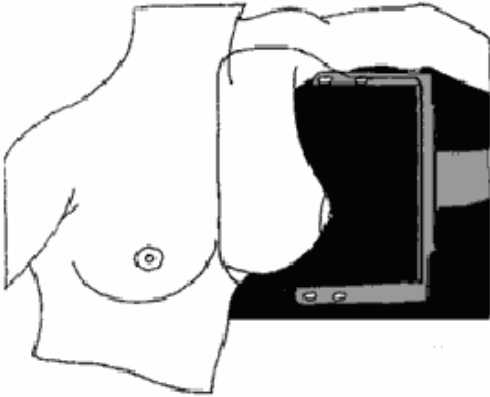

Mammographic Views

Two projections or views of each breast should be obtained for the **Screening Mammogram**. Additional views may be added when abnormalities are found or an area needs further investigation (**Diagnostic Mammogram**).

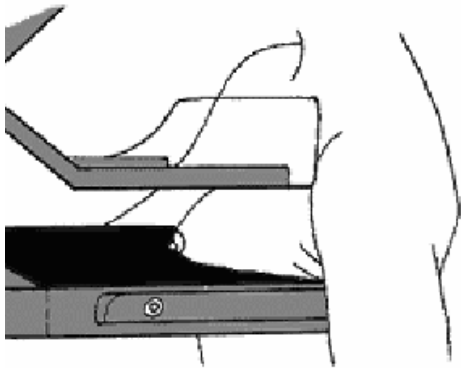


MLO View Position

Medio-Lateral Oblique (MLO)

⌘ The Medio-Lateral Oblique (MLO) view is the most valuable mammographic view. It allows imaging from high in the axilla down to the inframammary fold. The nipple should be imaged in profile in order to not be mistaken for a mass. The pectoralis muscle should be included in the view. Angulation of the mammography unit for the MLO view will vary between 30 and 60 degrees depending on the patient. The breast tissue is compressed from medial to lateral.

⌘ The MLO view estimates the location of a mass either superior or inferior to the nipple with slight variation due to the obliquity (angle).



CC View Position

Cranio-Caudal (CC)

⌘ The Cranio-Caudal (CC) view is the next most valuable view. The mammography unit is adjusted to place the x-ray beam perpendicular to the floor. The nipple should also be seen in profile. The breast tissue is compressed from superior to inferior. Remember marker placement will be toward the axilla.

⌘ The CC view describes the location of a mass either medial or lateral to the nipple.