

Patient Name : MRS. T. PUSHPALATHA
Gender/Age : Female /40 Years
Referred By : DR PRASHANTH EDWARDS (84534)

Patient Id/ Bil No. : 2503-0670
Reg. Date : 24-03-2025
Reported Date : 27-03-2025

DEPARTMENT OF RADIODIAGNOSIS AND IMAGING
SONOMAMMOGRAPHY OF BOTH BREASTS

Clinical history :Check up.

Technique: Ultrasound scan of breasts was performed with 7.5 MHz linear array transducer.

Findings:RIGHT BREAST:

Two thin walled lobulated simple cyst measuring 13.5 x 6.5 mm noted in the mammary space of right breast at 11" O clock position.

Two thin walled lobulated simple cyst measuring 9.8 x 3.8mm noted in the mammary space of right breast at 11" O clock position.

Two thin walled lobulated simple cyst measuring 9.4 x 4.1mm noted in the mammary space of right breast at 12" O clock position.

Two thin walled lobulated simple cyst measuring 7.2 x 3.1mm noted in the mammary space of right breast at 8" O clock position.

LEFT BREAST:

Two thin walled lobulated simple cyst measuring 7.4 x 3.4mm noted in the mammary space of left breast at 6" O clock position.

Small iIL defined mildly irregular hypoechoic area measuring 18 x 9 x14 mm noted in the mammary pace of left breast in the retro-aerolar region at 6" O clock position with irregular margins just above the site of excisional biopsy in remote past.

Both breasts reveal predominantly fibroglandular parenchymal pattern with scanty fatty components. No discrete focal mass/ collection / inflammatory changes / dilated ducts.

No thick septa/echoes/cysts noted in either of the cysts.

Pre mammary, mammary and retromammary spaces are normal.

Both nipples, skin and subcutaneous tissues appear normal.

Both axillary regions appear normal. No significant lymphadenopathy.

Visualized pectoralis muscles appear normal.

IMPRESSION:

- **F/s/o multiple cysts in breasts as described (R>>L)-BIRADS 2.**
- ***Small iIL defined mildly irregular hypoechoic area (18 x 9 x14 mm)in the mammary pace of left breast in the retro-aerolar region at 6" O clock***

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***position with irregular margins just above the site of excisional biopsy in
remote past- likely fibrotic scar- BIRADS III***

- Suggested clinical /FNAC correlation.

**DR PRIYANKA
RADIOLOGIST**