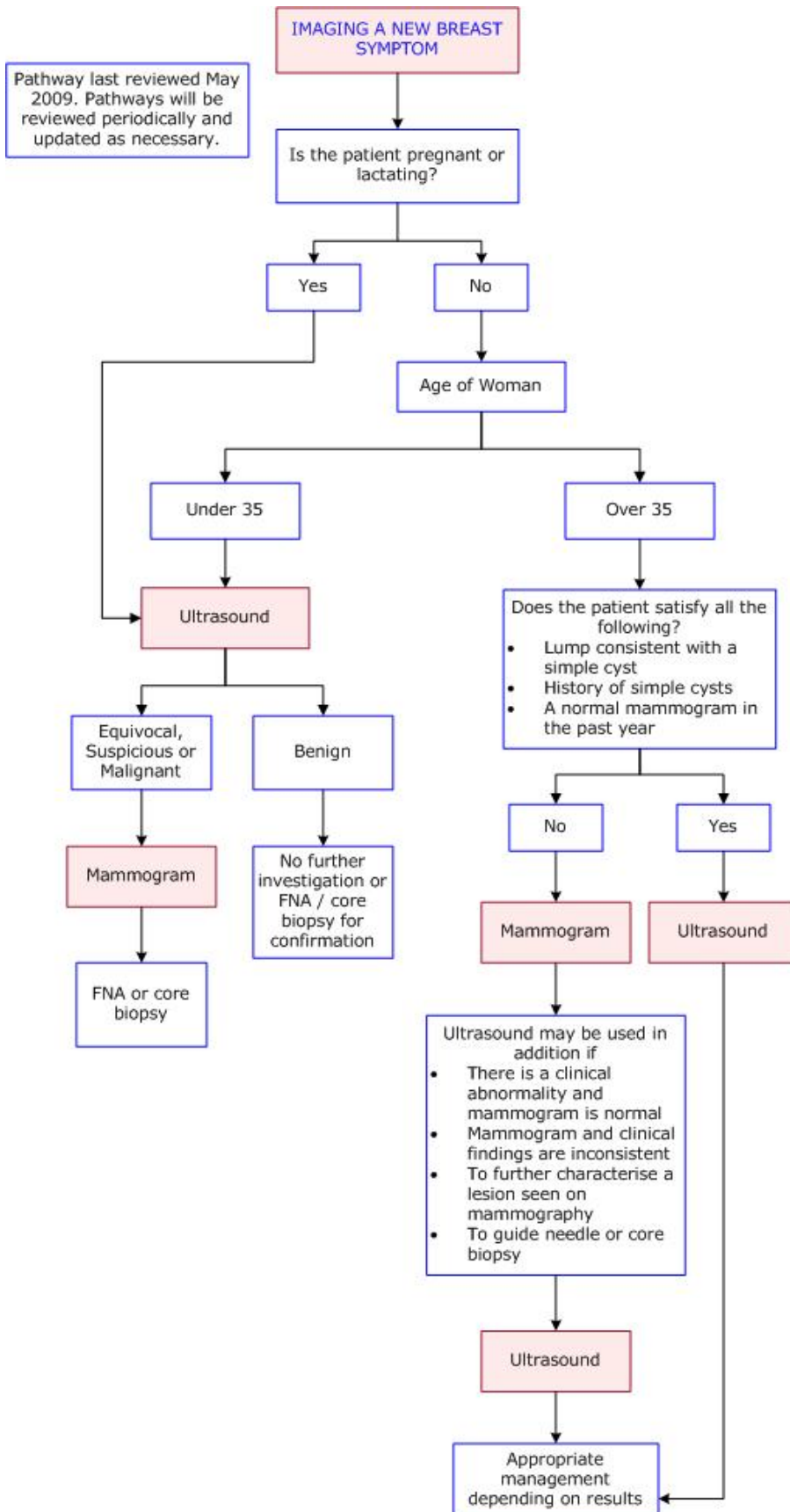




# DIAGNOSTIC IMAGING PATHWAYS

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## MAMMOGRAPHY

- Standard mammography involves two views: cranio-caudal and medio-lateral oblique. [1](#)
- The diagnostic accuracy of mammography is enhanced through the use of magnification views (magnified, coned compression views), which visualise only a small area of breast tissue but gives better contrast resolution and spatial detail. [1-5](#)
- Abnormalities on mammography are generally categorised as : [1](#)
  - Mass lesions
  - Asymmetric densities
  - Architectural disturbances
  - Calcifications
  - A combination of these
- Although it is an excellent tool for evaluating breast lesions, mammography does have an inherent false-negative rate. [6](#)
- Mammography is not as sensitive in detecting abnormal lesions in dense breast tissue and for this reason, ultrasound is preferred over mammography in women younger than 35. [1](#)
- The radiation exposure and hence risk of malignancy secondary to mammography is believed to be extremely low. [7](#)

## ULTRASOUND

- Is an important diagnostic tool in the evaluation of breast lesions.
- Often used complementary to mammography but may be the initial and only imaging modality required for women younger than 35. [1](#)
- Is the preferred initial imaging modality in pregnant and lactating women. [8](#)
- Situations where ultrasound is useful include: [1](#)
  - For evaluating palpable masses not seen on mammography.
  - For further evaluation of indeterminate lesions seen on mammography.
  - For detection of any underlying mass or altered architecture associated with calcification or asymmetric densities seen on mammography.
  - For implant evaluation.
  - For guidance of percutaneous biopsy.

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#### Website

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