1. **INDICATION FOR EXAM:** (check one)
- Screening (asymptomatic)
- Evaluation of breast problem (symptomatic)
- Additional evaluation of recent mammogram
- Short interval follow-up
- Other procedures

2. **TYPE OF EXAM(S) PERFORMED:**
(check all that apply)
- Routine views (MLO, CC)
  - Standard film screen
  - Digital
  - Both
- Diagnostic (additional) views (i.e., spot compression, magnification, other projections, etc.)
  - Standard film screen
  - Digital
  - Both
- Ultrasound
- MRI
- Nuclear medicine
- Other breast imaging

3. **OTHER PROCEDURES PERFORMED:**
(check all that apply)
- Needle localization
- Core biopsy
- Cyst aspiration
- Fine needle aspiration
- Ductogram

4. **Breast density:**
(check denser breast if left and right differ)
- Almost entirely fat
- Scattered fibroglandular densities
- Heterogeneously dense
- Extremely dense

5. **INFORMATION AVAILABLE AT TIME OF ASSESSMENT AND RECOMMENDATION(S):**
(check one from each group)
- *Comparison films:
  - No films
  - No changes
  - Significant changes
  - Films not comparable
- *Physical findings:
  - Not available
  - Available, no findings noted
  - Available, findings noted

6. **ASSESSMENT:**
- 0: Needs additional imaging evaluation
- 1: Negative
- 2: Benign finding
- 3: Probably benign finding
- 4: Suspicious abnormality
- 5: Highly suggestive of malignancy

7. **RECOMMENDATION(S):** (check all that apply)
- Next mammogram:
  - Normal interval
  - *1 year
  - *2 years
  - *Return at age 40
  - *Return at age 50
  - *Other _________
- Short interval
  - *6 months
  - *Other _________
- Immediate Work-up:
  - Additional views
  - Ultrasound
  - *Nuclear medicine
  - *MRI
  - Clinical exam for further evaluation
  - Surgical consult
  - Fine needle aspiration
  - Biopsy
  - Other _______________

8. **DIGITAL MAMMOGRAPHY read by:**
(check all that apply)
- Hard copy
- Soft copy

9. **COMPUTER ASSISTED DIAGNOSIS TECHNOLOGY used to read:** (check all that apply)
- Routine views
- Diagnostic views