered By
[redacted]

ABRAMS, ROXANN
MRN: [redacted]
DOB: [redacted] F
Phone [redacted]

Date of Service: 09-19-2022

EXAM: MRI BILATERAL BREASTS WITHOUT AND WITH CONTRAST

HISTORY: [redacted] patient with new diagnosis of left breast invasive lobular carcinoma.

TECHNIQUE: Multiple MR sequences were obtained on a 1.5 Tesla high-field MR scanner. The patient was scanned prone, using dedicated bilateral breast coils. Additional large field of view images were obtained to permit evaluation of the chest wall and axilla.

Contrast: The patient was injected with 14 cc Clariscan from a 15 cc single-use vial with the remaining contrast being discarded.

COMPARISON: Prior breast imaging, most recently 8/4/2022

FINDINGS:

Parenchymal pattern: Heterogeneously dense with marked background parenchymal enhancement

RIGHT BREAST: There is clumped non-mass enhancement in the lower outer breast at 4 o'clock 3 cm from the nipple measuring 3.5 x 1.2 x 3.3 cm (AP x ML x SI), which includes fast washout enhancement kinetics. It abuts the implant capsule. (601-46, 607-88)

Of note there are two intramammary lymph nodes (T2 hyperintense masses with T1 hyperintense central zone): in the lower outer breast 6 cm from the nipple, measuring 7 x 6 mm (AP x ML) (601-71); and in the lower inner breast 3 cm from the nipple measuring 7 x 8 mm (AP x ML) (601-49) .

LEFT BREAST: Known malignancy is an area of clumped nonmass enhancement at 3 o'clock 2 cm from the nipple measuring 5.5 x 1.8 x 3.6 cm (AP x ML x SI). Enhancement kinetics include fast plateau. It abuts the implant capsule. (601-56). Susceptibility artifact from biopsy marker is present at the central and superficial portion.

Subglandular saline implants are intact.

Few prominent left level I axillary lymph nodes are present, including at deeper level, with cortex measuring 3-4 mm (601-31). No right axillary lymphadenopathy or suspicious internal mammary lymph nodes.

The mediastinum is normal.

The visualized portion of the upper abdomen is normal.

IMPRESSION:
Right breast: Area of suspicious non-mass enhancement in the lower outer breast, appearing similar to the known malignancy in the contralateral breast. Spot tomosynthesis and targeted ultrasound are recommended for further evaluation. If the area is not seen, consider surgical biopsy with possible MRI guided localization. The area abuts the implant and would be difficult for MRI guided biopsy.

Left breast: Known malignancy at 3 o'clock 2 cm from the nipple appears larger than it was seen on ultrasound, measuring up to 5.5 cm. Few prominent left axillary lymph nodes are present, though none appearing enlarged.

ASSESSMENT: BI-RADS Category 0: Incomplete. Need additional imaging evaluation.

FOLLOW-UP: Additional imaging.

Your patient has been entered into our reminder system. We will notify the patient when their next breast imaging exam is due.
IF YOU ARE A PROVIDER AND WOULD LIKE TO CONTACT THE RADIOLOGIST PLEASE CALL (424) 453-7056. IF YOU ARE THE PATIENT AND HAVE QUESTIONS REGARDING YOUR RESULTS PLEASE CONTACT YOUR PROVIDER DIRECTLY.

End of diagnostic report for accession: 34683778
Dictated: 09-20-2022 9:45:21 AM
Electronically Signed By: [redacted]

Copy to: [redacted]