

Purpose Statement

As breast imaging standards of care evolve to keep pace with available technology, it is essential for radiologists to receive frequent continuing education and training. **Clinical Competence in Breast Imaging, Interventions and Management** provides an immersive educational experience, allowing the learner to apply best current practices for a variety of pathologies. The fifty cases presented herein allow the participant to explore the wide range of benign and malignant disease encountered in everyday practice. Special focus is placed on the variety of presentations observed on mammogram and ultrasound, as well as the patterns of enhancement encountered on MRI. This activity also expounds on the many challenges provided beyond the diagnosis, with optimal approaches for intervention and management discussed throughout. As such, **Clinical Competence in Breast Imaging, Interventions and Management** provides a complete tutorial in all modalities, diagnostic strategies and interventional considerations encountered in the modern breast imaging practice. Completion of this activity will allow radiologists to meet their MQSA CME requirements.

Target Audience and Educational Objectives

Following this enduring material, Radiologists should be able to:

1. Determine the appropriate strategies for the analysis and treatment of breast lesions.
2. Interpret screening and diagnostic mammograms while recognizing their limitations.
3. Describe the newest guidelines for pediatric breast mass management.
4. Discuss best strategies and potential limitations for breast ultrasound and MRI exam interpretation
5. Demonstrate the value of tomosynthesis in the analysis of mammography
6. Explain best strategies for intervention and management following breast pathologic diagnosis
7. Discuss core needle biopsy techniques and useful alternatives for needle localizations.
8. Describe the appropriate follow-up for MRI-guided core biopsies.

Disclosures of Conflicts of Interest

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Accreditation and Designation

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Global Education Group (Global) and Meetings By Mail. Global is accredited by the ACCME to provide continuing medical education for physicians.

Global Education Group designates this enduring material for a maximum of 25 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

This enduring material includes 21 hours Digital Mammography, 20.75 hours Breast MR, 19.5 hours Breast Ultrasound, 4.5 hours Tomosynthesis and 11 hours Core Needle Biopsy. Cases concern multiple modalities.

All credits for this enduring material are applicable toward Self Assessment CME requirements for Maintenance of Certification with the American Board of Radiology.

For information about the accreditation of this program, please contact Global at 303-395-1782 or cme@globaleducationgroup.com.

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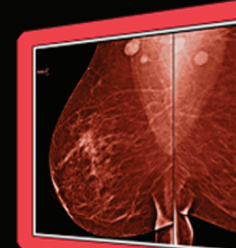
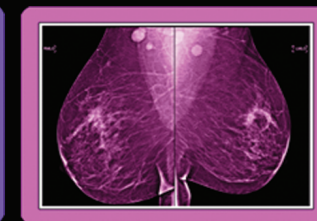
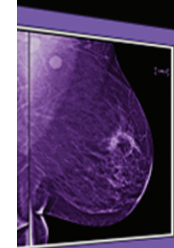


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CLINICAL COMPETENCE IN BREAST IMAGING, INTERVENTIONS AND MANAGEMENT



50 Multimodality Cases
25 AMA PRA Category
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Course Director Linda M. Sanders, M.D.

**Meets MQSA
CME Requirements**

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CLINICAL COMPETENCE IN BREAST IMAGING, INTERVENTIONS AND MANAGEMENT



Case 48.1 (four segments)

Clinical Information

Glenda is a 31 year old with past history of left breast cancer at age 25. She presents for a diagnostic mammogram (See [Figure 48a](#)) and ultrasound (See [Figure 48b](#)) for palpable right concern.

Question

What is the most accurate diagnosis?

☐ A. Right DCIS
☐ B. Right invasive cancer
☐ C. Right invasive cancer with axillary metastatic disease

SUBMIT ANSWER **RETRY** **NEXT**

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Each case segment includes clinical information, with a robust assortment of images. A diagnosis, intervention or management question follows, with immediate image supported feedback from our acclaimed faculty.

SUBMIT ANSWER **RETRY** **NEXT**

CORRECT!

Findings

MRI was performed. The study was interpreted as demonstrating multifocal malignancy (See [Figure 10e](#) and [Figure 10f](#)). Patient opted for bilateral total mastectomy and left sentinel node procedure. Pathology confirmed two sites of malignancy, measuring 15 mm and 14 mm. There was one micrometastasis to one of two left axillary lymph nodes for a final stage of pT1c(m) pN1mi.

Discussion

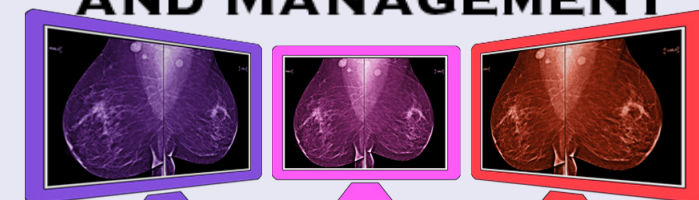
Studies show MRI is extremely helpful in the evaluation of discordant core biopsies (1). Non-enhancement of a biopsied lesion reliably excluded malignancy in the group of patients studied.

Reference

1. Sanders L, El-Hadady M, Persing A, et al. Use of contrast-enhanced MRI in management of discordant core biopsy results. AJR (2019) 5:1-9.

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Case segments are accompanied by detailed Findings and Discussion sections. Essential teaching points are presented and references provided for further study.



**Meets ACR CME Requirements
50 Cases and 25 AMA PRA Category I Credits™**

Program Summary

Clinical Competence in Breast Imaging, Interventions and Management provides a complete tutorial in all modalities, diagnostic strategies and interventional considerations encountered in the modern breast imaging practice. Its fifty cases allow the participant to explore a wide range of benign and malignant disease. However, the lesson does not simply end with the diagnosis. This activity expounds on the many challenges provided beyond the initial finding, with optimal approaches for intervention and management discussed throughout. This is an immersive, full spectrum case review experience designed to address the myriad of ways a breast imager can impact patient care.

Topics Include

Breast cancer screening, MR and Ultrasound interpretations, tomosynthesis applications, multimodal interventional procedures, core needle biopsy, BIRADS, pre and post-operative imaging, high risk lesions, screening, lymph nodes, DCIS, invasive malignancies both ductal and lobular, fibroadenomas, papillomas, benign enhancement patterns, phyllodes tumors, male and pediatric applications, radial scars and much more!

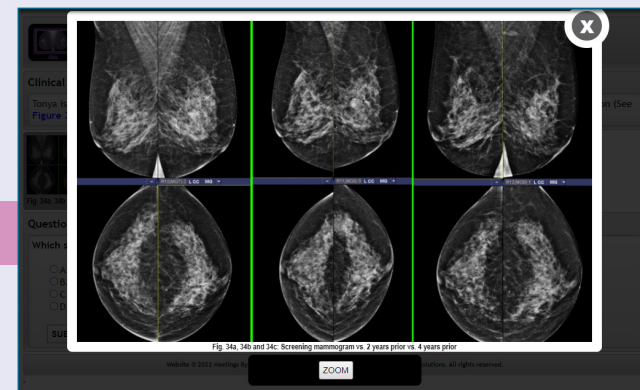


Image resources are sampled across all breast imaging modalities: digital mammography, MR, ultrasound and tomosynthesis. Faculty images provided in discussion section contain measurements, notes and labels.

Case : Medial approach begins in the lateral projection

Goal: bracket the lesion. Two circles placed at the extremes of the lesion. Two needles placed, and a straight on view is obtained. Breast is uncompressed; imaging switched to orthogonal view (CC view) to determine depth. Then, deploy the wires.

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Cases are supplemented by three insightful lectures concerning Breast Intervention, Lesion Localization and Palpable Concerns.

Meetings By Mail Breast Imaging Combos

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