

# MRI Breast Screening

## Criteria Based Access

### All Patients

The ICB commissions MRI breast screening as laid out in NICE Clinical Guideline 164 and future versions of this guideline.

**Note:**

Any other requests outside of these guidelines must go through the exceptional funding panel.

For more information, please see <https://remedy.bnssg.icb.nhs.uk/>

## BRAN

For any health- related decision, it is important to consider “**BRAN**” which stands for:

- **B**enefits
- **R**isks
- **A**lternatives
- **D**o **N**othing

### Benefits

- Increased chance of detecting cancer early

### Risks

- Bruising and swelling
- Allergic reaction

### Alternatives

- Mammogram is to be used in conjunction with MRI



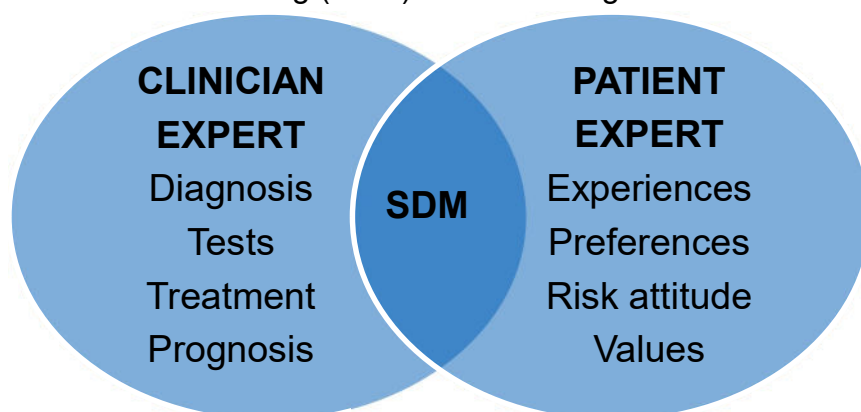
## Do Nothing

Remember, you always have the option to do nothing. Doing nothing is an equally reasonable option to doing something. Sometimes “not yet” is a good enough answer until you gather more information.

## Shared Decision Making

If a person fulfils the criteria for Prophylactic Mastectomy treatment, it is important to have a partnership approach between the person and the clinician.

Shared Decision Making (SDM) is the meeting of minds of two types of experts:



It puts people at the centre of decisions about their own treatment and care and respects what is unique about them. It means that people receiving care and clinicians delivering care can understand what is important to the other person.

The person and their clinician may find it helpful to use ‘Ask 3 Questions’:

1. What are my options? (see sections above)
2. What are the pros and cons of each option for **me**?
3. How do I get support to help me make a decision that is right for **me**?

## Prophylactic Mastectomy – Plain Language Summary

This policy aims to allow women who are at a higher risk of developing cancer to access annual MRI breast screening. An MRI is a scan that uses magnetic fields to produce detailed images of the body. MRI scans can last between 15 and 90 minutes depending on how many images are taken.

The TP53, BRCA1 and BRCA2 genes provide instructions for making tumor suppressing proteins that regulates cell division in a controlled way. Mutations of these genes can increase the risk of breast cancer.

Patients meeting the criteria listed below, based on age and estimated risk, should be offered Annual Magnetic Resonance Imaging [MRI] scans of both breasts without further approval from the Commissioner.

## **This policy has been developed with the aid of the following:**

1. National Health Service (2021) Health A to Z: When you'll be invited for breast screening and who should go [online] [www.nhs.uk/conditions](http://www.nhs.uk/conditions)
2. NICE (2019) Familial breast cancer: classification, care and managing breast cancer and related risks in people with a family history of breast cancer. (CG164) [www.nice.org.uk](http://www.nice.org.uk)

## **Connected Policies**

Breast reconstruction post cancer

## **Due regard**

In carrying out their functions, the Bristol North Somerset and South Gloucestershire Clinical Policy Review Group (CPRG) are committed to having due regard to the Public Sector Equality Duty (PSED), and NHSE Evidence-Based Interventions (EBI). This applies to all the activities for which the ICBs are responsible, including policy development and review.

## Document Control

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## OPCS Procedure codes

Must have any of (primary only):

## Support

If you would like further copies of this policy or need it in another format, such as Braille or another language, please contact the Customer Services Team on: **0117 900 2655** or **0800 073 0907** or email them on [BNSSG.customerservice@nhs.net](mailto:BNSSG.customerservice@nhs.net).