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| --- | --- | --- | --- | --- | --- | --- |
| **NHS BSP tomosynthesis image reporting template – reflective evidence** | | | | | | |
| **Patient identification** | | | | | | |
| Hospital no. | |  | | | | | |
| Date of birth | |  | | | | | |
| **Previous screening information** | | | | | | |
| Manufacturer model (please circle) | | Hologic Siemens GE Fuji MIS/ Giotto Other | | | | |
| Lesion identified? (please circle) | | Yes / No | | | | |
| On which slice(s) was the lesion identified? | | | ……………. | | | |
| **Review of screening mammogram** | | | | | | |
| Side and site of abnormality Right | | | | | Left | |
| **Mammographic features** (please circle one or more options) | | | | | | | |
| Well defined | Ill defined | | | Spiculate | |  | |
| Casting | Granular | | | Punctate | | Benign Other | |
| Architectural distortion | Asymmetry | | | Skin thickening | | Lymph node | |
| Fatty | Mixed | | | Dense | |  | |

|  |
| --- |
| **Learning points** |
| Do your outcomes agree with the test set outcomes?  ………………………………………………………………………………………………………………………  …………………………………….……………………………………………………………………………….. |
| What are the main learning points identified and how will these inform your future practice?  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ……………………………………………………………………………………………………………………… |