

Breast screening assessment clinic

Southampton and Salisbury Breast Screening Unit
Information for patients



Thank you for attending your recent screening mammogram.

As explained in your invitation letter, screening is sometimes undertaken in two stages. The results of your x-rays have been reviewed by doctors who have recommended that you come into the assessment clinic for second stage screening. Please do not worry that we have called you back so quickly. This does not indicate that there is anything serious, simply that we are required to see you in the assessment clinic within three weeks of your screening mammogram. We will give you more detail on the specific reason why they have made this recommendation when you attend the clinic. There will be a breast care nurse available in the clinic who will be happy to discuss any queries you may have with you. Please ask a member of staff if you wish to see her when you come for your appointment.

Possible reasons for second stage screening

- a clinical abnormality noted by you or the radiographer
- a difference in size or shape of the breast (asymmetry of tissue) – this is often found to be normal
- overlapping breast tissue caused by the compression during your mammogram
- benign (non cancerous) areas that require further imaging for confirmation
- micro-calcifications (small flecks of calcium) – these are usually associated with cysts and fibrosis, but can also be associated with a non invasive type of early breast cancer
- suspicious areas or other potential abnormalities that may be a sign of early breast cancer

The majority of women called for second stage screening do not have breast cancer. If early breast cancer is detected there is an excellent chance of making a full recovery.

Possible further investigations

Mammogram: Further mammograms may be required.

Ultrasound (sonography): This is a painless procedure that involves using sound waves to create an image of your breast. Water based gel is applied and an instrument like a microphone is moved over your breast.

Clinical examination: A clinician may examine both breasts, armpits and neck for any lumps or abnormality.

Core biopsy: A small core of tissue (the size of a pencil lead) is removed using a special needle under local anaesthetic. This can be done under ultrasound or x-ray (mammogram) guidance. You may experience some bruising afterwards.

Vacuum core biopsy: Cores of tissue are removed using a special device under local anaesthetic. You will feel some vibration during the procedure. Sometimes all or most of the area of investigation is removed, in which case a small 2 millimetre (mm) clip is left in the biopsy site. This enables that area to be located easily again if required.

Fine needle aspiration: This is a test in which some cells are removed from your breast using a fine needle. It is usually done with ultrasound guidance. The cells are examined under the microscope. You may experience some bruising afterwards.

Results

Results for core biopsy, vacuum core biopsy and fine needle aspiration will usually be available in one week.

Depending on the results of your additional investigations you may:

- be reassured and returned to the national breast screening programme for mammograms in three years' time
- need earlier screening, for example in one year's time
- require repeat biopsy or vacuum core biopsy if the results are inconclusive
- require further investigations
- require the removal of the abnormality for further tests
- need further treatment. If this is necessary you will see a doctor and a breast care nurse, who will explain the treatment and provide additional written information.

Please feel free to ask questions if there is anything you do not understand. You're welcome to bring a partner, relative or friend with you to your appointment.

It is important to remember that the majority of women called back for second stage screening do not have breast cancer.

Southampton and Salisbury Breast Screening Unit

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