

# MRI Breast Indications

## (Breast MRI is a bilateral exam)

Breast MRI allowed for newly diagnosed breast cancer and treatment planning scheduled after biopsy proven breast cancer diagnosis.

Patient may need follow-up MRI if neoadjuvant chemotherapy being utilized prior to surgical management.

### Allowed Breast MRI screening:

Breast MRI patient must have a digital mammogram within 6 to 12 months of scheduled MRI appointment. The breast MRI appointment should be scheduled between Day 3 to Day 15 of the menstrual cycle.

#### 1. MRI annual screening, based on clinical evidence

- BRAC 1 & 2 carriers
- Mother, sister, or daughter with BRAC 1 or 2, but patient untested
- Lifetime risk of breast cancer at least 20-25 percent using standard risk assessment models – i.e., Gail Model

#### 2. MRI annual screening, based on expert consensus

- Chest irradiation at young age (age 10 – 30)
  - Usually for Hodgkins lymphoma treatment
  - Possible high radiation dose due to severe scoliosis/treatment
- Li-Fraumeni syndrome
- Cowden or Bannayan-Riley-Ruvalcaba syndrome

### NOT allowed for MRI Breast screening:

#### 1. Insufficient data to recommend for or against MRI

- Have a 15-20 percent lifetime risk of breast cancer
- Lobular carcinoma in-situ or atypical lobular hyperplasia
- Atypical ductal hyperplasia
- Dense mammogram
- Personal history of treated breast cancer, including DCIS

#### 2. Screening Breast MRI not recommended for women with lifetime risk of breast cancer less than 15 percent

### Diagnostic MRI allowed indications are:

1. Newly diagnosed breast cancer and treatment planning workup (or after neoadjuvant chemotherapy)
2. Bloody nipple discharge with negative or inconclusive workup
3. Negative mammogram/ultrasound, but suspicious clinical findings (palpable mass or thickening)
4. Indeterminate mammogram/ultrasound and MRI recommended by radiologist (if non-Mercy radiologist, must review imaging with our radiologist)



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