

Diagnosis of Cluster of Calcifications

Clinical Situation

The patient was a 64-year old woman who presented with new clustered coarse calcifications in her right breast (12 o'clock). The clustered calcifications are seen on spot magnification RMLO view (*Figure 1*). The lesion was classified as BIRADS category 4, warranting biopsy. A biopsy using an 8G Mammotome® System under stereotactic guidance was performed.

Procedure

This lesion was biopsied with the 8G Mammotome® System. Specimens were obtained at four clock positions: 12, 3, 6, and 9 o'clock. A specimen radiograph was also obtained to ensure that the core tissue contained microcalcifications (*Figure 2*). Post biopsy right lateral medial mammogram reveals no residual calcifications and shows the MammoMARK™ tissue marker that was placed at the biopsy site (*Figure 3*).

Discussion

All the calcifications were retrieved in one of the four cores collected using the Mammotome® 8G. This was done to ensure that any heterogeneity of the lesion was included in the sample for the pathologist. The tissue marker provides the landmark of the biopsy site.

Summary

Pathology Report: Fibroadenoma with calcifications

Recommendation: One year follow up.

The 8G Mammotome® is an ideal probe choice for sampling clustered microcalcifications because the entire cluster can be accurately and efficiently sampled. The pathologist can make a more accurate diagnosis when the entire lesion or greater portion of the lesion is sampled, which decreases the chance of discordant biopsy results. Moreover, retrieval of four specimens with the 8G instead of 10 or 11 cores with the 11G shortened the procedure time with no increased discomfort or bleeding.

Courtesy

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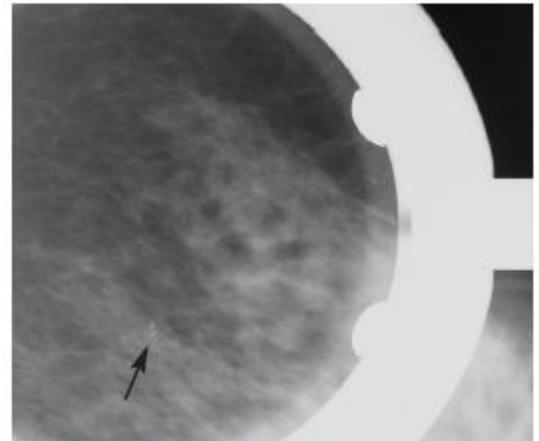


Figure 1 Clustered coarse calcifications.



Figure 2 Specimens were obtained.

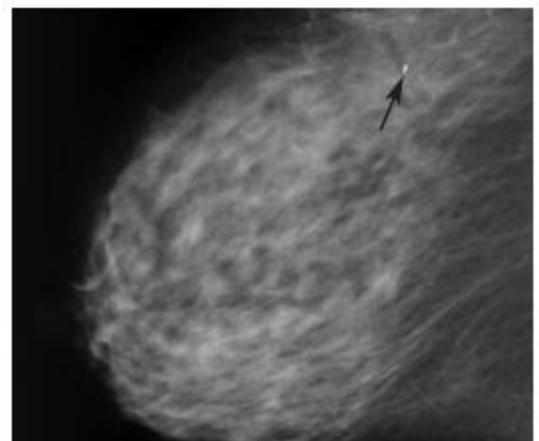


Figure 3 Tissue marker is placed at the biopsy site.