

Mammogram Count: 1-5

Last Anatomical Study: 10/20/23

Study Results: Normal

Diagnosed with Cancer: No

Date of Diagnosis: -

Cancer Type: -

Treatment: -

Hormone Therapy: -

Breast Disorders: -

Surgical History: -

Concerns: No concerns

Breast Symptoms: -

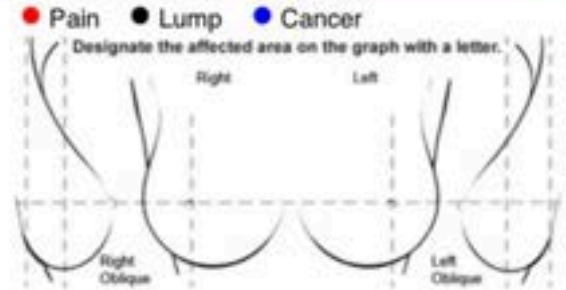
Miscellaneous Symptoms: Concerns: No concerns, Concerns: No concerns, Concerns: No concerns, Concerns: No concerns

Exam Notes: Baseline

No PMH BC/OC

BC: Mother, P GM

Dent: No RCT, AMAL/P



#### DELTA T

Region	Current	Previous	Threshold
Breast Global	0.68	-	0.3
Breast Nipple	0.86	-	1.0
Supraorbital	-0.44	-	0.3

*These values are a guide and for future comparison only*

#### Breast Impressions

May 13th, 2024. Last anatomical study was Oct. 2023. She reports no specific breast concerns.

- The breast global temperature difference is 0.68 degrees hotter on the right, which is above the threshold.
- The nipple temperature difference is within normal limits.
- The thermovascular evaluation shows asymmetrical thermal patterns more diffuse in nature over the right breast, as seen in image number 10.
- The lower inner quadrant of the right breast shows a hyperthermic pattern that has a delta T of 2.23 degrees, as seen by point number 3 in image number 10.
- There is a hyperthermic pattern over the lower outer quadrant of the right breast, as seen by point number 1 in image number 13 with a delta T of 2.88 degrees. This relatively high delta T could be due to the hypothermia on the opposite side.
- The left axillary and axillary tail region is more hyperthermic than the right side, as seen in image number 14. Clinical correlation should be done.
- Multiple fragmented thermal patterns are seen over the breasts, which may be related to hormonal disruption or fibrocystic breast activity.

I recommend thermal findings from this exam be clinically correlated along with any further diagnostic imaging deemed necessary by the client's healthcare provider. Follow-up breast thermography in 6 months to form a baseline, compare subsequent testing, and monitor for changes.

#### Recommendations

These findings must be correlated with current anatomical studies including but not limited to mammogram, ultrasound, MRI or any other testing modality by this patient's physician.

#### Follow-up

6 months

## Patient Symptoms

Concerns: No concerns, Concerns: No concerns, Concerns: No concerns, Concerns: No concerns

## Head/Neck

Symptoms: Concerns: No concerns

Comments:

- The right side of the forehead is more hypothermic than the left, which may be related to carotid artery insufficiency or due to a neurogenic origin.
- The oral region into the submandibular region is hyperthermic, which may be related to an underlying dental pathology. Further evaluation should be done.
- The hyperthermia over the TMJs could be related to bruxism or other TMJ disorder.
- The hyperthermia over the anterior cervical region could be related to lymphatic congestion and from stress to muscles over this region. Clinical correlation should be done.
- The thyroid region is hyperthermic, which may be related to an underlying thyroid pathology and may also be due to an increased cavity radiator in that area and is difficult to assess. Clinical correlation should be done.

## Abdomen

Symptoms: Concerns: No concerns

Comments:

- The upper and lateral aspects of the abdomen are hyperthermic, which may be related to underlying intestinal inflammation and should be clinically correlated.
- Diffuse fragmented thermal patterns are present over the abdomen that may be related to hormonal disruption or toxicity.

## Spine/Posture

Symptoms: -

Comments:

- The left posterior arm is more hypothermic than the right side, which could be due to nerve root compression of the cervical spine.
- The cervical, trapezius muscles, and interscapular regions are hyperthermic, which may be related to stress over muscles of that region from posture. Clinical correlation and further evaluation should be done.
- Diffuse hyperthermia is present over the lumbar spine. This could be related to stress over that region from posture or weight bearing. Further evaluation should be done.
- The left gluteal region looks more hypothermic than the right, which may indicate the presence of nerve root compression in the lumbosacral region.

## Lower Extremity

Symptoms: Concerns: No concerns

Comments:

- Thermal patterns that could be varicosities are present over the lower extremities and should be clinically correlated.
- The hyperthermia over the anterior tibial regions could be due to weight bearing or activity.
- The plantar surface of the right foot is more hyperthermic than the left, which may be related to unbalanced gait patterns or underlying inflammation.

## Upper Extremity

Symptoms: Concerns: No concerns

Comments:

- The mottling patterns over the shoulders and posterior arms may be related to hormonal disruption or toxicity.
- The fingertips are hypothermic, which may indicate the presence of decreased circulation to the hands or due to a neurogenic origin. Clinical correlation should be done.

## General Impressions

No remarks.

## Follow-up

1 year

**This report has been analyzed by the following interpreters according to PACT Standards and Protocols:**

Prepared by:

Preliminary Interpreter:

Preliminary Signature:

Approved by Senior Interpreter:



PROFESSIONAL  
ACADEMY OF  
CLINICAL  
THERMOLOGY

Address:		DOB:
Technician Name:	Doctor's Name:	Referring Physician:
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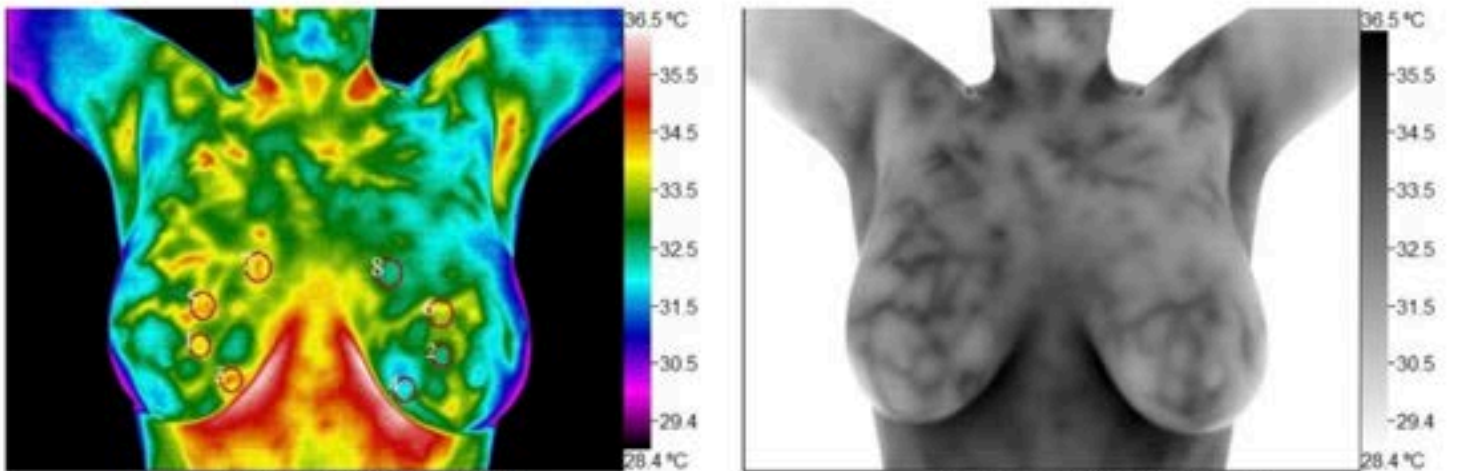
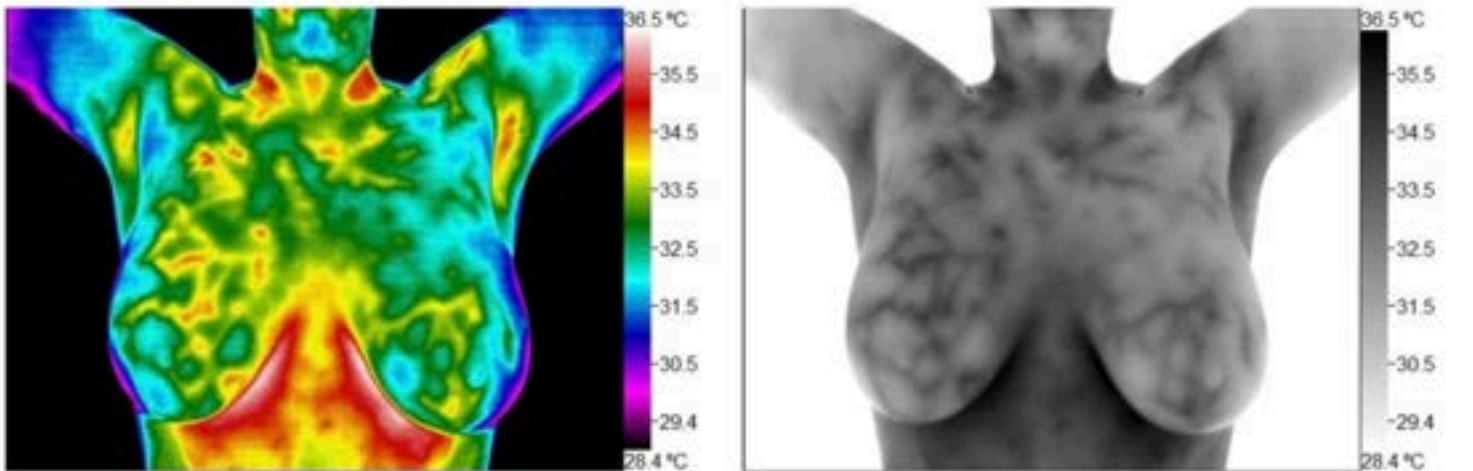


Image	Zone	Min	Delta T(Min)	Max	Delta T(Max)	Avg	Delta T(Avg)
Left	1	33.18 °C	1.14	34.38 °C	1.33	33.77 °C	1.30
Left	2	32.04 °C		33.05 °C		32.47 °C	
Left	3	33.08 °C	1.83	34.72 °C	2.25	34.05 °C	2.23
Left	4	31.25 °C		32.47 °C		31.82 °C	
Left	5	33.15 °C	0.38	34.56 °C	0.46	34.10 °C	0.58
Left	6	32.77 °C		34.10 °C		33.52 °C	
Left	7	33.26 °C	1.26	34.58 °C	1.53	33.99 °C	1.56
Left	8	32.00 °C		33.05 °C		32.43 °C	





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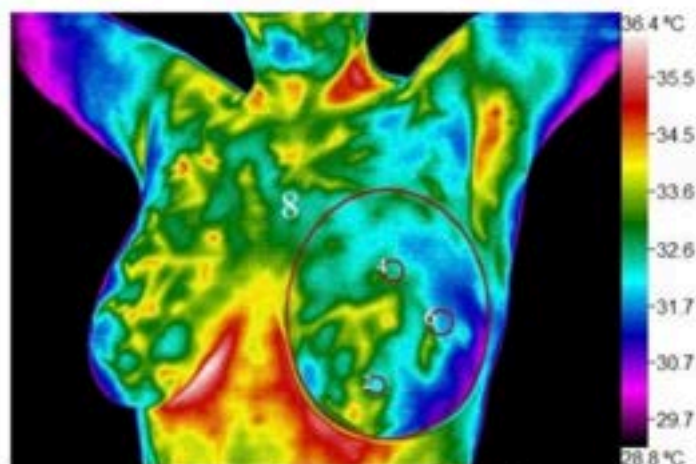
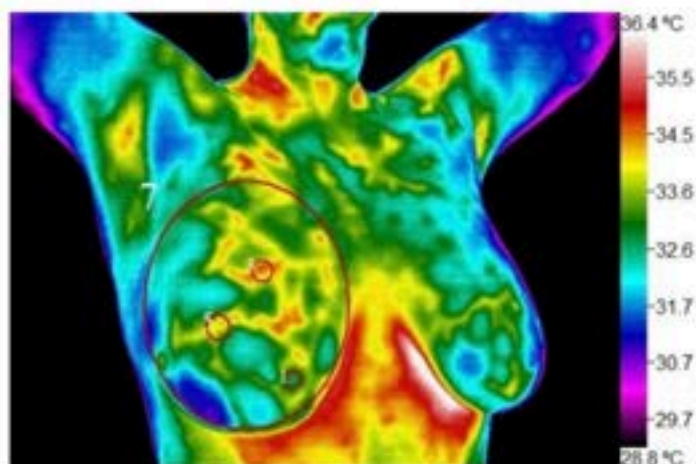


Image	Zone	Min	Delta T(Min)	Max	Delta T(Max)	Avg	Delta T(Avg)
Left	1	32.37 °C	0.82	33.35 °C	0.68	32.83 °C	0.86
Right	2	31.55 °C		32.67 °C		31.97 °C	
Left	3	33.65 °C	1.77	34.88 °C	1.87	34.32 °C	1.94
Right	4	31.88 °C		33.01 °C		32.38 °C	
Left	5	32.73 °C	1.62	34.60 °C	1.74	33.71 °C	2.00
Right	6	31.11 °C		32.86 °C		31.71 °C	
Left	7	30.34 °C	0.41	34.88 °C	0.23	32.95 °C	0.68
Right	8	29.93 °C		34.65 °C		32.27 °C	



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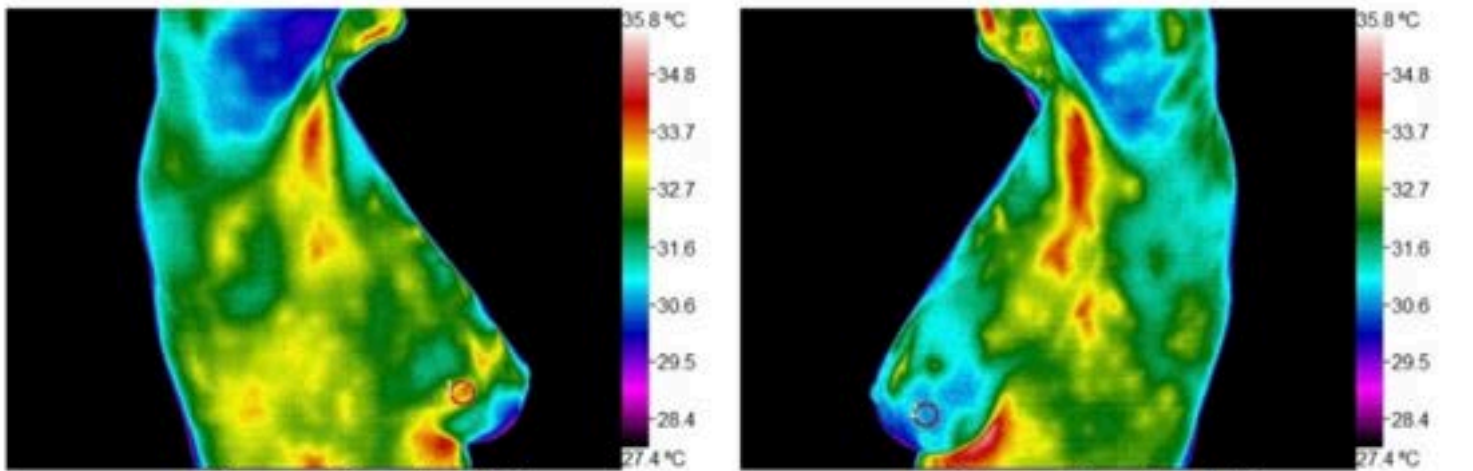
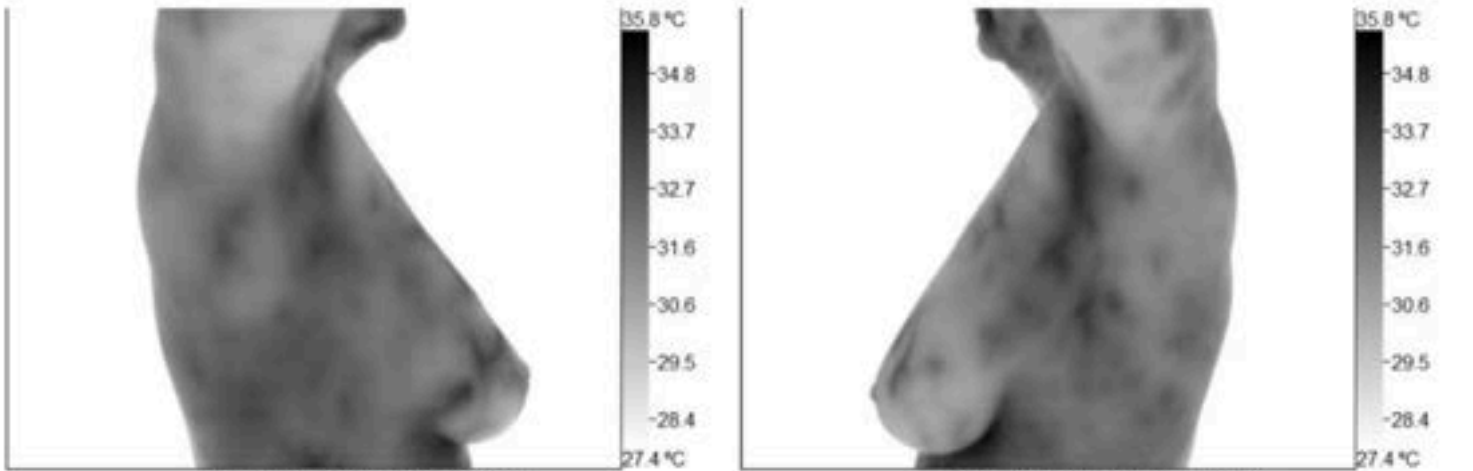


Image	Zone	Min	Delta T(Min)	Max	Delta T(Max)	Avg	Delta T(Avg)
Left	1	32.36 °C	2.32	34.12 °C	3.32	33.33 °C	2.88
Right	2	30.04 °C		30.80 °C		30.45 °C	



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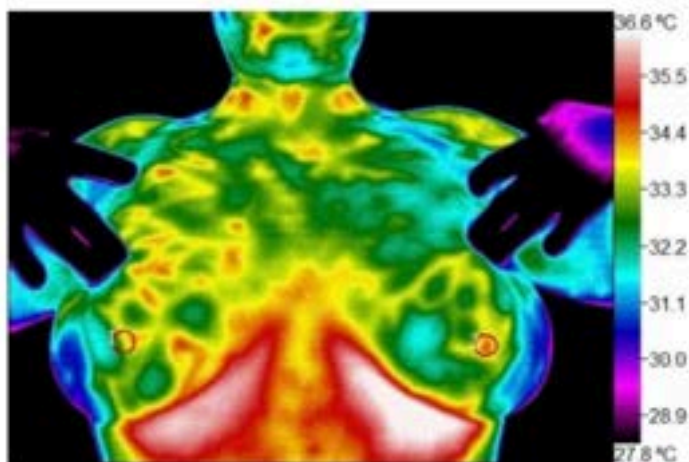
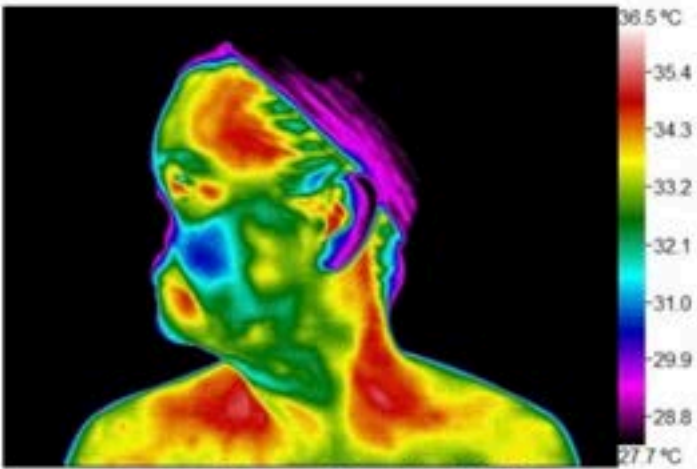
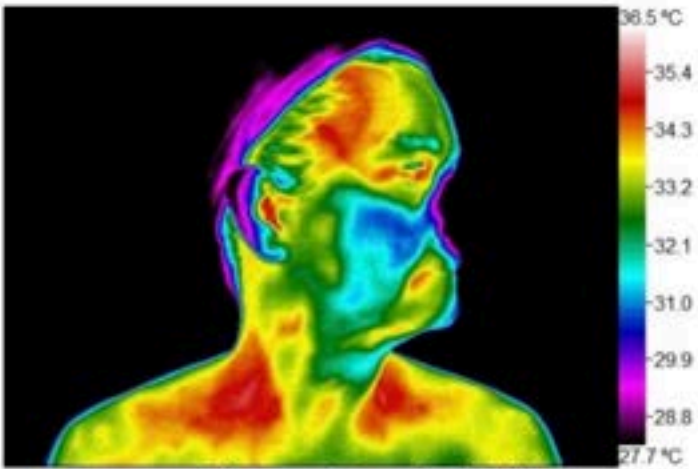


Image	Zone	Min	Delta T(Min)	Max	Delta T(Max)	Avg	Delta T(Avg)
Left	1	31.94 °C	-1.02	34.39 °C	-0.42	33.36 °C	-0.71
Left	2	32.96 °C		34.81 °C		34.07 °C	



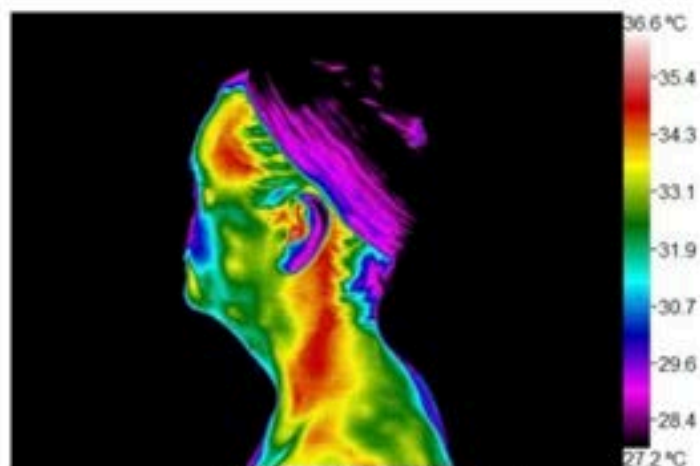
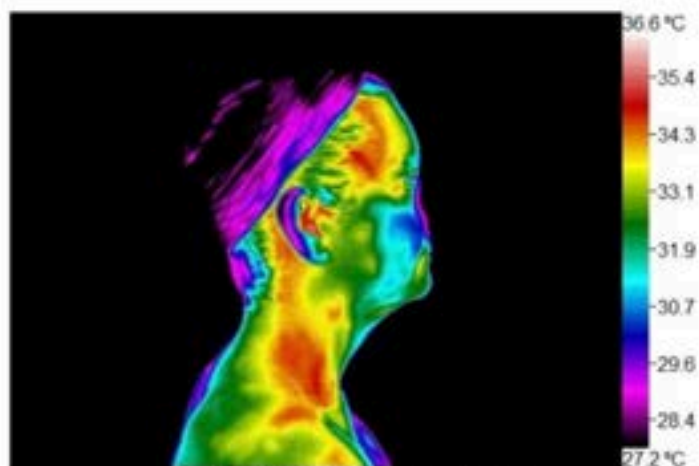
Image	Zone	Min	Delta T(Min)	Max	Delta T(Max)	Avg	Delta T(Avg)
Left	1	32.46 °C	-0.63	34.41 °C	0.04	33.35 °C	-0.44
Left	2	33.09 °C		34.37 °C		33.79 °C	

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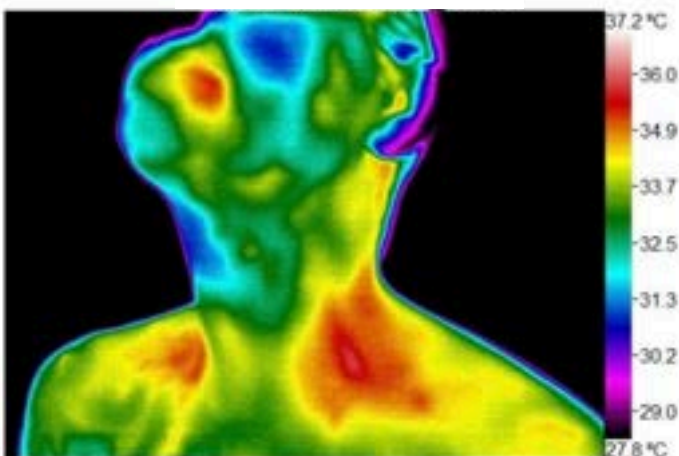
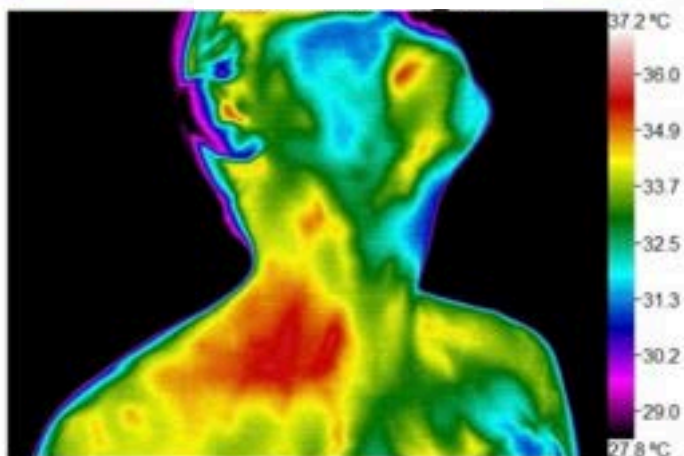
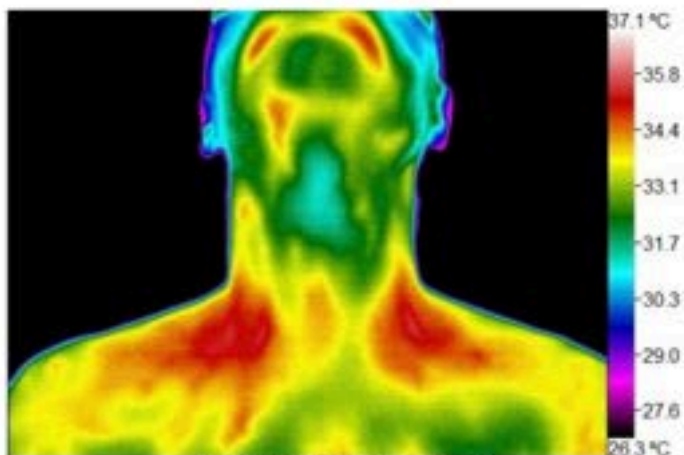


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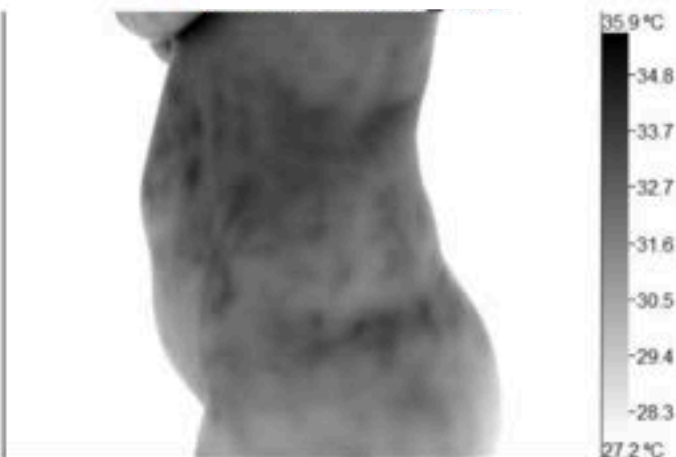
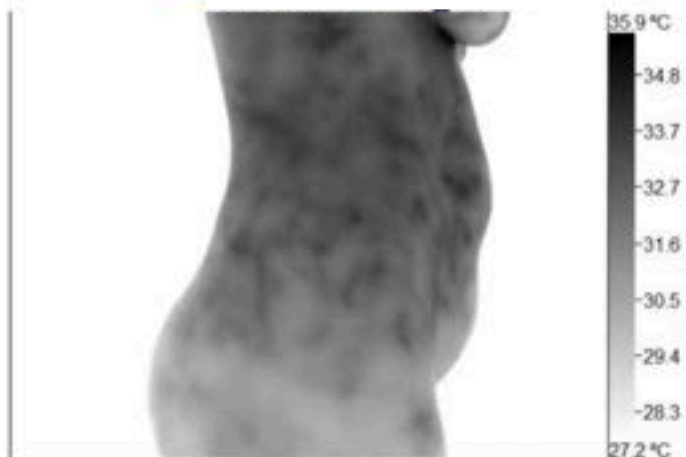
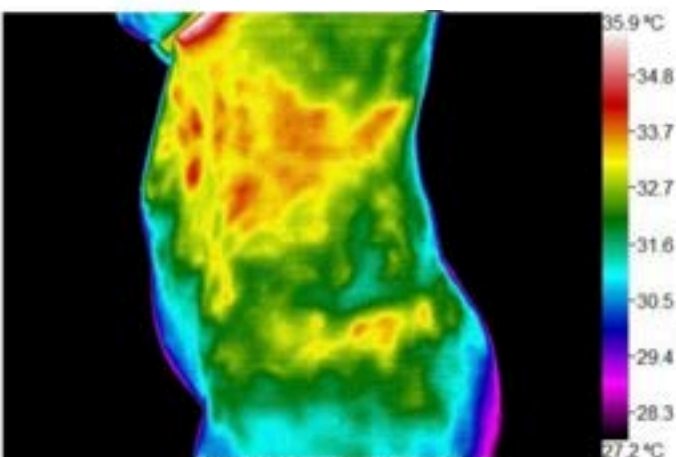
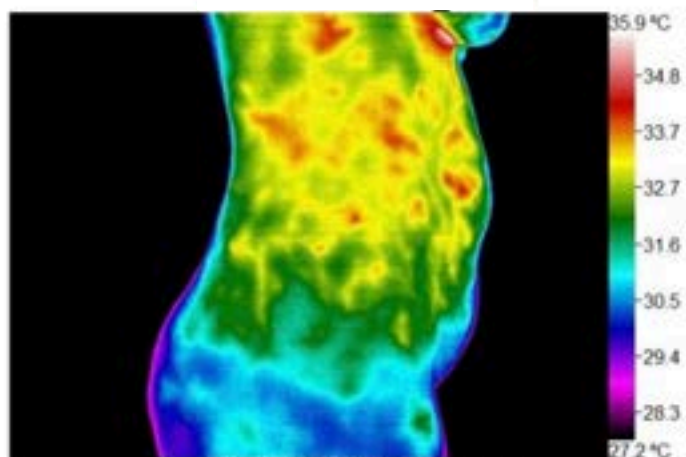
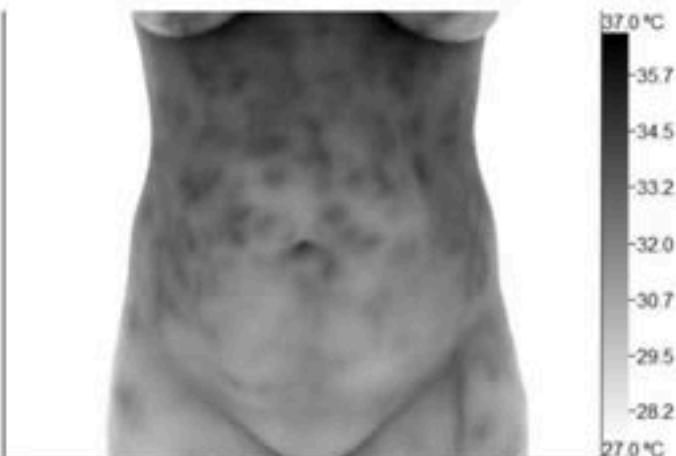
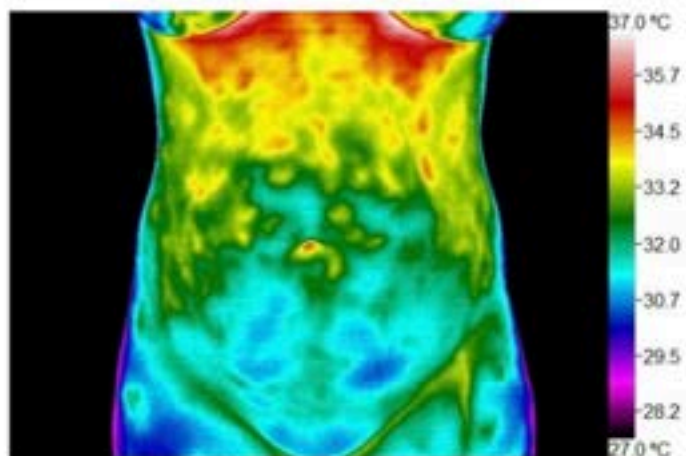




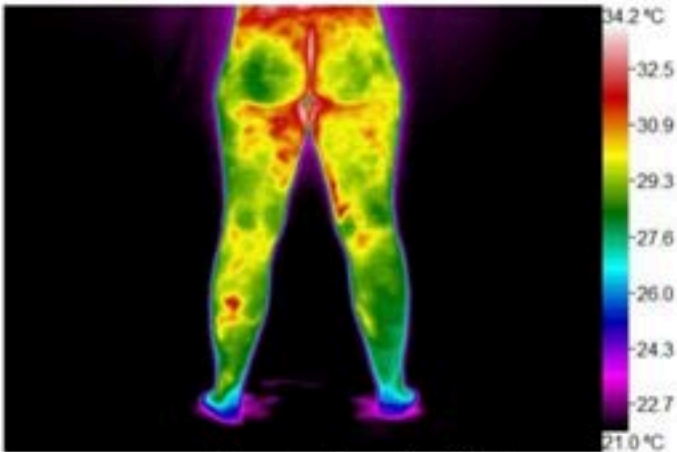
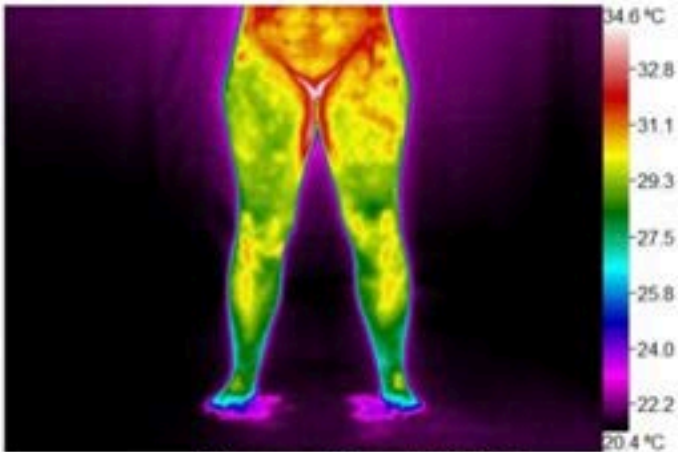
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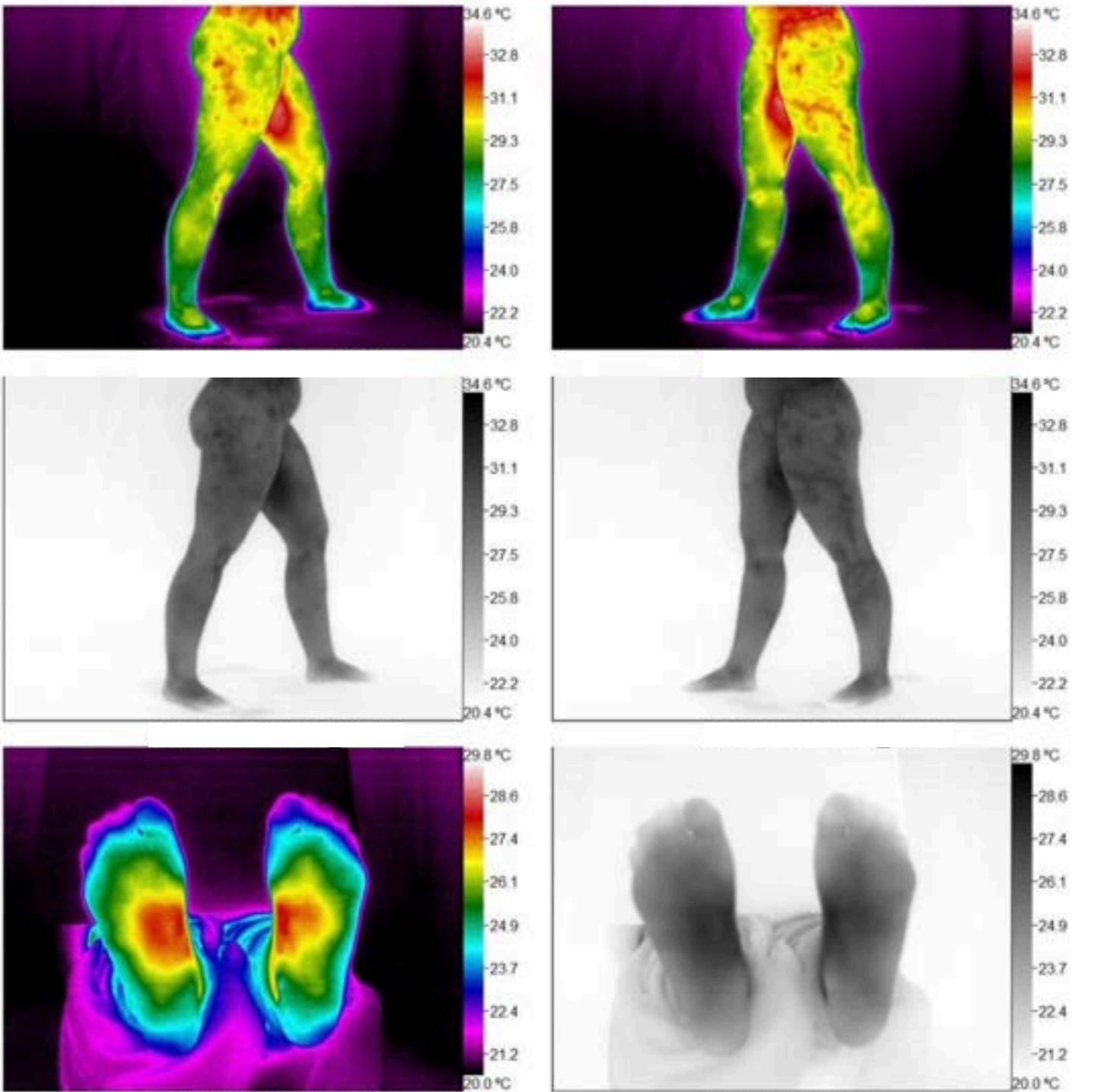
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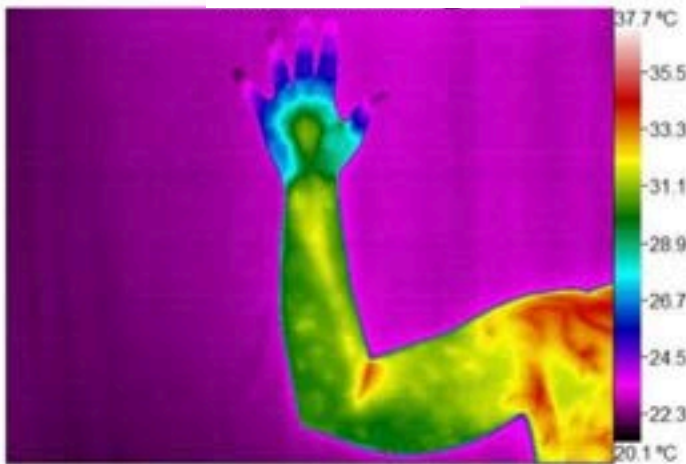


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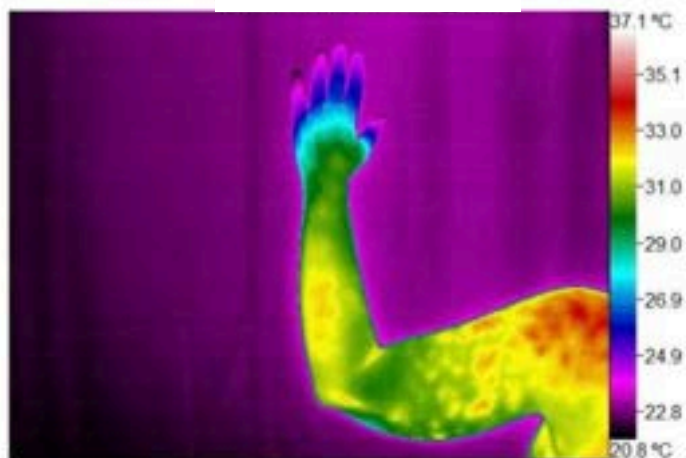




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## A Note to the Physician

This report provides a skin surface temperature map that can be used to correlate temperature findings with the patient's current health symptoms and objective clinical findings. A hot and cold scale is placed to the right of each image to assist in interpretation. We recommend reviewing these images in conjunction with other diagnostic tests and clinical findings to gain a complete understanding of the patient's condition.

Please note that thermography is an adjunctive diagnostic tool and should not be used as a replacement for other imaging methods such as mammography or ultrasound. Additionally, a negative thermogram does not exclude the need for further testing or biopsy based on the clinical condition.

## DESCRIPTION OF THE CLINICAL THERMAL IMAGING STUDY:

The patient above was examined using digital infrared thermal imaging with a high-resolution thermographic camera specifically designed for clinical applications. Standardized thermography protocols, including proper acclimation, were followed to optimize clinical correlation of thermal patterns.

Medical Thermography is a non-contact method of capturing and recording temperature variations on the skin, which can provide important information on metabolic and vascular activity, including microcirculation, below the surface via the sympathetic nervous system. Variations in temperature can indicate asymmetric, abnormal, or suspicious thermal patterns over a specific area or region of interest.

Please note that while thermography is a valuable tool, it is important to consider it in conjunction with other diagnostic methods and clinical findings for a comprehensive understanding of the patient's condition.

## Breast Thermography

Breast Thermography is defined by the Food and Drug Administration (FDA Code of Federal Regulations Sec. 884.2980). Thermography is an adjunctive test and does not replace mammography or any other anatomical imaging test. A negative thermogram, mammogram or ultrasound does not preclude biopsy based on clinical condition. The value of thermography as a screening tool is the non-invasive nature of the test and the unique ability to accurately measure skin temperature changes. Such monitoring affords detection of even subtle thermal changes that, although not independently diagnostic, may precede anatomical findings by years and prompt early investigation and prevention. As there is no single known test capable of monitoring all complex anatomical and biological influences of disease, monitoring with additional testing such as ultrasound, MRI, mammography or other testing as recommended by the patient's physician is always advised.

*Thermographic Wellness, Inc is a PACT certified interpretation service that has contracted the above interpreters for this evaluation. Interpreted and reviewed by Thermographic Wellness, Inc based on the standards of the Professional Academy of Clinical Thermology.*



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