

Breast Screening is for asymptomatic, eligible participants. Please refer to the reverse side for your screening frequency. Talk to a primary care provider if you have questions about breast screening.

Breast Screening Participants: How to Book Your Mammogram

Book directly with a Screening Centre below or call Client Services at: 1-800-663-9203 for other locations, including communities visited by the mobile mammography service.

Abbotsford	604-851-4750	North Vancouver	604-903-3860
Burnaby	604-436-0691	Penticton	250-770-7573
Coquitlam	604-927-2130	Prince George	250-645-6654
Courtenay	250-331-5949	Richmond	604-244-5505
Kamloops	250-828-4916	Surrey	604-582-4592
Kelowna	250-861-7560	Vernon	250-549-5451
Langley	604-514-6044	White Rock	604-535-4512
Nanaimo	250-716-5904		

Vancouver

505-750 West Broadway	604-879-8700
5752 Victoria Drive	604-321-6770
BC Women's Health Centre	604-775-0022
Mount St Joseph Hospital	604-877-8388

Victoria

305 - 1990 Fort Street	250-952-4232
Victoria General Hospital	250-727-4338

Other Locations:

Visit: screeningbc.ca/clinic-locator

Client Services hours: Monday to Friday 8:00AM - 5:30PM and Saturday 8:30AM - 4:30PM.

Please have your BC Services Card/CareCard and the name of your primary care provider, if you have one, when calling to book your appointment. If you have accessibility needs, please advise so we can book the correct amount of time and ensure that your needs are met.

For Your Appointment - Know Before You Go

Please bring your BC Services Card and photo ID. Wear a two-piece outfit. Don't wear deodorant, powder or perfume. Arrive early. For more information, please visit: screeningbc.ca/breast/how-it-works.

Primary Care Provider: How to Refer High Risk Patients and/or Patients < 40 yo

If the patient:

- is between the ages of 30-39; and/or,
- has never participated in the Breast Screening Program; and,
- is considered High Risk.

Then please complete this initial referral for the patient to present at their appointment. Refer to reverse side to select the appropriate breast screening plan for the patient.

Patient Name: _____

Date of Birth: _____ **PHN/BC Services Card/CareCard #:** _____

☐ Pathogenic gene variant name, if known: _____

Refer to www.bccancer.bc.ca/hereditary for gene variants recognized by the Hereditary Cancer Program.

☐ Very strong family history

☐ Thoracic radiation between ages 10-30

Primary Care Provider Name: _____ **MSP #:** _____

Signature: _____

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My Breast Screening Plan				
✓	Age Range	Your Estimated Risk Level	Risk Detail(s)	Screening Frequency ¹
	40-74	Average		Every 2 years
	40-74	Higher than average	At least one of the following: <ul style="list-style-type: none"> • 1st degree relative with breast cancer • Known diagnosis of ADH, ALH or LCIS² 	Every year
	30 ³ -74	High	At least one of the following: <ul style="list-style-type: none"> • Known pathogenic gene variant⁴ carrier • Untested family member of a known pathogenic gene variant carrier • Very strong family history⁵ • Thoracic (chest) radiation between age 10-30⁶ 	Every year
	75+ ⁷	Any	Any	Every 2-3 years

¹ Breast Screening Program sends reminder notices when participants are due for their next screening exam. It is important to keep your contact and provider information up to date to receive program communications in a timely manner.

² Primary care provider must send a diagnostic referral directly to a medical imaging facility indicating this diagnosis, as outlined in the **Higher Risk Surveillance Provider Fact Sheet**.

³ A participant with an estimated risk of High between the ages of 30-39 requires an initial referral to the Breast Screening Program. Primary care provider must complete the information on the front and participant must provide the details at booking and present slip at time of initial exam. No future referrals are required once initial exam takes place.

⁴ BRCA1, BRCA2, ATM, CDH1, CHEK2, NBN, NF1, PALB2, PTEN, STK11, TP53, or others identified by the Hereditary Cancer Program.

^{5a} 2 biological relatives (parent, child, sibling, grandparent, aunt, uncle, great-aunt, great-uncle) on the same side of the family diagnosed with breast cancer before age 50; or,

^{5b} If 3 or more biological relatives, only 1 needs to be diagnosed with breast cancer before age 50.

⁶ Typically refers to radiation therapy for pediatric and adolescent cancers.

⁷ Higher than average risk participants can continue to screen annually. Reminders will no longer be sent once a participant turns 75. It is encouraged they speak with a primary care provider to confirm if breast screening remains appropriate.

Make an informed decision about breast screening.

Visit www.screeningbc.ca/breast or scan the following QR code for more information.

