

Patient Name	: Ms.ANSHIKA	Visit No	: CHA250043648
Age/Gender	: 14 Y/F	Registration ON	: 11/Mar/2025 10:35AM
<b>Lab No</b>	<b>: 10140943</b>	Sample Collected ON	: 11/Mar/2025 10:35AM
Referred By	: Dr.IS VERMA	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 11/Mar/2025 12:09PM

## **X-RAY MAMMOGRAPHY BOTH BREASTS**

### **ACR grading B homogeneously dense breast parenchyma**

#### **RIGHT BREAST**

- **Right breast shows homogeneously dense fibro-fatty parenchyma.**
- There are no micro-calcifications seen.
- There is no retraction of nipple seen.
- No thickening of the skin is seen.
- There is no evidence of axillary lymphnodes seen.

#### **ON USG CORRELATION :**

- **A large well defined rounded hypoechoic lesion of size 71 x 48 x 79 mm is seen at 10-11-12 o' clock position of right breast – (BIRADS – III Category) (ADV : FNAC Correlation).**

#### **LEFT BREAST**

- There is no evidence of any abnormal rounded radio-opaque shadow in the left breast parenchyma.
- **Left breast shows homogeneously dense fibro-fatty parenchyma.**
- There are no micro-calcifications seen.
- There is no retraction of nipple seen.
- No thickening of the skin is seen.
- There is no evidence of axillary lymphnodes seen.

#### **Note:**

- Sensitivity of mammography is decreased in breast have dense parenchyma.
- Screening of mammography is advisable for all women above the age of 40 years.
- Sonomammography (ultrasound) is helpful for accurate diagnosis of disease of breast epically in dens breast. Detailed Sonomammography is advisable if clinically indicated.

**Clinical correlation is necessary.**

**DR. NISMA WAHEED  
MD, RADIODIAGNOSIS**

(Transcribed by Rachna)

\*\*\* End Of Report \*\*\*

