Thermal Imaging Services

Patient's Name	[redacted]	**Report Date**	12/09/2009
Patient ID	KerRob20111953	**Study Date**	12/04/2009
Date of Birth	11/20/1953	**Thermographer**	Kathy Markham, CCT
Referring Practitioner	Dr. Patrick Price, DC	**Reporting Physician**	Jeanne Stryker MD

PHYSICIANS INSIGHT
INITIAL BREAST STUDY

REPORTED HISTORY:
Unknown family history, benign right outer breast biopsy 2006, OCP history > 5 years.

INTERPRETATION:

There are slight thermal asymmetries seen in the breasts. There is a vascular pattern in the left medial breast near the sternum with a temperature differential of 1.1 degrees C and left breast at 12 o'clock with a temperature differential of 1.0 degree C. The thermal patterns in both breasts are suggestive of fibrocystic changes (most often associated with estrogen dominance or progesterone deficiency). Fibrocystic changes are often associated with nodularity and discomfort.

RECOMMENDED FOLLOW-UP:
These findings do not appear thermographically suspicious but should be monitored for change.
1. This study is suitable to be archived and compared with a repeat study in three months to establish a stable baseline, prior to annual testing. Patient may benefit with an MRI, ultrasound or mammogram for anatomic imaging prior to follow up thermogram.
2. In addition to thermal imaging, continue with routine follow-up breast examinations with her physician as indicated or at least annually.
3. Recommend ongoing consultation with her physician or qualified health professional regarding dietary, nutritional supplements, hormone balance/testing, urinary estrogen metabolites, genomic testing and lifestyle practices that support breast health.

Thank you for your kind referral,

Jeanne Stryker, MD
Diplomate American Board of Radiology

Disclaimer: The telemedicine system can fail due to circumstances the provider cannot control- for example, telecommunication interruption, power failure, software and remote equipment failure. The telemedicine system may relay information that is not accurate- for example, colors may be distorted, files may be incomplete. Thermography is an adjunct to mammography and does not replace mammography. A negative thermogram, mammogram and ultrasound do not preclude biopsy based on clinical condition.

DESCRIPTION OF THE THERMAL IMAGING STUDY

Clinical Thermal Imaging
The patient above was examined by digital infrared thermal imaging using a high-resolution camera specific for clinical applications. Standardized thermography protocols were implemented which are designed to optimize clinical correlation of thermal patterns.

Medical imaging using infrared thermography captures the natural infrared emissions from the human body. These emissions vary in intensity and distribution over each body region and can be detected as thermal patterns of skin temperature. Advanced digital cameras as used in this study display these patterns as high-resolution color images in which colors represent different temperatures.

The subsequent images reflect underlying neurovascular physiology and allow identification of asymmetric, abnormal or suspicious thermal patterns over a specific area or region of interest. Such patterns may represent abnormal physiology or function. Thermal analysis of an imaging study allows objective clinical correlation by the physician and contributes to the decision-making process regarding therapy, additional testing and diagnosis.

Breast Thermography
Likewise, breast thermography is an adjunctive physiological assessment that is achieved by creating each person's unique baseline pattern via an initial and usually a three month follow-up test to assess thermal stability. By this approach, cold stress testing is not considered necessary. Once established, monitoring thermal stability is achieved by comparison to this baseline at any time in the future.

Such monitoring affords detection of even subtle thermal changes that, although not diagnostic, may precede anatomical findings by years and prompt early investigation and prevention. Thereby, breast imaging can be integrated as indicated with diagnostic anatomical tests such as ultrasound and mammography. Close follow-up and clinical correlation of thermal findings by the patient's physician is always recommended.

Study Outcome
This study provides adjunctive clinical information and recommendations based solely upon the images and patient information provided, to support the patient's physician in medical evaluation and management.

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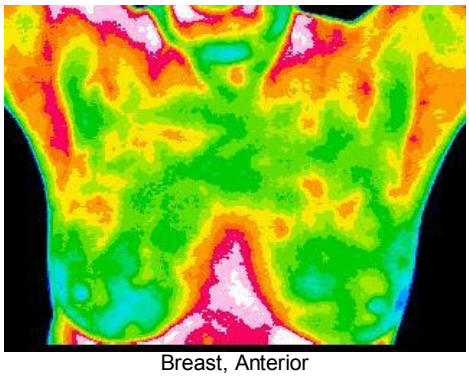
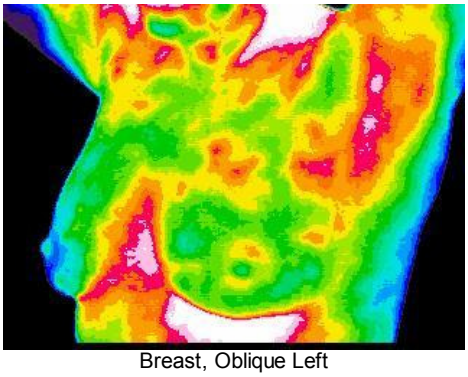
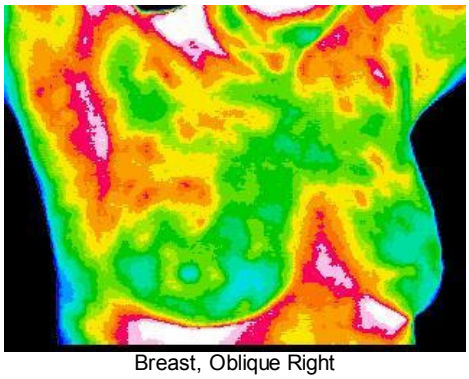

Breast, Anterior


Breast, Lateral Right


Breast, Lateral Left


Breast, Oblique Left


Breast, Oblique Right