



The Royal Australian  
and New Zealand  
College of Radiologists

# Synoptic breast imaging report

including imaging classification (1–5)



NATIONAL BREAST  
CANCER CENTRE  
Incorporating the  
Ovarian Cancer Program

1. Patient identification details:
2. Reason for examination:
3. Breast density:
 

<input type="checkbox"/> <25% glandular	<input type="checkbox"/> 25–50% glandular
<input type="checkbox"/> 51–75% glandular	<input type="checkbox"/> >75% glandular
4. Number of significant imaging lesions:

	Lesion #1	Lesion #2	Lesion #3
5. Side:			
6. Mammography characteristics:			
Lesion type:			
Quadrant:			
7. Ultrasound characteristics:			
Lesion type:			
O'clock:			
8. Distance from nipple (in mm):			
9. Size (maximum diameter in mm):			
10. Combined imaging diagnosis/Differential diagnosis:			
11. Correlation with reason for referral:			
12. Imaging classification (1–5):			
13. Recommendation for further investigation:			



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## Imaging classification (1–5)

### 1. No significant abnormality

- There is no significant imaging abnormality
- Standard-format checklist is not required
- If there is a clinical symptom, and there are no imaging abnormalities to explain it this should be stated in the report
- This classification does not preclude biopsy of any clinically suspicious area

### 2. Benign findings

- No further imaging is required
- Standard-format checklist is optional
- Correlation of findings with clinical symptoms, if present, should be stated in the report
- This classification does not preclude biopsy of any clinically suspicious area

### 3. Indeterminate/equivocal findings

- Requires further investigation, usually with percutaneous needle biopsy (fine needle aspiration (FNA) cytology and/or core biopsy)
- Management should be based on the outcome of the triple test
- There may be a limited role for early follow-up (eg inflammation)
- Further investigation will almost always resolve the indeterminate nature of the lesion
- Correlation of findings with clinical symptoms, if present, should be stated in the report
- This classification does not preclude biopsy of any clinically suspicious area

### 4. Suspicious findings of malignancy

- Requires further investigation with percutaneous needle biopsy sampling
- May require excisional biopsy
- Correlation of findings with clinical symptoms, if present, should be stated in the report

### 5. Malignant findings

- Requires further investigation even if percutaneous needle biopsy sampling is benign
- Correlation of findings with clinical symptoms, if present, should be stated in the report