SBI Recommendations for a Thoughtful Return to Patient Care

(Patient Version)

The SBI acknowledges the importance of radiologists and their staff carefully discussing how and when to best care for their patients. Each city and state will face unique local challenges and receive guidance from government leaders about public safety. We would like to provide some recommendations about when the right time is to resume breast imaging.

Many factors impact these decisions and timeframes: how many people the virus has infected at different locations within a state, how well patients are following government orders to reduce the spread of the virus, how well health care workers are protected with proper equipment and how well people are keeping the proper distance from each other. The decision to restart breast imaging should also be based on whether the local breast cancer specialists (radiologists, surgeons, oncologists and radiation oncologists) and their staff are able to accept new breast cancer patients. Discussion and coordination amongst these specialists and their administrators will be key in creating plans to best meet the needs of all who are involved.

Breast imaging radiologists should discuss these issues with their fellow physician colleagues and their administrators so they can create a plan which will meet the needs of all who are involved.

Some suggestions on safe breast care include:

1. Patients can expect to be screened for COVID symptoms and exposure at the time of scheduling and again in person when they arrive at the facility.
2. Only patients who have cleared the COVID screening process should proceed into the clinic for their imaging tests.
3. Staff should also be screened daily for COVID to protect patients and adhere to their facilities and hospital systems’ practices.
4. The number of appointments for patients may be reduced until we are all entirely safe. This allows less crowded waiting areas so that appropriate social distancing can be achieved, and provides time to disinfect equipment in between patient appointments.
5. Patient registration, check-in and check-out processes may be streamlined to minimize the amount of time spent in the facility.
6. To minimize exposure, patients can expect to contact the fewest number of staff members as necessary for complete care.
7. Staff members and patients should wear masks during every visit. Staff may also wear gowns and gloves.
8. Please see the [Center for Disease Control (CDC) guidance for details about appropriate types of personal protective equipment](https://www.cdc.gov). The CDC link is included on the [SBI COVID-19 resource page](https://www.sbi.org) on the SBI website.

Once a decision has been made to reopen a breast imaging center to its usual pre-COVID practice, it may be necessary to schedule certain patients before others because of schedule backlogs. The priority order will range from those patients with breast cancer who will need immediate care, to those who have the least chance of having breast cancer and may be able to wait until the next available appointment. The list from most urgent to least urgent could be as follows:

1. Patients whose breast cancer surgery was postponed. These patients may need immediate imaging to see if they responded to other forms of treatment and they also might need imaging for localizing and removing their tumors.
2. Patients who were recommended to have an image-guided needle biopsy of a suspicious finding on their earlier imaging study.
3. Women who were recalled for additional imaging because of a finding seen by the radiologist on their screening exam.
4. Women who need a short interval imaging follow-up or have a more long-standing breast problem that requires a diagnostic exam. An example of this would be intermittent breast pain. (Women with breast lumps should continue to seek medical attention as before.)
5. Women who want to return to any form of breast screening (mammography, ultrasound or MRI). These patients may be prioritized according to their overall risk of developing breast cancer or by delaying some screening breast ultrasound and MRI exams for patients who needed them in addition to routine mammography studies. Each practice will do this to best meet the needs of their patient population and/or based on the organizational details which are specific to that facility and region of the country.