

Breast Density Frequently Asked Questions (FAQ)

Q1. What is the intent of the breast density regulations?

A. To communicate breast density composition as reflected on the patient's mammogram to physicians and patients and also provide educational references where the patient can obtain more information about breast density.

Q2. When did Iowa's breast density regulations go into effect?

A. November 15, 2017.

Q3. What does Iowa's regulation require?

A. There are multiple required components of the breast density regulation, including **all** of the following:

- Notification of the breast density to the physician in the radiology report.
- Notification of the breast density to the patient in the lay letter.
- Reference included in the patient lay letter to a department accepted site **OR** document where the patient can obtain more information on dense breast tissue.
- When the tissue is determined to be heterogeneously dense or extremely dense, notification of evidence based information on dense breast tissue, the increased risk associated with dense breast tissue, and the effects of dense breast tissue on screening mammography shall be included in the patient lay letter or document sent with the patient lay letter.

Q4. What are the nationally recognized guidelines for categorizing breast density?

A. The American College of Radiology (ACR) standards are:

- Fatty
- Scattered areas of fibroglandular density
- Heterogeneously dense
- Extremely dense

Q5. Can a facility group together fatty and scattered areas of fibroglandular density categories?

A. No. The patient lay letter must contain the specific breast density that is named in the radiology report.

- Q6. Can a facility group together heterogeneously dense and extremely dense categories?**
- A. No. The patient lay letter must contain the specific breast density that is named in the radiology report.
- Q7. Do the breast density reporting requirements apply to every mammography radiology report and patient lay letter or just the screening mammography radiology report and patient lay letters?**
- A. The breast density reporting requirements apply to all mammography radiology reports and patient lay letters.
- Q8. On additional imaging, does the breast density need to be named?**
- A. Yes, in both the mammography radiology report and patient lay letters.
- Q9. Is there a list of approved sites for more information about breast density that can used?**
- A. No. However, any reference cited as a source for more information about breast density should be scientific based.
- Q10. Can our facility use the classification categories of A, B, C, and D?**
- A. No, not by themselves. The actual density terminology outlined on Question 4 of this document must be named in both the radiology report and the patient lay letter. To meet the requirements of Iowa's breast density regulations, a facility may state A, B, C, or D, if it is named in conjunction with the appropriate terminology.
- Example: fatty (A), scattered areas of fibroglandular density (B), heterogeneously dense (C), and extremely dense (D).
- Q11. How will compliance with Iowa's breast density regulations be evaluated for all mammography facilities in Iowa?**
- A. Compliance with the Iowa's breast density regulations will be reviewed on each facility's annual mammography inspection, to be completed by the State of Iowa's MQSA certified inspectors.
- Q12. Can I have my facility's patient lay letters reviewed before my annual inspection to ensure they meet all requirements?**
- A. Yes, you may email your patient lay letter examples to all of the State of Iowa mammography program contacts listed at the end of this FAQ document. Please ensure patient identifying information is not included in the document you submit as an example.

Q13. Are there any examples of density language for patient lay letters that meet Iowa Breast Density requirements?

- A. Yes, the following examples meet the requirements for each density category.

Fatty:

Your mammogram indicates that your breast density is fatty which is normal and is not considered to be increased, or dense. For further information about breast density and its significance please consult [*insert reference here*] and/or confer with your primary care provider.

Scattered areas of fibroglandular density:

Your mammogram indicates that your breast density is scattered areas of fibroglandular density which is normal and is not considered to be increased, or dense. For further information about breast density and its significance please consult [*insert reference here*] and/or confer with your primary care provider.

Heterogeneously dense:

Your mammogram indicates that your breast density category is heterogeneously dense which is normal but is considered to be increased, or dense. Increased breast density increases your risk of getting breast cancer. It also makes it more difficult for the radiologist to detect early breast cancer on your mammogram. For further information about breast density and its significance please consult [*insert reference here*]. You should also confer with your primary care provider about your increased breast density and any other risk factors you may have for breast cancer. Together you can determine whether further testing is indicated.

Extremely dense:

Your mammogram indicates that your breast density category is extremely dense which is normal but is considered to be increased, or dense. Increased breast density increases your risk of getting breast cancer. It also makes it more difficult for the radiologist to detect early breast cancer on your mammogram. For further information about breast density and its significance please consult [*insert reference here*]. You should also confer with your primary care provider about your increased breast density and any other risk factors you may have for breast cancer. Together you can determine whether further testing is indicated.

Contact information for State of Iowa mammography program personnel

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