The following advice is provided towards the safe reintroduction of breast screening. Standard precautions form the basis of all health care interactions and are covered in detail on the CEC website.


These recommendations should be read alongside any relevant Local Health District guidelines. Currently, there is a low rate of community transmission and advice may change if transmission risk changes. The definition of a ‘contact’ includes close contact for at least 15 minutes with a known or suspected COVID-19 case.

The recommendations are based on known transmission risks for COVID-19 and, as for all infection prevention and control precautions, an individual risk assessment is required.

As of 5 May 2020, the CEC currently recommends no additional personal protective equipment is required for staff or clients during screening or assessment, unless individual risk assessment indicates otherwise.

**Recommendations**

1) Provide BreastScreen pre-screening information in client communications to triage:
   a. Clients with acute respiratory illness
   b. Close contacts of known positive cases (until isolation period ends)
   c. Clients with COVID-19, who have not yet received the all clear from their GP or the relevant Public Health Unit.

2) Limit the number of people in clinics, and maintain social distancing measures.

3) Undertake minimal contact check-in processes.

4) Implement increased cleaning of frequently touched surfaces.

5) On presentation, reception staff will ask all clients the COVID-19 pre-screening questions. Clients displaying any respiratory symptoms will be triaged by a senior staff member and rescheduled.

6) Provide hand hygiene products for staff and clients.

7) Radiographers to use transmission based precautions if indicated by risk assessment.

8) Radiographers to undertake mammograms with minimal face to face contact. Radiographers should stand behind, or to the lateral side of the client while positioning the clients.

9) Clean medical imaging equipment between clients as per usual practice.