



Transforming Care With Impactful Patient Education

By Sarah Jacobs, BS, RT(R)(M)(CT); Robyn Hadley, RT(R)(M)

Forward momentum created by the SBI's "40 and Forward" initiative provides an opportunity for key technologist involvement. The imaging technologist is often the individual who receives various patient questions and acts as the first line of communication during any mammographic examination. The extensive questions from patients vary and include topics such as new technology, screening guidelines, frequency and duration of screening examinations, breast density, and breast cancer risk. Accurate patient education is one of the most prevalent obstacles to breast cancer screening.¹ Zafar et al discovered a need to provide women with essential information so they could more effectively navigate confusing guidelines and advocate for their own breast health. The study also showed that the perceived harm of anxiety is decreased with patient education.¹ Now is the time to work alongside your team of breast radiologists to develop best-practice guidelines for delivering accurate, relevant information and education while addressing these pressing patient questions.

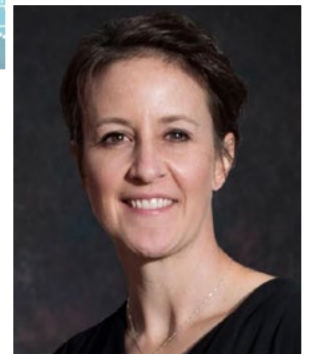
Impactful Results

Leadership teams and breast imaging technologists have an opportunity to elevate the patient's experience by creating and delivering educational content designed to promote compliance, satisfaction, awareness, and knowledge on a consistent basis. Dodelzon et al reported that patients' fears and concerns in the long term can be reduced when cognitive reassurance is offered through information and education along with reassurance techniques focused on the biology of the condition.² Multidisciplinary collaboration through education and engaging patient-centered communication can lead to an elevated patient care experience.²

The Kettering Health Breast Center (KHBC) team has developed a robust program for patient education. KHBC team members (listed at the end of this article) told us they "strongly believe that knowledge about why a test was recommended and what to expect during the exam enhances compliance" and that their "comprehensive educational materials aim to reduce anxiety, empowering patients with knowledge about their breast imaging" (email, March 28, 2025). KHBC team members also shared that most of their patients express gratitude for the educational material provided.



Sarah Jacobs, BS, RT(R)(M)(CT)



Robyn Hadley, RT(R)(M)

Breast imaging is a team sport! Collaboration between technologists and radiologists is important when creating key educational resources and scripts that address patients' questions. Collaboration also promotes standardized practices throughout the organization. There are 40 different ways to answer four patient questions. Ask your technologists the most common questions they receive from patients and create scripts and resources to help them provide patients with precise, accurate, and informative answers. KHBC's patient education program is led by Deanne Rose, Breast Center director, and Bruce Gearhart, medical director, in collaboration with the management and marketing teams. Updates to patient material at KHBC are based on patient feedback and staff suggestions. Taking into consideration the efforts of the SBI and the work by Dodelzon et al² and KHBC, the following is a game plan to develop a 40 and Forward team playbook to help optimize and drive the SBI's initiative.

Educational Lineup: Top Picks

Whether patients ask questions during their examinations or reach out after their appointments with various questions or concerns, establishing a standard process to address inquiries and effectively educate patients is helpful for staff and improves patient care and communication. KHBC recognized this opportunity to elevate patient care. KHBC provides every patient undergoing screening with a "Next Steps" rack card that includes information about cancer risk assessment, results delivery, breast tissue density, supplemental screening options, and the breast patient navigation team (Figure 1). Patients undergoing diagnostic imaging at KHBC are provided "tailored material based on their specific needs, such as information about cysts, gynecomastia, or calcifications. When biopsy

Continued on page 8>

is recommended, a breast patient navigator will review the materials with the patient” (email, March 28, 2025). Several essential resources can be used at the time of the examination, and technologists can take strategic steps to alleviate additional concerns and put the patient’s mind at ease. Beginning the process can be daunting. The following are potential considerations for educational handouts.

- Breast density
 - Using lay terms, explain breast density and the different categories that a patient’s individual density may fall into. Ensure that the verbiage in the handout matches the verbiage used in the patient’s report.
 - Using visual aids to support the density description is beneficial.
 - Provide technologists with a short, concise script to use when interacting with patients to ensure that they relay clear, accurate information to the patients.
- Risk assessment
 - Offer specific patient handouts that explain general risk factors and risk assessment questions.
 - General risk factors may include factors that a patient cannot control such as age, genetic mutations, reproductive history, dense tissue, personal and family breast cancer history, and previous radiation therapy treatments. It’s also helpful to include risk factors that the patient can control, including physical activity, hormone use, reproductive history, and alcohol consumption.
 - Risk assessment questions can be a source of anxiety for patients. Unfortunately, many patients do not understand why these questions are asked and how they relate to their individual risk. A simple explanation of their importance, along with an educational handout, can be extremely helpful in reducing frustrations and patient anxiety.
 - Inquiring about Ashkenazi Jewish heritage is essential due to the high prevalence of *BRCA1* and *BRCA2* gene mutations in Jewish women of Eastern European descent.
 - Encourage patients to speak with their health care professional, and when appropriate, offer additional information about the facility’s genetics department or high-risk clinic.
- Breast pain: Remind patients that breast pain is common and can affect up to 80% of women during their lifetime. A simple explanation of what breast pain is, along with possible causes and a general overview of when imaging is needed, can help reduce anxiety regarding breast pain.
- Gynecomastia: Describe what gynecomastia is and the various conditions and medications that can cause it. Including a brief explanation of how gynecomastia is diagnosed and potential treatment options can be beneficial.
- Digital breast tomosynthesis (3D mammography): Define and describe the benefits of a digital breast tomosynthesis mammogram in lay terms. Using analogies such as trying to see a single snowflake in a snowstorm can help promote patient understanding.
- Diagnostic callback: Outline the general process before, during, and after a diagnostic callback according to facility protocol. Assure patients that abnormal findings during a screening examination may require additional testing but do not mean they have cancer and can be dense breast tissue, a cyst, or unclear images. Inform patients that baseline mammograms may also need additional review.
- Supplemental screening tools and technology: A resource outlining supplemental screening tools and technology offered by the facility is beneficial for patients inquiring about their options. These tools may include automated breast ultrasonography, breast magnetic resonance imaging, breast ultrasonography, contrast-enhanced mammography, and others.
- Breast implants
 - Highlight the benefits of early detection through screening mammography, emphasizing that the risk of implant rupture during the examination is low and the risk of breast cancer is higher.
 - Facilities may also choose to use a breast augmentation waiver.
- Financial assistance programs: Providing patients with information about programs provided by the facility to assist with financial burdens may help increase patient use of services for their breast care.

Momentum-Shifting Elements

It’s critical to ensure that the educational handouts and the information that your team provides to patients are not only consistent among technologists but also beneficial and informative to patients. Creating educational material in the patient’s preferred language is a key aspect to ensure that patients understand the information. Using basic terminology that’s easily understood and written at a sixth-grade level is ideal for optimal patient understanding. Patients have various learning styles, so a one-size-fits-all approach is often ineffective and counterproductive. If your facility offers videos, posters, visual aids, printed handouts, or brochures, these resources should

align with the verbal education provided to patients from the technologist, interpreting physician, and other imaging staff.

When creating educational patient materials, it is helpful to involve your team of interpreting physicians, breast imaging technologists, and other team members that have direct contact with patients. Specifically, breast imaging technologists play a vital role and bring value to the team by knowing current industry advancements, standards, and regulations and by actively engaging in regular professional development. Their expertise ensures accurate and informative educational content delivery to patients, enhancing patient care and team performance. Our *SBI News* article titled “Encouraging Volunteerism Generates Fulfillment and Opportunities for Technologists” proposed engaging avenues for technologists to stay active and remain up to date on industry advancements and professional knowledge.³ Trusted and credible organizations such as the ACR and SBI and peer-reviewed literature should be used when developing and updating educational materials. The SBI has an excellent resources page on their website to help guide these discussions among radiologists, technologists, and patients. The resources page (Figure 2) offers an abundance of material, including resources and recommendations, *Journal of Breast Imaging* white papers, graphics, and fact sheets to help guide breast imaging teams in creating educational materials. Educational content should be reviewed annually or more frequently as necessary to maintain accuracy, relevance, and up-to-date information.

Recognizing that breast imaging is a team sport, working together to create standardized resources that empower technologists to consistently provide clear and precise answers is essential. By leveraging their front-line role in patient communication, we can make significant strides toward improving patient care and supporting the goals of the SBI’s 40 and Forward initiative. Now is the time for breast imaging teams to take action and create a unique playbook that fosters education and empowerment for both patients and technologists.

Special thanks to the following individuals at KHBC for sharing their experience and providing valuable insight: Deanne Rose, KHBC director; Bruce Gearhart, MD, breast imaging medical director; Tammy Archambault and Camie Herrst, Breast Center managers; Roxanne Baer, quality and accreditation supervisor; and staff technologists.

References

1. Zafar N, Wolf AB, Kepniss JL, Teal AC, Brem RF. [Effectiveness of community education for breast cancer screening](#). *J Breast Imaging*. 2024;6(2):166-174. doi:10.1093/jbi/wbae002
2. Dodelzon K, Shah S, Prasad L, Atallah J, Katzen JT. [Patient-centered care: value added by breast radiologists in the management of breast pain](#). *J Breast Imaging*. 2023;5(5):591-596. doi:10.1093/jbi/wbad023
3. Hadley R, Jacobs S. Encouraging volunteerism generates fulfillment and opportunity for technologists. *SBI News*. April 2024;12-13,22. Accessed April 4, 2025. <https://www.sbi-online.org/news/sbi-news-spring-2024>

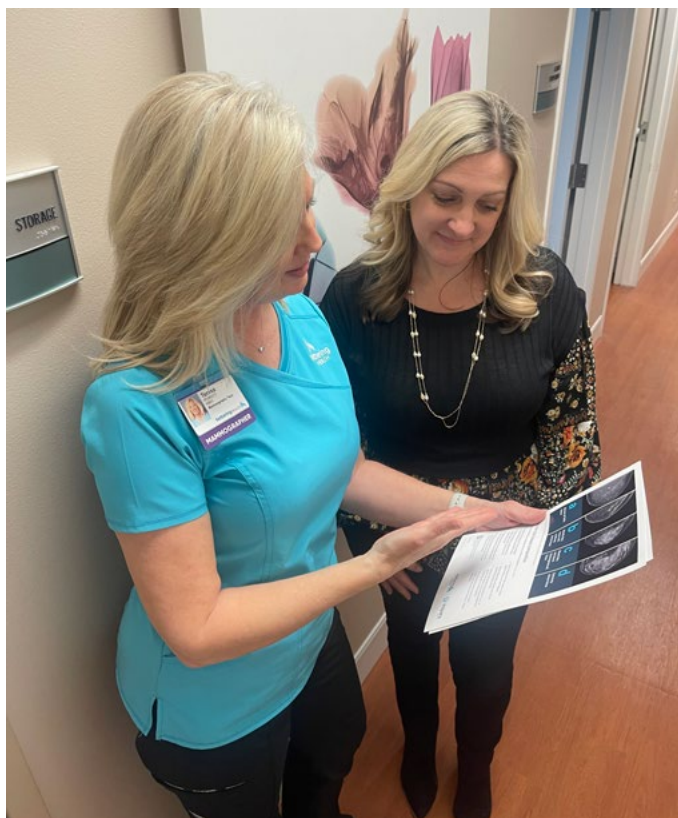


Figure 1. Staff members at Kettering Health Breast Center sharing patient education information. Reprinted with permission.



Figure 2. SBI 40 and Forward web page: <https://www.sbi-online.org/breast-cancer-awareness-resources>