

FINAL BILL REPORT

ESSB 5084

C 122 L 18
Synopsis as Enacted

Brief Description: Providing women with timely information regarding their breast health.

Sponsors: Senate Committee on Health Care (originally sponsored by Senators Rolfes, Angel, Hasegawa, Nelson, Honeyford, Darneille, Billig, Keiser, Wilson, Saldaña, Warnick and Kuderer).

Senate Committee on Health Care
House Committee on Health Care & Wellness

Background: Mammograms are screening tests used for early breast cancer detection and for breast evaluation. Breast density is a measure used to describe the proportion of the area of breast and connective, or fibroglandular, tissue to the area of fat. Breast and connective tissue is denser, meaning it blocks the passage of x-rays to a greater extent than fatty tissue. Dense tissue appears white or light gray on a mammogram. Lumps, both benign and cancerous, also appear white. Thus, mammograms may be less accurate in patients with dense breasts because it is more difficult to interpret or detect abnormalities.

A qualified health care provider reviews mammographic results to screen for visible abnormalities and may assign a mammogram to one of four categories of breast density, as published in the the Breast Imaging Reporting and Data System Atlas by the American College of Radiology. Patients classified in the highest two density levels have heterogeneously or extremely dense breast tissue.

The federal Mammography Quality Standards Act (Act) requires any facility that performs a mammogram to send each patient a summary of the mammography report written in lay terms within 30 days of the examination. Facilities must also send a full written report including a final assessment of breast density findings to the patient's physician, or directly to the patient if there is no identified physician, within 30 days of the examination. The Act does not require breast density information in the summary sent to the patient.

Summary: After a mammogram, a health care facility must send the patient the information required by the Act and information that identifies the patient's individual breast density classification. If a physician determines that the patient has heterogeneously dense or extremely dense breast tissue, the health care facility must include a notice to the patient that explains that roughly half of all women have dense breast tissue and that this is normal but may make it difficult to evaluate a mammogram. The notice must also include a statement

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encouraging patients to discuss this with their health care providers to decide future screening options.

This bill does not create a duty of care or impose any liability on a physician or health care facility beyond the duty to provide notice.

Votes on Final Passage:

Senate	48	0	
House	98	0	(House amended)
Senate	48	0	(Senate concurred)

Effective: January 1, 2019