Axillary Adenopathy after COVID-19 Vaccination

Background
Axillary adenopathy after COVID-19 vaccination has been reported with both the Pfizer-BioNTech (64 cases in the vaccine group vs 6 in the placebo group) and Moderna (11.6% of patients after first dose, 16% of patients after second dose) vaccines. Lymphadenopathy occurred 2-4 days following vaccination and lasted a median of 1-2 days after the Moderna vaccine and a mean of 10 days after the Pfizer-BioNTech vaccine.

The UCSF Department of Radiology and Biomedical Imaging, Breast Imaging Section, guided by the Society of Breast Imaging recommendations, will use the following protocols for patients presenting for breast imaging with a history of COVID-19 vaccination within the previous 4 weeks.

Imaging Management
- **Screening Mammography**
  Patients with ipsilateral unilateral or asymmetric bilateral axillary adenopathy seen on screening mammography, will be recalled for diagnostic imaging to be done 8-12 weeks after second vaccine dose
- **Screening MRI**
  Patients with ipsilateral unilateral or asymmetric bilateral axillary adenopathy seen on screening MRI, will be recalled for breast ultrasound to be done 8-12 weeks after second vaccine dose
- **Diagnostic Breast Imaging Studies**
  Patients with ipsilateral unilateral or asymmetric bilateral axillary adenopathy on diagnostic imaging and no other clinical concerns, will be scheduled for follow-up imaging to be done 8-12 weeks after second vaccine dose
  - Patients with persistent or increasing axillary adenopathy at follow-up will be scheduled for subsequent biopsy
  - Exceptions to this protocol will be made based on clinical or patient concerns

Clinical considerations
- If clinically appropriate, consider advising patients to schedule routine screening mammography prior to COVID-19 vaccination or 4-6 weeks after second vaccine dose

For questions, please call Breast Imaging Clinical Services at 415-502-4595

