

1. Which of the following BI-RADS breast density categories has the lowest sensitivity for detecting cancer on mammograms?

- A) Category A
- B) Category B
- C) Category C
- D) Category D

2. According to the BI-RADS breast density categories, in which of the following categories is mammography the most sensitive for detecting cancer?

- A) Category A
- B) Category B
- C) Category C
- D) Category D

3. Which of the following statements about BI-RADS breast density categories is true?

- A) Mammography is equally sensitive for detecting cancer in all breast density categories.
- B) Mammography is more sensitive for detecting cancer in women with dense breasts than in women with fatty breasts.
- C) Mammography is less sensitive for detecting cancer in women with dense breasts than in women with fatty breasts.
- D) There is no relationship between breast density and the sensitivity of mammography.

4. According to the BI-RADS assessment categories, which of the following categories has the highest likelihood of malignancy?

- A) Category 1
- B) Category 2
- C) Category 3
- D) Category 4

5. Which of the following BI-RADS assessment categories has a likelihood of malignancy of > 2% but <95%?

- A) Category 1
- B) Category 2
- C) Category 3
- D) Category 4

6. Which of the following management recommendations is associated with BI-RADS assessment category 3?

- A) Routine mammography screening
- B) Short-interval follow-up or continued surveillance mammography
- C) Tissue diagnosis
- D) Surgical excision

7. When is it appropriate to use BI-RADS assessment category 6?

- A) When a mammographic examination is incomplete
- B) When a finding is probably benign
- C) When a malignancy has been biopsy-proven
- D) When a finding is highly suggestive of malignancy

8. What is the management recommendation for a BI-RADS category 4 assessment?

- A) Routine mammography screening
- B) Short-interval follow-up or continued surveillance mammography
- C) Tissue diagnosis
- D) Surgical excision

9. Which of the following findings is NOT typically assessed as BI-RADS category 3?

- A) Non-calcified circumscribed solid mass
- B) Palpable lesion
- C) Focal asymmetry
- D) Solitary group of punctate calcifications

10. What is the likelihood of malignancy for a finding assessed as BI-RADS category 3?

- A) Essentially 0%
- B) > 0% but $\leq 2\%$
- C) >2% but <95%
- D) $\geq 95\%$

11. Which of the following is NOT a characteristically benign finding that may be assessed as BI-RADS category 2?

- A) Involuting calcified fibroadenoma
- B) Skin calcifications
- C) Non-calcified circumscribed solid mass
- D) Oil cyst

12. Which of the following findings may be described in a BI-RADS category 2 assessment?

- A) Non-calcified circumscribed solid mass
- B) Skin calcifications
- C) Architectural distortion
- D) Solitary group of punctate calcifications

13. Which of the following findings is NOT validated as being probably benign (BI-RADS category 3)?

- A) Non-calcified circumscribed solid mass
- B) Focal asymmetry
- C) Solitary group of punctate calcifications
- D) Palpable lesion

14. A screening mammogram shows unilateral axillary adenopathy with no suspicious findings in the breasts. The patient has no known infectious or inflammatory cause for the adenopathy. What should the BI-RADS® final assessment be?

- A) Negative (BI-RADS® category 1)
- B) Benign (BI-RADS® category 2)
- C) Probably benign (BI-RADS® category 3)
- D) Suspicious (BI-RADS® category 4)

15. Which of the following US descriptors for tissue composition corresponds most closely to the BI-RADS® breast density category "heterogeneously dense"?

- A) Homogeneous background echotexture-fat
- B) Homogeneous background echotexture-fibroglandular
- C) Heterogeneous background echotexture
- D) Not given in the provided text

16. Which of the following is NOT a finding that may be described in a BI-RADS® category 2 US assessment?

- A) Simple cyst
- B) Intramammary lymph node
- C) Non-palpable solid mass
- D) Postsurgical fluid collection

17. What is the recommended follow-up interval for a stable probably benign (BI-RADS® category 3) finding on US after the initial 6-month follow-up examination?

- A) 3 months
- B) 6 months
- C) 1 year
- D) 2 years

18. A US examination reveals a large axillary mass in a patient with known metastatic melanoma. The mass was previously biopsied and confirmed to be an axillary lymph node with metastatic melanoma. Except for the axillary mass, the US examination shows no abnormalities in the breast. What is the appropriate BI-RADS® assessment for this examination?

- A) BIRADS 1
- B) BIRADS 2
- C) BIRADS 3
- D) BIRADS 4

19. Which of the following is NOT a category of background parenchymal enhancement (BPE) on breast MRI?

- A) Minima
- B) Mild
- C) Moderate
- D) Severe

20. Which of the following is NOT a descriptor for the margin of a mass on breast MRI?

- A) Circumscribed
- B) Not circumscribed
- C) Irregular
- D) Rounded

21. Which of the following is NOT a modifier describing non-mass enhancement distribution?

- A) Focal
- B) Linear
- C) Granular
- D) Segmental

22. Which of the following is NOT an internal enhancement pattern for non-mass enhancement?

- A) Homogeneous
- B) Heterogeneous
- C) Focal
- D) Clumped

23. Which of the following is NOT an intracapsular silicone rupture finding on MRI?

- A) Linguine sign
- B) Subcapsular line
- C) Keyhole sign
- D) Peri-implant fluid

24. Which BI-RADS® assessment category is not recommended for screening for mammography?

- A) BIRADS 1
- B) BIRADS 2
- C) BIRADS 3
- D) BIRADS 4

25. According to BI-RADS classification, which of the following is NOT a type of asymmetry?

- A) Asymmetry
- B) Global asymmetry
- C) Focal asymmetry
- D) Diffuse asymmetry

26. Which of the following calcification morphologies should be assigned to BI-RADS® category 4C?

- A) Amorphous
- B) Coarse heterogeneous
- C) Fine pleomorphic
- D) Fine linear or fine-linear branching

27. Which of the following statements is true regarding the margin of a mass in mammography?

- A) The margin must be completely well-defined for the mass to be classified as circumscribed.
- B) At least 75% of the margin must be well-defined for the mass to qualify as circumscribed.
- C) If any portion of the margin is indistinct, the mass should be classified as such.
- D) Spiculated margins are less suspicious than microlobulated margins.

28. What is an obscured margin in mammography?

- A) A margin that is completely hidden by other tissue
- B) A margin that is mostly well-defined, but part of it is hidden
- C) A margin that is indistinct and irregular
- D) A margin that is spiculated and jagged

29. Which of the following statements about density in mammography is true?

- A) Breast cancers are always lower in density than normal breast tissue.
- B) Breast density is the most reliable mammographic feature of masses.
- C) Breast cancers can be fat-containing.
- D) The likelihood of malignancy for a high-density mass is significantly greater than that for equal- and low-density masses.

30. Which of the following is a characteristic of a fat-containing mass in mammography?

- A) It is always malignant.
- B) It is almost always benign.
- C) It is a mixed-density mass.
- D) It is associated with a high risk of breast cancer.

31. Which of the following types of calcifications is typically benign in mammography?

- A) Fine and linear
- B) Pleomorphic
- C) Coarse or "popcorn-like"
- D) Punctate

32. Which of the following statements about coarse or “pop-corn-like” calcifications in mammography is true?

- A) They are typically associated with breast cancer.
- B) They are small and difficult to see on mammograms.
- C) They are a sign of a benign breast lesion.
- D) They are more common in younger women

33. Which of the following is a characteristic of large rod-like calcifications in mammography?

- A) They are typically associated with breast cancer.
- B) They are small and difficult to see on mammograms.
- C) They are more common in younger women.
- D) They follow a ductal distribution.

34. Which of the following is a characteristic of benign round calcifications in mammography?

- A) They are typically clustered together.
- B) They are always larger than 1 mm in size.
- C) They are more common in younger women.
- D) They are often formed in the acini of lobules.

35. Which of the following statements about dystrophic calcifications in mammography is true?

- A) They are typically associated with breast cancer.
- B) They are always smaller than 1 mm in size.
- C) They are more common in younger women.
- D) They are caused by radiation therapy or trauma.

36. Which of the following is a characteristic of milk of calcium calcifications in mammography?

- A) They are typically associated with breast cancer.
- B) They always appear as round, smudgy deposits on all mammographic projections.
- C) They are more common in younger women.
- D) They change shape on different mammographic projections.

37. Which of the following distributions of amorphous calcifications is suspicious and generally warrants biopsy?

- A) Bilateral, diffuse
- B) Grouped, linear, or segmental
- C) Punctate
- D) Coarse

38. What is the BI-RADS[®] assessment category for a single group of coarse heterogeneous calcifications, which has a positive predictive value of slightly less than 15%?

- A) 4A
- B) 4B
- C) 4C
- D) 5

39. What is the BI-RADS[®] assessment category for fine pleomorphic calcifications, which have a positive predictive value (PPV) of 29%?

- A) 4A
- B) 4B
- C) 4C
- D) 5

40. What is the BI-RADS[®] assessment category for fine linear and fine-linear branching calcifications, which have the highest PPV (70%) among suspicious calcifications?

- A) 4A
- B) 4B
- C) 4C
- D) 5

41. Which distribution of calcifications is of concern because it suggests deposits in a duct or ducts and their branches, raising the possibility of extensive or multifocal breast cancer?

- A) Clustered
- B) Grouped
- C) Linear
- D) Segmental

42. What is a possible cause of asymmetry that is visible on only one mammographic projection?

- A) Summation artifacts
- B) Real lesions
- C) Cancer
- D) Calcification

43. Where are intramammary lymph nodes frequently located?

- A) Medial and lower portions of the breast
- B) Lateral and usually upper portions of the breast closer to the axilla
- C) Central portion of the breast
- D) Posterior portion of the breast

44. Which mammographic finding is a rare finding and has been reported to be associated with non-calcified DCIS?

- A) Intramammary lymph node
- B) Solitary dilated duct
- C) Asymmetric breast tissue
- D) Architectural distortion

45. Which of the following is a sign of malignancy?

- A) Bilateral nipple inversion
- B) New nipple retraction
- C) Stable nipple inversion for a long period of time
- D) Nipple eversion

46. Which of the following is NOT a concern for skin thickening?

- A) Focal or diffuse skin thickening greater than 2 mm in thickness
- B) Skin thickening that represents a change from previous mammograms
- C) Unilateral skin thickening after radiation therapy
- D) Diffuse skin thickening with no other suspicious findings

47. Why did the fifth edition of BI-RADS® remove ranges of percentage dense tissue for the four density categories?

- A) To emphasize the text descriptions of breast density
- B) To indicate that percentage breast density is not associated with changes in mammographic sensitivity
- C) To indicate that percentage breast density is more important than text descriptions of breast density for breast cancer risk assessment
- D) To simplify the BI-RADS® reporting system

48. What is the key difference between an asymmetry and a mass on a mammogram?

- A) Asymmetry has concave-outward borders, while a mass has convex-outward borders.
- B) Asymmetry is unilateral, while a mass can be bilateral.
- C) Asymmetry is interspersed with fat, while a mass is not.
- D) Asymmetry is less conspicuous than a mass.

49. Why was the shape descriptor “lobular” eliminated in the 2013 edition of BI-RADS®?

- A) Because it was redundant with the margin descriptor “microlobulated”
- B) Because it was always associated with benign masses
- C) Because it was difficult to distinguish from other shape descriptors
- D) Because it was not a reliable indicator of malignancy

50. Which of the following is a key difference between “round” and “punctate” calcifications in the 2013 edition of BI-RADS®?

- A) Round calcifications are typically benign, while punctate calcifications may be associated with malignancy
- B) Punctate calcifications are defined as particles <0.5 mm, while round calcifications are defined as particles ≥0.5 mm
- C) Round calcifications are typically isolated, while punctate calcifications are typically grouped
- D) Punctate calcifications are more common in younger women, while round calcifications are more common in older women

51. Which of the following statements about coarse heterogeneous calcifications is true?

- A) They are always associated with malignancy.
- B) They are typically benign when present as multiple bilateral groupings.
- C) They are larger than dystrophic calcifications.
- D) They are more likely to be malignant when they occur together with fine pleomorphic calcifications.

52. What percentage of cases of developing asymmetry are found to be malignant?

- A) 5%
- B) 15%
- C) 25%
- D) 35%

53. What is the range of likelihood of malignancy for findings placed in BI-RADS® category 4A?

- A) >2% TO ≤10%
- B) >10% TO ≤20%
- C) >20% TO ≤30%
- D) >30% TO ≤50%

54. Which of the following findings is an example of a category 4A finding in BI-RADS®?

- A) A circumscribed solid mass with smooth margins
- B) A partially (<75%) circumscribed solid mass with US features suggestive of a fibroadenoma
- C) A mass with spiculated margins and heterogeneous internal echogenicity
- D) A cluster of irregular microcalcifications

55. Which of the following findings is an example of a category 4C finding in BI-RADS®?

- A) A circumscribed solid mass with smooth margins
- B) A partially circumscribed solid mass with US features suggestive of a fibroadenoma
- C) A new indistinct, irregular solid mass
- D) A cluster of punctate microcalcifications

56. When is BI-RADS® category 6 used?

- A) When a tissue diagnosis of malignancy has been made but prior to complete surgical excision
- B) When a biopsy is recommended for a suspicious lesion
- C) When a benign lesion is found on imaging
- D) When a patient has a history of breast cancer

57. What is the primary use of BI-RADS® category 0?

- A) To indicate a finding that is highly suggestive of malignancy
- B) To indicate the recommendation for additional imaging evaluation
- C) To indicate the presence of a benign lesion
- D) To indicate the need for a biopsy

58. Which of the following is a common mammographic finding associated with gynecomastia?

- A) A circumscribed solid mass with smooth margins
- B) A cluster of round calcifications
- C) A “flame-shaped” area of increased density extending postero-laterally from the nipple
- D) A spiculated mass with heterogeneous internal echogenicity

59. Which of the following is recommended by the ACR Practice Guideline for the Performance of a Breast Ultrasound Examination (2011) for optimal US image quality?

- (A) Use of a low-frequency linear array transducer
- B) Use of a broad bandwidth linear array transducer with a center frequency of at least 10 MHz
- C) Use of a handheld, high-frequency breast US system
- D) Use of a system with a low-resolution imaging capability

60. What is an important consideration when setting the field of view (FOV) on a breast ultrasound examination?

- A) The FOV should be deep enough to include the pleura and lung.
- B) The FOV should be set to a shallower depth when a lesion is found.
- C) The FOV should be set deeply enough to include breast tissue and the pectoralis muscle posterior to it.
- D) The FOV should be set to a very narrow depth to improve image resolution.

61. Which of the following is the correct method for taking measurements of a breast lesion on ultrasound?

- A) Take two measurements from the same view, and take the third measurement from a view that is perpendicular to the first two.
- B) Take three measurements from the same view, with each measurement representing a different plane.
- C) Take two measurements from the same view, and take the third measurement from a view that is parallel to the first two.
- D) Take three measurements from different views, with each measurement representing the longest axis of the lesion.

62. Which of the following is NOT a type of margin that can be used to characterize a mass on ultrasound?

- A) Circumscribed
- B) Indistinct
- C) Spiculated
- D) Irregular

63. What is the key feature of an indistinct margin on ultrasound?

- A) The margin is clearly demarcated from the surrounding tissue.
- B) The margin is poorly defined and blends into the surrounding tissue.
- C) The margin is spiculated and irregular.
- D) The margin is angular and has sharp corners.

64. What is the normal skin thickness in the periareolar area and inframammary folds on ultrasound?

- A) Up to 2 mm
- B) Up to 3 mm
- C) Up to 4 mm
- D) Up to 5 mm

65. Which of the following is a characteristic of edema on ultrasound?

- A) Increased echogenicity of the surrounding tissue
- B) Decreased echogenicity of the surrounding tissue
- C) A mass-like appearance
- D) Calcifications

66. Which of the following is a standardized descriptor for lesion stiffness on ultrasound elastography?

- A) Soft
- B) Intermediate
- C) Hard
- D) All of the above

67. What is the key difference between a “complicated cyst” and a “complex cystic and solid” mass on ultrasound?

- A) The presence of internal echoes
- B) The presence of septations
- C) The presence of a discrete solid component
- D) The size of the mass

68. Which of the following is a common benign mass that can be found in or on the skin on ultrasound?

- A) Sebaceous cyst
- B) Metastasis
- C) Cancer
- D) Abscess

69. What is the characteristic ultrasound appearance of extravasated silicone or silicone gel bleed?

- A) A well-defined mass with posterior acoustic shadowing
- B) A cystic mass with internal echoes
- C) An echogenic mass with a “snowstorm” appearance
- D) A hypoechoic mass with indistinct margins

70. Which of the following is NOT a US descriptor for tissue composition?

- A) Homogeneous background echotexture-fat
- B) Homogeneous background echotexture-fibroglandular
- C) Heterogeneous background echotexture
- D) Coarse background echotexture

71. According to the BI-RADS fifth edition, what is the correct term for a mass that contains solid and cystic components on ultrasound?

- A) Complex mass
- B) Complicated mass
- C) Complex cystic and solid mass
- D) Cystic mass

72. Which type of calcification is typically associated with an involuting fibroadenoma?

- A) Fine linear and branching
- B) Round
- C) Coarse or “Popcorn-Like”
- D) Amorphous

73. What is the recommended time point for assessing breast parenchymal enhancement (BPE) on breast MRI?

- A) 2 minutes
- B) 5 minutes
- C) 90 seconds
- D) 15 minutes

74. Which of the following is NOT a characteristic of breast parenchymal enhancement (BPE) on breast MRI?

- A) Occurs regardless of menstrual cycle or menopausal status
- B) Directly related to the amount of fibroglandular tissue
- C) Evaluated with respect to the amount of fibroglandular tissue
- D) May demonstrate progressive enhancement over time

75. Which of the following is a consideration when scheduling a breast MRI for elective examinations?

- A) Scheduling the patient early in her menstrual cycle to minimize background enhancement
- B) Scheduling the patient late in her menstrual cycle to maximize breast enhancement
- C) Avoiding the use of contrast agents in pre-menopausal women
- D) Performing the MRI regardless of the menstrual cycle or menstrual status

76. Which of the following features of a focus on breast MRI is suggestive of malignancy?

- A) Not unique compared to the BPE
- B) Bright on bright-fluid imaging
- C) Washout kinetics
- D) Persistent kinetics

77. Which of the following is a suggestive feature of a fibroadenoma on breast MRI?

- A) Enhancing internal septations
- B) Non-enhancing dark internal septations
- C) Washout kinetics
- D) Irregular shape

78. Which of the following is a cause of a false-positive interpretation of a rim-enhancing lesion on contrast-enhanced ultrasound?

- A) Galactocele
- B) Fat necrosis
- C) Fibroadenoma
- D) Malignant tumor

79. Which of the following internal enhancement patterns of non-mass enhancement (NME) is suggestive of malignancy?

- A) Homogeneous
- B) Heterogeneous
- C) Clumped
- D) Clustered ring

80. What is the primary factor used to determine the second phase of a contrast-enhanced lesion on MRI?

- A) Initial-phase enhancement pattern
- B) Delayed-phase enhancement pattern
- C) Lesion morphology
- D) Lesion size

81. Which of the following delayed-phase enhancement patterns is most commonly associated with malignant lesions?

- A) Persistent
- B) Plateau
- C) Washout
- D) Mixed

82. Which of the following is a potential cause of asymmetric breast parenchymal enhancement (BPE) on contrast-enhanced MRI?

- A) Radiation therapy
- B) Menstrual cycle
- C) Age
- D) Menopausal status

83. What is the criterion for classifying the initial phase of enhancement on contrast-enhanced MRI?

- A) Percent increase in signal intensity compared to precontrast image
- B) Time to peak enhancement
- C) Shape of the enhancement curve
- D) Type of contrast agent used

84. Which of the following is NOT a characteristic of intracapsular silicone rupture?

- A) Linguine sign
- B) Intraparenchymal oil cyst
- C) Subcapsular line
- D) Keyhole sign

85. How can you differentiate between a focal bulge in an intact breast implant and extruded silicone from an extracapsular rupture on MRI?

- A) The focal bulge will have signs of intracapsular rupture on MRI, while the extracapsular rupture will not.
- B) The extracapsular rupture will have signs of intracapsular rupture inside the implant on MRI, while the focal bulge will not.
- C) The focal bulge will be located on the outer edge of the implant, while the extracapsular rupture will be located in the center of the implant.
- D) The extracapsular rupture will be larger than the focal bulge.

86. What is the appearance of a subcapsular line on MRI in an intracapsular silicone implant rupture?

- A) A dark line paralleling the implant edge
- B) A white line paralleling the implant edge
- C) A dark line perpendicular to the implant edge
- D) A white line perpendicular to the implant edge

87. What are the four categories used to describe the amount of background enhancement on contrast-enhanced MRI?

- A) None, minimal, moderate, marked
- B) Minimal, mild, moderate, marked
- C) Mild, moderate, marked, severe
- D) None, mild, moderate, severe

88. Which of the following statements about breast parenchymal enhancement (BPE) on contrast-enhanced MRI is true?

- A) BPE is only seen in patients with dense breasts.
- B) BPE can occur regardless of the menstrual cycle or menopausal status of the patient.
- C) BPE is always related to the amount of fibroglandular parenchyma present.
- D) Younger patients with dense breasts are less likely to demonstrate BPE than older patients with dense breasts.

89. What is the key distinguishing feature of a focus on contrast-enhanced breast MRI?

- A) It is a small, punctate enhancing dot that is non-specific
- B) It is a small, punctate enhancing dot that shows washout kinetics
- C) It is a non-enhancing dot that corresponds to a precontrast finding
- D) It is a small, punctate enhancing dot that is separated by intervening normal breast parenchyma

90. What type of enhancement pattern on MRI most closely resembles the pleomorphic pattern on mammography?

- A) Punctate
- B) Linear
- C) Clumped
- D) Regional

91. What is the appropriate BI-RADS® assessment for isolated unilateral axillary adenopathy in the absence of a known infectious or inflammatory cause?

- A) Benign (category 2)
- B) Probably benign (category 3)
- C) Suspicious (category 4)
- D) Malignant (category 5)

92. What is the standard term for a mammographic view that is angled toward the axilla?

- A) Craniocaudal view
- B) Mediolateral oblique view
- C) Lateral view
- D) Axillary view

93. What is the standard abbreviation for a tangential mammographic view?

- A) TAN
- B) CV
- C) XCCM
- D) XCCL

94. What is not the standard abbreviation for mammography views?

- A) MLO75
- B) SIO
- C) FL
- D) XCCL

95. What is not the standard abbreviation for a step-oblique view?

- A) MLO15
- B) MLO45
- C) MLO75
- D) MLO90

96. Which of the following is NOT a type of fat-containing lesion that can be seen on a mammogram?

- A) Oil cyst
- B) Lipoma
- C) Galactocele
- D) Fibroadenoma

97. What is the standard abbreviation for a superolateral-to-inferomedial oblique view?

- A) IOS
- B) SOI
- C) SIO
- D) ISO

98. What is the recommended term for ultrasound regarding special cases?

- A) Clustered microcyst
- B) Fibrocystic changes
- C) Clustered fibrocyst
- D) Microcyst

99. What is the recommended term for implants regarding location?

- A) Postglandular
- B) Postpectoral
- C) Retroglandular
- D) Glandular

100. Which year was the fifth edition of the BI-RADS® Atlas released?

- A) 2013
- B) 2010
- C) 2008
- D) 2007

Supplementary Material 2. Accuracy rates of multimodal LLMs on BI-RADS categories									
			BIRADS-1	BIRADS-2	BIRADS-3	BIRADS-4	BIRADS-5	<i>P</i>	
Claude 3.5 Sonnet	False	n	13 (65.0%)	5 (25.0%)	12 (60.0%)	8 (40.0%)	3 (15.0%)	0.004	χ^2
	True	n	7 (35.0%)	15 (75.0%)	8 (40.0%)	12 (60.0%)	17 (85.0%)		
ChatGPT 4o	False	n	13 (65.0%)	7 (35.0%)	17 (85.0%)	14 (70.0%)	10 (50.0%)	0.015	χ^2
	True	n	7 (35.0%)	13 (65.0%)	3 (15.0%)	6 (30.0%)	10 (50.0%)		
ChatGPT 4V	False	n	20 (100.0%)	14 (70%)	19 (95.0%)	16 (80.0%)	11 (55.0%)	0.002	χ^2
	True	n	0 (0.0%)	6 (30%)	1 (5.0%)	4 (20.0%)	9 (45.0%)		
Claude Opus 3	False	n	16 (80.0%)	17 (85%)	16 (80.0%)	16 (80.0%)	16 (80.0%)	0.992	χ^2
	True	n	4 (20.0%)	3 (15%)	4 (20.0%)	4 (20.0%)	4 (20.0%)		
Gemini 1.5 Pro	False	n	10 (50.0%)	13 (65.0%)	14 (70.0%)	12 (60.0%)	20 (100%)	0.010	χ^2
	True	n	10 (50.0%)	7 (35.0%)	6 (30.0%)	8 (40.0%)	0 (0.0%)		

χ^2 , chi-square; LLMs, large language models; BI-RADS, Breast Imaging Reporting and Data System.