

Case n°: 3

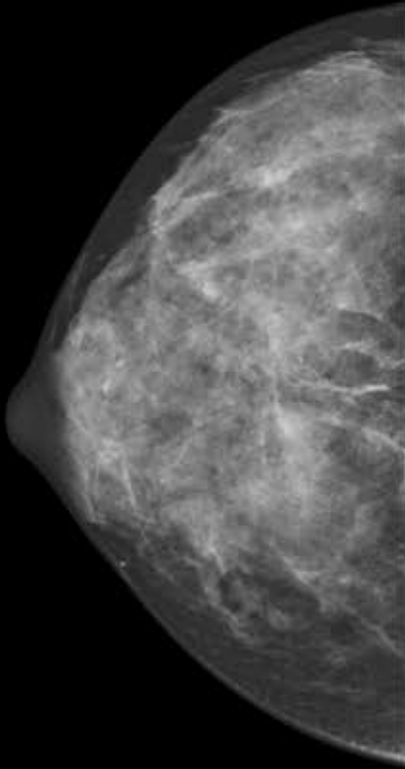
Date: March, 2018

FUJIFILM

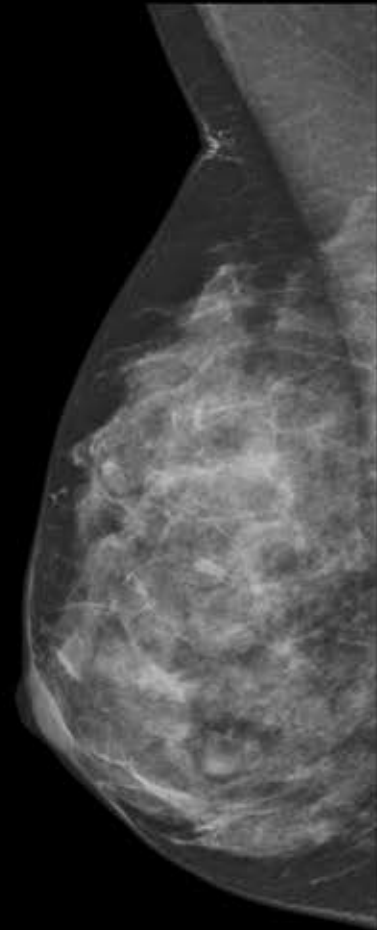
Patient description: 45 yrs old, asymptomatic, doubtful 2D mammography (performed in other site) one month ago.
No family history

Exam description: FFDM (4 views), DBT (4 views), US

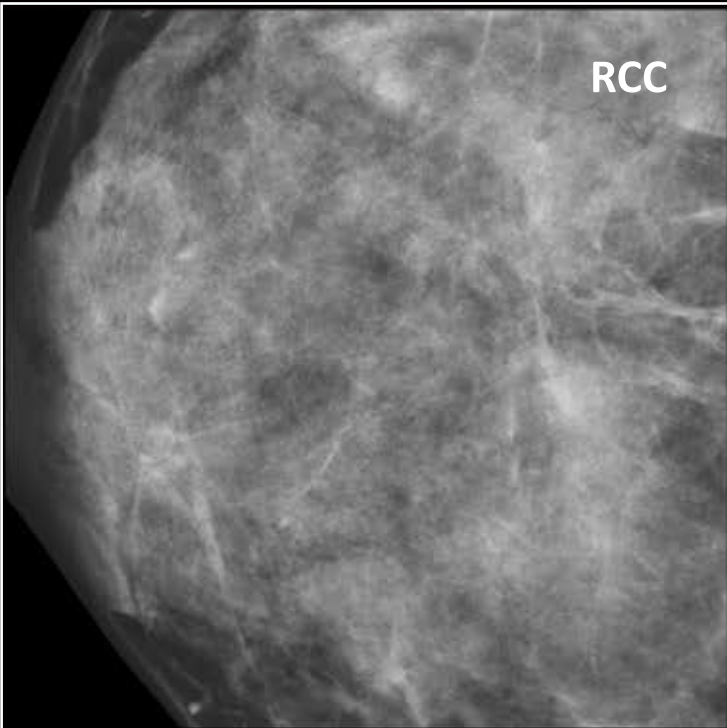
RCC



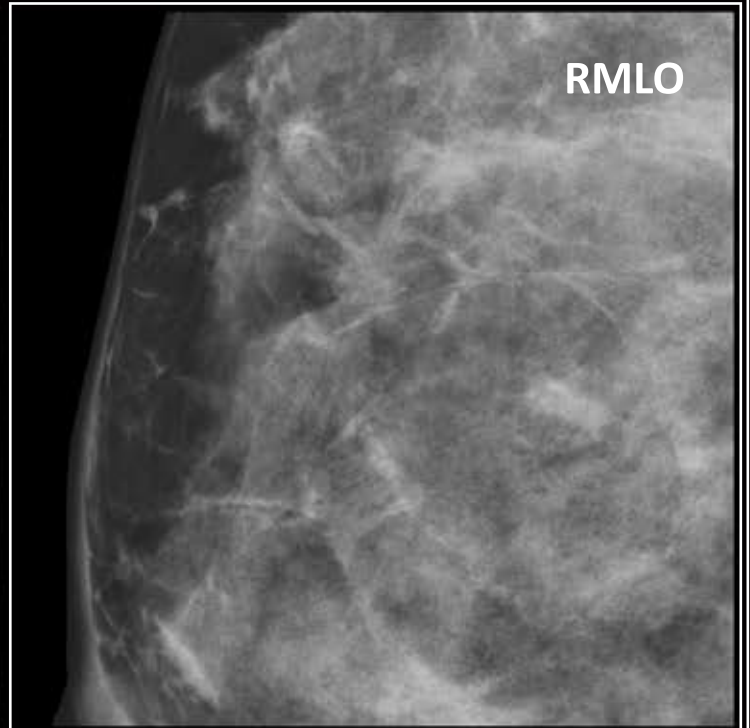
RMLO



RCC

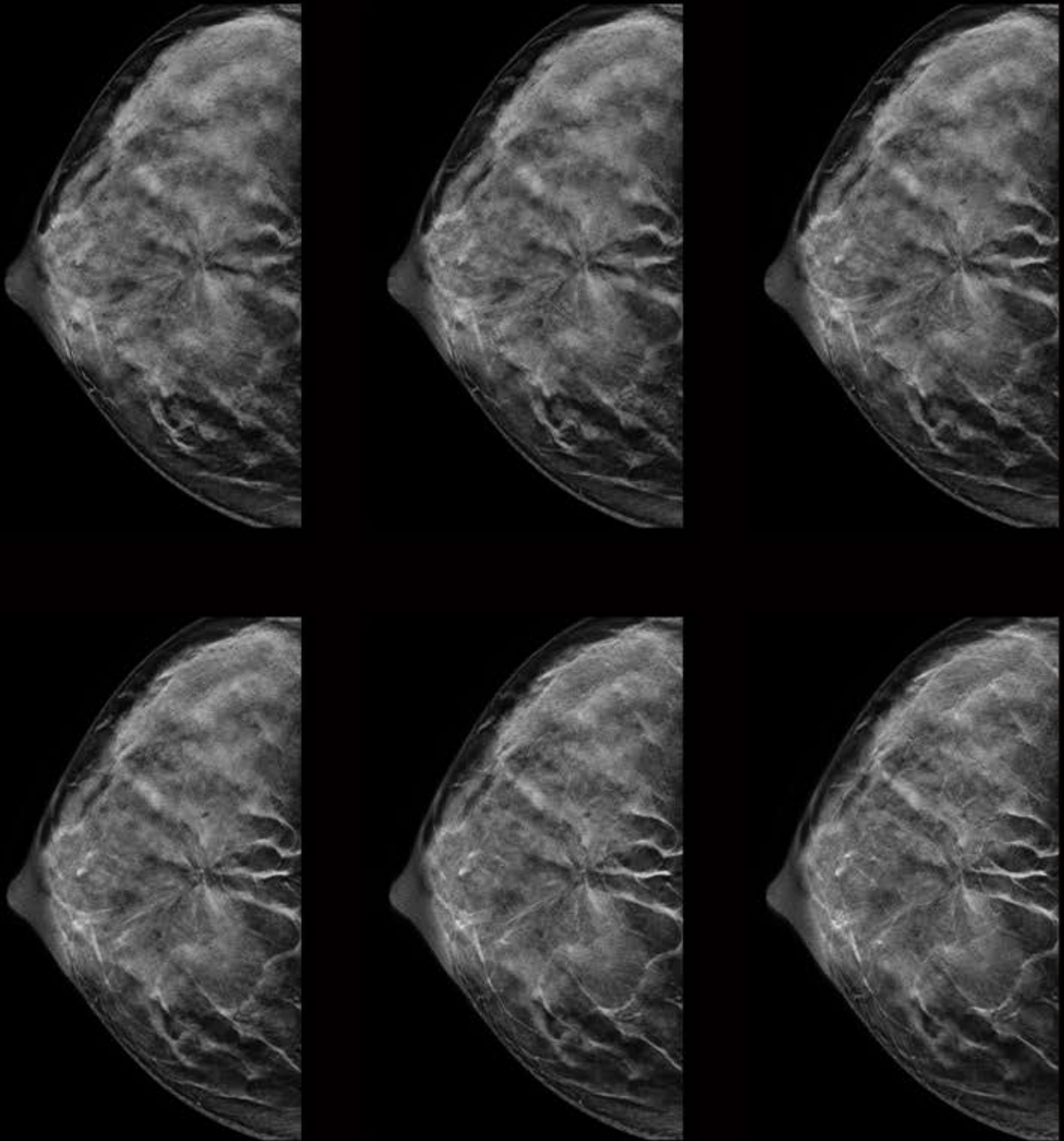


RMLO



Notes: Dense breast structure. FFDM images seem to detect an area featured with pattern distortion, in the superior side of the medial sagittal plane in the right breast.

DBT RCC - images from 19 to 24 (mm from detector)



Notes: Being an acquisition performed as further assessment after non-negative FFDM acquisition, DBT images have been acquired in HR mode (40° tube sweep, 10 pixel/mm, FBP reconstruction).

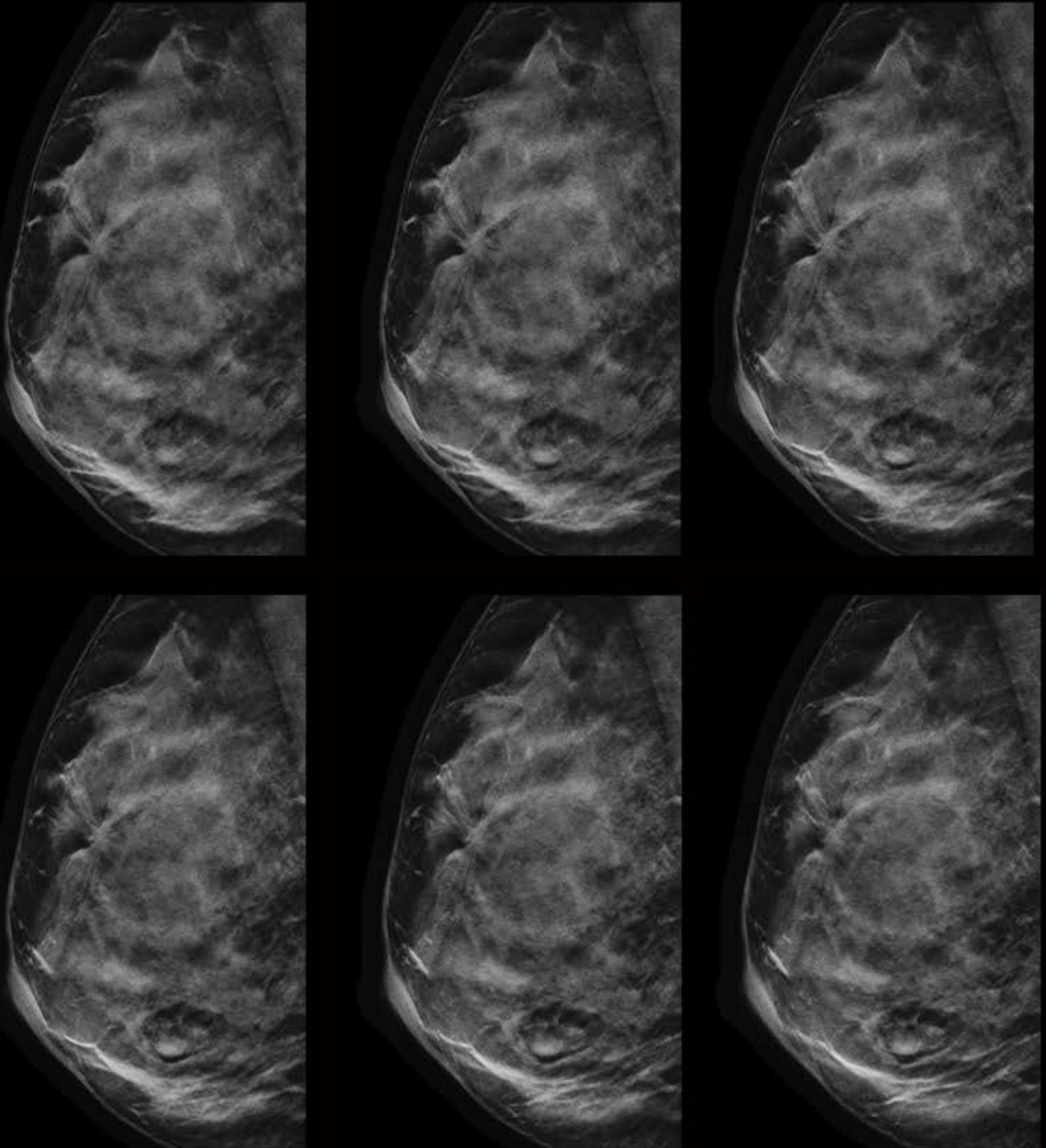
DBT images confirm and depict the architectural distortion partly visible in FFDM RCC view.

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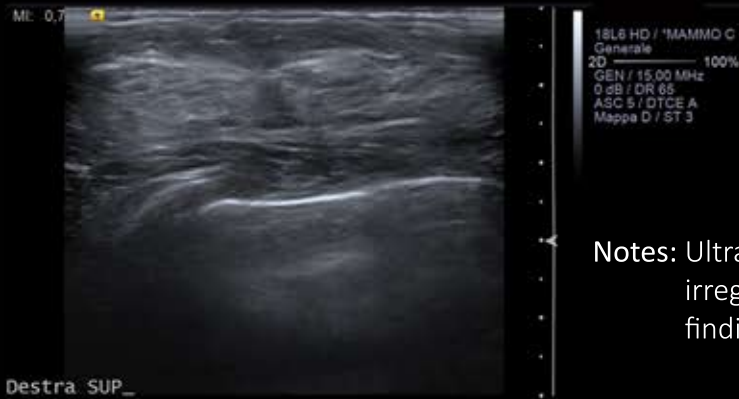
DBT RMLO - images from 19 to 24 (mm from detector)



Notes: Being an acquisition performed as further assessment after non-negative FFDM acquisition, DBT images have been acquired in HR mode (40° tube sweep, 10 pixel/mm, FBP reconstruction).

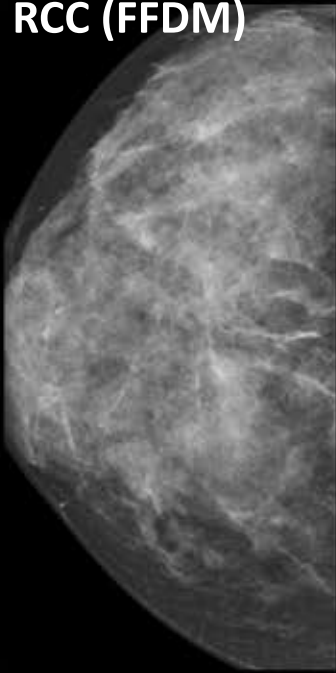
DBT images confirm and depict the architectural distortion partly visible in FFDM RMLO view.

Ultrasound images

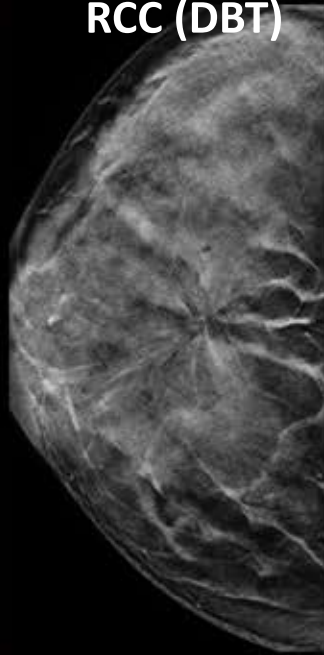


Notes: Ultrasound exam confirms an ipoechoic area with irregular margins, which position is compatible with the findings formerly described by DBT images.

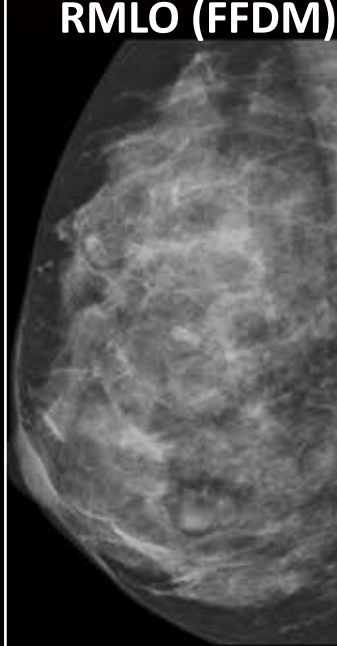
RCC (FFDM)



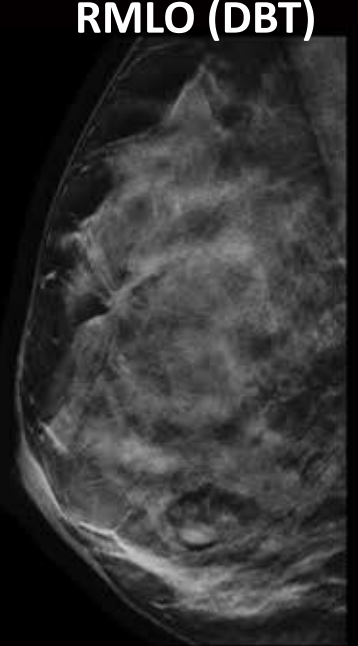
RCC (DBT)



RMLO (FFDM)



RMLO (DBT)



Remarks on DBT images interpretation

When compared to FFDM images, Tomosynthesis acquisition better reveals lesion position, characteristic and size. Lesion depiction improves in both views.

Final interpretation

Radial scar