

Breast MRI Policy Statement
Department of Radiology
Dartmouth-Hitchcock Medical Center

Based on the available evidence as of June 2009, the Department of Radiology with the Comprehensive Breast Program at DHMC has developed the following policy statement regarding the use of MRI for breast imaging.

Breast MRI has a role in the evaluation of patients in the following circumstances:

1. Assessment of breast implants for rupture (non-contrast)
2. Evaluation for multifocal disease in patients with a new diagnosis of invasive breast cancer (i.e. surgical planning)
3. Screening of the contralateral breast in patients with a new diagnosis of breast cancer
4. Screening for breast cancer in patients
 - a. At high risk for breast cancer development as defined by the Familial Cancer Program
 - b. Women with dense (heterogeneously and extremely) breasts AND at least one of the following.
 1. Personal history of breast cancer
 2. Personal history of LCIS
 3. 1st degree family member with premenopausal breast cancerThese women would not be screened via FCP, but would be reviewed and accepted on an individual basis
5. Evaluation of patients presenting with axillary adenocarcinoma with no known primary carcinoma and recent negative ipsilateral mammography.
6. Evaluation for multifocal disease in patients undergoing accelerated partial breast irradiation.
7. Evaluation of response to treatment of patients with advanced invasive breast cancer undergoing neoadjuvant chemotherapy (i.e. treatment monitoring)
8. Possible tumor recurrence (suspect on mammography and/or clinical exam) at lumpectomy sites
9. Evaluation of patients with normal mammograms and bloody nipple discharge
10. Evaluation of patients with Paget's disease and normal mammograms

We currently do not feel that the evidence is strong enough to justify breast MRI imaging in the following situations:

1. Diagnostic evaluation of mammographic or ultrasonic abnormalities
2. Diagnostic evaluation of palpable abnormalities
3. Screening of low or average risk patients

We also feel strongly that breast MRI should only be performed in a facility that has the equipment and skilled personnel available to perform MRI-guided biopsies of MRI detected abnormalities that cannot be localized by 2nd look mammography or ultrasonography.

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