

# GUIDELINES & PROTOCOLS

## ADVISORY COMMITTEE

### Mammography – Protocol for the Use of Diagnostic Facilities

Effective Date: July 15, 2007

#### Scope

This protocol applies to mammography services which are provided through diagnostic mammography facilities and billed to the Medical Services Plan (MSP). Except for circumstances identified in this protocol, all screening mammography should be provided by the Screening Mammography Program of British Columbia (SMPBC)\* and should not be billed to the Medical Services Plan.

#### RECOMMENDATION 1

#### Diagnostic Mammograms

The indication(s) for a diagnostic mammogram must be entered on the requisition form. Acceptable indications would include, for example:

- women with signs and symptoms suggestive of breast disease - to include lump or discrete thickening, localized nodularity, dimpling or contour deformity, serous or sanguineous nipple discharge, non-cyclical localized pain or tenderness
- follow-up of women with proven breast cancer, and those with previous biopsy result of atypia or proliferative disease and lobular carcinoma *in situ* (LCIS)
- search for unknown primary malignancy
- suspected complications of breast implants, i.e. rupture, pathological capsule
- first postoperative mammogram following a benign biopsy
- work-up of patient with abnormal screening mammogram
- surveillance follow-up as recommended based on diagnostic work-up

#### RECOMMENDATION 2

#### Screening Mammograms in Diagnostic Facilities

Screening mammograms may be performed in diagnostic facilities and billed to the Medical Services Plan only under the following circumstances:

- for women who have breast implants (but otherwise following the SMPBC policy for women without implants), or
- for women under age 40 who have a confirmed BRCA1 or BRCA2 mutation, or have a very strong family history of breast cancer\*\*, or
- for women who qualify for the SMPBC service but do not have reasonable access. Reasonable access is defined as: available appointment with the SMPBC (centre or mobile vans) within two months and travel time to a SMPBC facility of less than one hour under ideal conditions.

Notes:

The Screening Mammography Program of BC also accepts women **under age 40** with physician referral, provided they do not have breast implants or an indication for a diagnostic mammogram. These **may include** women with a **confirmed BRCA1 or BRCA2** mutation **or** women who have a **very strong family history\*\*** of breast cancer. The Chief Radiologist, in consultation with physicians, may decide on exceptional cases and determine which facility is most appropriate for such cases.

Each SMPBC screening exam for women under 40 or over 79 years-of-age is to be arranged by the primary health care provider after consultation with a radiologist at the screening centre of choice. Refer to the SMPBC policies and procedures regarding women under 40 or over 79, available at: <http://www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Breast/ScreeningEarlyDetection.htm>

All women who meet the referral criteria for Hereditary Breast and/or Ovarian Cancer testing should be referred to the Hereditary Cancer Program\*\*\* at the BC Cancer Agency (BCCA).

\*The Screening Mammography Program of British Columbia is a program of the BC Cancer Agency which is a member of the Provincial Health Services Authority.

\*\*A very strong family history of breast cancer may be defined as:

- 2 cases of breast cancer in close female relatives (mother, sister, daughter, aunt, grandmother, great-aunt) on the same side of the family, both diagnosed before age 50; or
- 3 or more cases of breast cancer in close female relatives (mother, sister, daughter, aunt, grandmother, great-aunt) on the same side of the family, with at least one diagnosed before age 50.

\*\*\*Hereditary Cancer Program Referral Guidelines from the BCCA can be found at: <http://www.bccancer.bc.ca/HPI/CancerManagementGuidelines/HereditaryCancerProgram/ReferralInformation.htm>

For additional information, physicians and patients are encouraged to contact:

Screening Mammography Program of BC  
8th Floor – 686 West Broadway  
Vancouver B.C. V5Z 1G1  
Telephone: (604) 877-6200  
Fax: (604) 660-3645  
<http://www.bccancer.bc.ca/breastscreening>  
Email: <http://www.bccancer.bc.ca/ContactUs.htm>

## Administration and Audit Implications

### **Responsibility for Documentation:**

#### **Referring/Ordering Physician**

- Recommendation 1 – Diagnostic Mammograms

Physician must document indication(s) for a diagnostic mammogram consistent with this protocol in the patient's clinical record, and on the requisition form.

- Recommendation 2 – Screening Mammograms in Diagnostic Facilities

When a screening mammogram is requested from a diagnostic facility, the physician must provide adequate documentation in both the patient's clinical record and the requisition to show that the request is consistent with Recommendation 2.

#### **Diagnostic Facility**

- Recommendation 1 – Diagnostic Mammograms

In order for the service to be covered by MSP, the facility must ensure that the indication for a diagnostic mammogram is adequately documented on the patient's requisition form.

- Recommendation 2 – Screening Mammograms in Diagnostic Facilities

The facility must ensure that documentation on the patient's requisition form meets one or more of the criteria listed under Recommendation 2.

### **Sponsors**

This protocol was developed by the Guidelines and Protocols Advisory Committee and supersedes the previous protocol developed in 1998. This protocol has been approved by the British Columbia Medical Association and adopted by the Medical Services Commission.

This guideline is based on scientific evidence current as of the effective date.

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The principles of the Guidelines and Protocols Advisory Committee are to:

- encourage appropriate responses to common medical situations
- recommend actions that are sufficient and efficient, neither excessive nor deficient
- permit exceptions when justified by clinical circumstances.