

UltimateMamm™ Frequently Asked Questions

Q:What is UltimateMamm™

A: RMI offers a unique mammography program called UltimateMamm™ where women are provided with a digital mammogram PLUS a lifetime risk assessment for breast cancer. With UltimateMamm™ each patient is offered the National Cancer Institute's Breast Cancer Risk Assessment as part of their standard mammography exam. It is comprised of questions we already ask as part of a patient's breast and family history. The only difference is – we enter the answers into the NCI Breast Cancer Risk Assessment Tool, as opposed to simply factoring in the significance of the answers as we look at her images.

Q:What is the Risk Assessment?

A:The Breast Cancer Risk Assessment Tool is a computer program that was developed by scientists at the National Cancer Institute and the National Surgical Adjuvant Breast and Bowel Project (NSABP) to assist health care providers in discussing breast cancer risk with their female patients. The tool allows a health professional to project a woman's individual estimate of breast cancer risk over a 5-year period of time and over her lifetime and compares the woman's risk calculation with the average risk for a woman of the same age.

If the computer program score reaches a certain level then a woman should meet with her referring physician to further discuss her risk factors, risk reduction and a custom monitoring plan. Sometimes custom monitoring involves mammograms every 6 months, instead of yearly or perhaps MRI or medication.

Q: What factors does the UltimateMamm™ Risk Assessment look at?

A:

Age. The risk of developing breast cancer increases with age. The majority of breast cancer cases occur in women older than age 50.

Age at first menstrual period. Women who had their first menstrual period before age 12 have a slightly increased risk of breast cancer.

Age at first live birth. Risk depends on age at first live birth and family history of breast cancer, as shown in the following table of relative risks.

Breast cancer among first-degree relatives (sisters, mother, daughters). Having one or more first-degree blood relatives who have been diagnosed with breast cancer increases a woman's chances of developing the disease.

Breast biopsies. Women who have had breast biopsies have an increased risk of breast cancer, especially if the biopsy showed a change in breast tissue, known as atypical hyperplasia. These women are at increased risk because of whatever prompted the biopsies, not because of the biopsies themselves.

Race. White women have greater risk of developing breast cancer than Black women (although Black women diagnosed with breast cancer are more likely to die of the disease).

Q: What other factors affect risk?

A: Other risk factors include: age at menopause, use of birth control pills, high body mass index, a high-fat diet, alcohol, radiation exposure, and environmental pollutants. If patients have questions about these specific factors, they should ask their primary care physician or see the resources under the last question.

Q: What happens with the results?

A: Should the patient's UltimateMamm™ risk score require further review, her referring physician is alerted to her score right away so that they can discuss her risk in more depth.

Q: What are the benefits to UltimateMamm™ for the patient?

A:

- Provides more information as part of a routine screening exam
- Saves the patient time and money
- Deeper dive into health and family history to offer peace of mind
- More aggressive and timely care for those who need it

Q: How does UltimateMamm™ benefit physicians in the community?

A:

- Proactively identifies high risk patients that may have previously gone unidentified
- Offers better service to your patients
- We communicate directly with you so you can keep your patient informed
- Saves time

Q: What is the cost for UltimateMamm™

A: There is no additional cost for UltimateMamm™ —it is simply our version of the best mammogram service available.

Q: What happens after a patient is identified as being high risk? (For Physicians)

A: Once a patient is identified with a NCI Breast Cancer Risk Assessment score of 20% or higher, their referring physician will be notified on the mammogram report. Upon that notification, the patient and their physician are encouraged to delve deeper into the risk factors that led to the score and follow nationally accepted guidelines such as NCCN Practice Guidelines in Oncology. Physicians, see *NCCN Guidelines for Detection, Prevention, & Risk Reduction* at http://www.nccn.org/professionals/physician_gls/f_guidelines.asp and login for access.

Q: What high risk services does RMI offer for patients at increased risk?

A: We offer breast MRI and Breast-Specific Gamma Imaging, breast imaging services that offer patients a more specific look at their breast tissue in order to screen for disease.

Q: What are some resources for patients to learn about high risk?

A: <http://www5.komen.org/BreastCancer/LowerYourRisk.html>

www.bebrightpink.org

<http://www.webmd.com/breast-cancer/guide/overview-risks-breast-cancer>

<http://www.breastcancer.org/risk/factors/>