

Contact: Lorna Vaughan
HerSpace Breast Imaging
& Biopsy Associates
W. Long Branch, NJ 07764
732-571-9100, ext. 104
lorna@breast-imaging.com

HerSpace: Breast Imaging Associates FAQ's

Q. Why did Dr. Deutch start HerSpace?

A. *After 12 years as a breast radiologist, Dr. Deutch set out to create her own breast imaging and diagnostic center so she can deliver the expert services women deserve in the most compassionate, respectful way possible.*

Q. What will enable HerSpace to succeed beyond the current breast imaging delivery model?

A. *HerSpace will provide imaging and diagnosis on a fee-for-service basis. This eliminates any dependency on insurance companies which don't cover the cost of mammography in full, and often require the extensive paper trails that delay appointments for weeks, sometimes months.*

Q. What is the average amount of time a woman has to wait for a routine mammogram?

A. *3-5 months*

Q. What is the average amount of time a woman has to wait for a biopsy after an abnormality has been detected?

A. *Anywhere from two to four weeks.*

Q. What is the average wait time at HerSpace?

A. *Routine mammograms are scheduled within two weeks. If an abnormality is discovered, a biopsy can be done in the same visit. Results are available in 24 – 48 hours.*

Q. Exactly which breast imaging and diagnostic services will HerSpace provide?

More...

A. *Full-field digital and film screen mammography, computer aided diagnosis (CAD), breast ultrasound, breast MRI, stereotactic and ultrasound-guided core biopsy (mammotomy), needle localization for surgical biopsy, cyst aspiration, galactography, consults/second opinion, bone densitometry, clinical breast exam and genetic counseling.*

Comment [Judy Musa1]: add all new service

Q. How long does it take to get a mammogram?

A. *Normally, the actual procedure takes less than 1/2 hour.*

Q. What is the greatest concern facing the mammogram patient?

A. *That a lesion goes undetected.*

Q. How many abnormalities are missed on mammograms?

A. *Up to 10%*

Q. Is one kind of mammography better than another?

A. *There are several kinds of techniques and technologies used to perform both detection and diagnostic mammograms. Which one is best suited for which patient depends on her breast type, age, whether or not she is pregnant and other personal medical factors.*

Q. Is one kind of radiologist better suited for mammography than others?

A. *All radiologists can perform mammograms but more and more women are seeking breast imaging radiology specialists who exclusively perform mammography. It just makes sense since specialists understand and have experience in the nuances of the disease. Also, the more experienced the breast imager, the quicker and more expert her skill when performing biopsy procedures. This can significantly reduce patient discomfort.*

Q. Recent articles have challenged the effectiveness of mammography on the breast cancer death rate. Is this true?

A. *Despite these challenges, mammography is continues to be accepted as the only way to detect breast cancer at its earliest, most curable stage. In fact, mammography is credited with reducing the death rate from breast cancer by 30 to 60 percent. Leading cancer organizations and breast cancer advocacy groups including The American Cancer Society, The National Cancer Institute and The Susan G. Komen Breast Cancer Foundation continue to recommend mammograms every one or two years for women 40 years plus. Women who have a history of cancer (either themselves or in their family) should ask their physicians about starting mammograms earlier and on a more frequent basis.*

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