

Sample Lay Letter for Need Additional Imaging Evaluation (to be used with BI-RADS[®] 0)

Name of Facility, Address and Phone Number
Name of Patient/ID
Date of Breast Imaging

Dear Patient:

Your recent [mammogram **or** breast ultrasound **or** breast MRI] showed a finding that ***requires additional imaging studies***, such as additional mammographic views or ultrasound, for a complete evaluation. Most such findings are benign (not cancer). Please call [telephone #] to schedule an appointment for these tests if you have not already done so.

A report of your results was sent to: [referring health care provider].

Your images will become part of your medical record at [facility name]. They will be on file for your ongoing care. If, in the future, you change health care providers or go to a different location for a mammogram, you should tell them where and when this mammogram was done.

Even though mammograms are the best method we have for early detection, not all cancers are found with mammograms. If you feel a lump or have any other reasons for concern, you should tell your health care provider.

Thank you for allowing us to help meet your health care needs.

Sincerely,

Jane Smith, M.D.
Interpreting Radiologist