T mographic Diagnostic Imaging

Discover Health Through Awareness

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Rd
Perkasie, Pa 18944

Dear Ms :

Enclosed please find a copy of your Thermographic Images along with an interpretation. I am pleased to report that the study is **normal** or unchanged from prior exam(s).

You will also find a universal claim form enclosed as well. Please complete the upper half and submit it to your insurance company for reimbursement if you wish.

We will notify you by mail in one year for a follow-up exam. Please call sooner if you have any concerns.

Thank you for choosing TDI where we have been providing quality infrared imaging for over 35 years.

PHILIP GETSON, D.O.

BOARD CERTIFIED THERMOLOGIST
FELLOW OF THE AMERICAN ACADEMY OF THERMOLOGY

100 Brick Road, Suite 206
Marlton, NJ 08053
(856) 596-5834
www.TDINJ.com

Patient Name: **Date of Exam:** **October 2017**
Date of Birth: **Type of Exam:** **Breast**
Thermal Risk Indicator: **Suggested Recall:**

HIPPA Compliance Notice: This report and the accompanying Thermographic images have been reviewed, mailed or electronically transmitted in compliance with the HIPPA regulations in effect since April 14, 2003. This examination was authorized by the patient whose name appears on these documents as was its interpretation and, where applicable, the electronic transmission to and from the facility in which the images were taken. No other parties other than those authorized by this patient may read, reproduce or otherwise distribute copies of this examination and report without the express written authorization of the patient.

Thermal Imaging Procedures: The attached Thermogram represents clinical infrared imaging technology utilizing the FDA approved MHS 7000 infrared imaging system. Strict adherence to thermal imaging protocols was observed. Thermal imaging is a test of physiology which is complementary to anatomical imaging techniques. Though proven to be highly accurate, thermal imaging is not intended to replace such conventional anatomical studies such as (but not limited to) mammography, ultrasound, MRI, CT scan, plain films X-ray etc. (where applicable). Thermography utilizes infra-red technology which is a mapping technique and therefore does not see *into* the body. It therefore does not image the cranial vault, thoracic cavity, abdominal or pelvic cavities or organs etc, nor does it image bone, muscle or connective tissue. Thermographic indicators are frequently present which relate to these structures; however the absence of such signals does NOT necessarily indicate an abnormality within any of the above named structures. Thermographic abnormalities should be used as a part of the patient's evaluative process for pathology and abnormalities. Thermography utilizes the premise that the body is a symmetrical entity. As such, significant temperatures indicate abnormality. However, bilateral hyperthermic patterns exist at times in the presence of abnormality. Therefore, such patterns cannot exclude bilateral pathology and should be considered in the context of the patient's history, physical exam and other testing. The value in such cases is limited to baseline evaluation for comparison to future studies and for immediate clinical correlation to other testing. . Thermography is NOT and has never been a tool to diagnose cancer. Rather it serves as a breast health risk assessment

BREAST EVALUATION

Rating scale: This scale is used for breast evaluation purposes. The patient rating is seen in "Findings" below

TH-1 Symmetrical Bilateral – Non-Vascular (non-suspicious, normal study)
TH-2 Symmetrical Bilateral - Vascular (non-suspicious, normal study)
TH-3 Equivocal – low index of suspicion
TH-4 Abnormal – Moderate index of suspicion
TH-5 Suspicious – High index of suspicion

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Explanation of Delta-T Measurements: The breasts are compared right to left in identical locations. The difference in temperature for each area is termed Delta-T and is reported in degrees Centigrade ©. In the opinion of this evaluator, based upon criteria established by the thermographic community, any delta above 1.0 degrees C at the nipple or 1.5 degrees C elsewhere should be clinically correlated by the referring physician and if the workup is negative monitored thermographically for one year. These numbers are considered risk guidelines and a part of the patient's overall evaluation.

Findings:

Right Breast: TH - 2

Left Breast – TH – 3-due to increased nipple temperature

Comments:

This is a normal study for this individual. The asymmetry in the nipple temperatures is considered normal and due to the configuration of the nipples
If there are no clinical concerns, annual thermograms are recommended as a part of a comprehensive health care program that includes regular breast self-exams and annual examinations by a health care professional.

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IN ORDER TO BETTER UNDERSTAND YOUR STUDY, PLEASE GO TO OUR WEBSITE @: TDINJ.COM
AND LOOK AT THE FAQ CALLED:
HOW DO I UNDERSTAND MY THERMOGRAPHIC REPORT?

Patient Name:
Date of Birth:
Thermal Risk Indicator: 33-high

Date of Exam: December 2023
Type of Exam -Breast
Suggested Recall: One year

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1/18/2024

BREAST EVALUATION

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TH-1 Symmetrical Bilateral – Non-Vascular (non-suspicious, normal study)
TH-2 Symmetrical Bilateral - Vascular (non-suspicious, normal study)
TH-3 Equivocal – low index of suspicion
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TH-5 Suspicious – High index of suspicion

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Findings: **Right Breast: TH -2**

Left Breast – TH-2

Comments: **This is a normal study for this individual. Prior study/studies were reviewed.**
When compared to the most recent study of October 17, 2022 there has been no interval change.
If there are no clinical concerns, annual thermograms are recommended as a part of a comprehensive health care program that includes regular breast self-exams and annual examinations by a health care professional.

1/8/2024

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