

Every Millimeter of Breast Tissue Captured Counts

Don't Leave a Cancer in the Room

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How I discovered the "true" beauty of Bella Blankets®

Breast Cancer. The first time I heard these words I was in the 9th grade when my best friend's mother passed away very shortly after being diagnosed. I was in the 11th grade when my mother was diagnosed. Losing her in 1975 was one of the most devastating experiences of my life.

Now, after my 39 years of passion and commitment to finding breast cancer as early as possible, I find we still struggle with imaging the tissue near the chest wall where it can "hide."

As open minded as I thought I was, I have to admit I was skeptical when I heard that Bella Blankets protective coverlets could impact the capture of chest wall tissue.

I had always thought that the advantage of using anything on the image receptor to reduce discomfort

was, at best, a psychological one from the patient's perspective. Compression is compression regardless of any attempt to make it more pleasant.

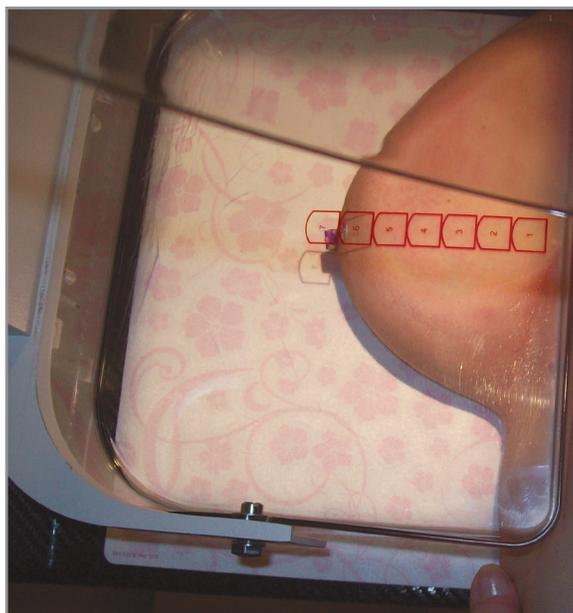
Mammography is not designed for comfort but for breast cancer detection at its earliest stage.

No one likes compression, and coupled with putting the breast on a cold surface, it's not a party any woman is rushing to attend. However, the use of something, anything, to take away the cold sting – I am all in! So, I agreed to try Bella Blankets (Beekley Medical®, Bristol, CT) and therefore had to lose my biased perspective.

Mammography is not an exact science. Every patient is different and the common positioning deficiencies are universal among mammography technologists. Never having used Bella Blankets before, I will tell you that I had to learn to put them on properly and as I was practicing, I thought about those technologists who would blow it off immediately as too much work. Did we blow off doing mammography immediately when we were learning to do the most difficult imaging modality of all time? No. So I said to myself "Susan, be a grown-up and you will get it" and I did.

If it's too much work to use something that can benefit our patients' diagnoses then we are in the wrong field! Remember every millimeter of tissue captured counts.

Every day we are faced with the challenge of shaping a 3-dimensional object into a 2-dimensional image for the sake of diagnosis. I feel that much of the challenge technologists have with positioning comes from their difficulty to properly communicate in order to gain the patient's compliance. But, if there is a tool out there to help me image more tissue, please give it to me.



Bella Blankets® in use during a mammogram.

As I opened my mind and put Bella Blankets® to work I was absolutely “surprised” and at times “shocked” at the results.

First of all, the warmth factor definitely allowed for a more relaxed patient – a critical component to gaining patient compliance and helping to assure proper positioning.

Then I began to discover the true beauty of this product when used on challenging patients. You know them – they have very small, non-mobile, “fixed to the chest wall breasts” that want to slip out from under the compression paddle when you start to compress.

Bella Blankets has a textured feel that actually grips the breast and holds the breast tissue on the image receptor giving me more tissue every time.¹

How about the patient whose skin sticks to the image receptor from perspiration and when you try to mobilize their tissue properly, it will not move and it hurts the patient? Well let me tell you, this blanket completely resolved that situation for me. I have been waiting for this help for a very long time!

How many times do you struggle with imaging the IMF on the MLO view? Well, if you are like most of us, it seems to be a challenge on quite a number of patients. Absence of the IMF indicates exclusion of tissue from that region and results in an incomplete mammogram. Bringing the hips in front of the image receptor is imperative to imaging the IMF when positioning the MLO view.



Susan Sprinkle-Vincent, AAS, RT(R)(M), Susan is an internationally known expert in the field of mammography with 40+ years of experience performing and teaching mammography. Formerly, Susan was the Project Director of Mammography at the University of Texas M.D. Anderson Cancer Center. She joined Advanced Health Education Center (AHEC) in 2000 to expand the mammography educational services and to build

a new division to assist AHEC's clients with mammography consulting services. Susan is widely known for her expertise in the clinical aspects of mammography and her technical skills. She will continue to teach technologists, residents, and physicians the finer details of this highly technical field.

Bella Blankets is extremely helpful with keeping the IMF in place and open by helping to keep the breast out and up. I was amazed and extremely happy to have help with the struggle of the imaged, open IMF!

Consistent, outstanding mammographic positioning is expected of us as mammography technologists in the fight against breast cancer.

We are the ones in the room. We can see the tissue that is not on the image receptor. When the radiologist sits down to read our studies it is critical to the success of screening mammography to give him or her our best work on each and every patient.

So in conclusion – my skepticism was derailed and my faith in a product to assist me to do a better job was revived. I had to be open to the possibilities and give Bella Blankets a chance to make an impression on both the patients' mammograms and myself. Bella Blankets helped position the breast and capture more breast tissue.

Remember, close does not count in the mammography suite. It may be the 20th mammogram of the day for you, but it is your patient's first and only mammogram of the year.

Every patient is someone's loved one; we are in a position of trust and the patient has no control. Why not use the tools developed to assist us with this most valuable lifesaving procedure?

“Don't Leave the Cancer in the Room!”

Bella Blankets® protective coverlets help increase tissue acquisition, immobilize hard to position breasts, prevent breasts from sticking to the receptor plate, shield cuts or infections in the inframammary fold, and act as a sanitary barrier that can help patients feel more at ease.



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¹ Wagner, S. and A Merkulov, MD. 2013. “Comparison Study: Impact of Thin Protective Coverlets on Positioning and Tissue Acquisition in Breast Imaging.”

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