MERCER MEDICAL IMAGING NEW YORK

SENT TO SHANNON WIN'S OFFICE

Patient: Mott, Elizabeth

DOB: 08/29/1960 Age/Sex: 57 / F

Attending Provider: John H Wilson MD

MRN:34298347 Acct: 23409384

Exam Date/Time: 04/05/2018 08:20 EST

Exam Type: Mammogram

Birad: 5 Highly Suggestive of Malignancy Follow Up: Biopsy Recommended

MAMMOGRAPHY REPORT

EXAM DESCRIPTION:

MM tomo and mammo diag LT; US breast LT

DIAGNOSTIC MAMMOGRAM AND FOCUSED LEFT BREAST ULTRASOUND

CLINICAL INFORMATION:

Reason: patient presents with a new lump in the left breast

TECHNIQUE

CC MLO and ml views were obtained, as well as focused breast ultrasound of the area of clinical concern. This is of the left breast fairly centrally label to near the 12 o"clock position

COMPARISON:

No comparison

FINDINGS:

MAMMOGRAM:

Breasts show scattered fibroglandular tissue. There is a new irregular mass lesion with spiculated borders mammographically it measures 3.2 x 3.7 by 3.0 cm. There appears to be some nipple retraction noted. No associated calcifications are seen.

On the mediolateral oblique projection more prominent left axillary node is identified. No other lesions are noted within the left breast

ULTRASOUND:

Findings show the mass to be hypoechoic with ill-defined borders and shadowing. On ultrasound it measures $3.1 \times 2.5 \times 3.9 \text{cm}$.

Findings also show a focally thickened left axillary node.

IMPRESSION:

- Highly suspicious mass in the left breast as well as abnormal left axillary node.
- Recommend ultrasound guided fine-need aspiration left axillary node and biopsy of the left breast.
- 3. Need for biopsy was personally discussed with the patient over the telephone.

NOTE: The examination was interpreted remotely. No real-time confirmation could be provided. If symptoms persist or there is continued clinical concern, repeat imaging with direct radiologist oversight may be useful.

D: Samantha Strange, MD

S: eSigned by: Samantha Strange M.D. on: 04/05/18; 09:45