



## Breast cancer screening tests

**Mammogram** — A mammogram is an X-ray of the breast. It is the best screening tool used today to find breast cancer early. A mammogram can find cancer at an early stage when it is small and easier to treat. Mammogram images can be stored on film (standard) or on a computer (digital).

**Clinical breast exam** — A breast exam by a health care provider should be part of your regular medical checkup. If it is not, ask for it. A clinical breast exam includes a visual examination and carefully feeling the entire breast — from the collarbone to the bra line, and from the armpit to the breastbone. If you are 40 or older, schedule your mammogram close to the time of your clinical breast exam.

## Know what is normal for you

The signs of breast cancer are not the same for all women. It is important to know how your breasts normally look and feel. Many women have a pattern of lumpiness in their breasts, which is normal. But if you feel or see any change in your breasts or underarms, ask your health care provider to examine the area.

## Early detection

If breast cancer is found early, there are more treatment options and a better chance for survival. A mammogram can find breast cancer before it can be felt. However, it is not perfect. But, when mammography is combined with clinical breast exam your chances for finding cancer are even greater.

Remember, even if you feel healthy now, just being a woman and getting older puts you at risk for breast cancer. Getting checked regularly can put your mind at ease. Finding cancer early may save your life.

Find your age on the chart below to see which screening tests you should use and how often. Women under age 40 with either a family history of breast cancer or other concerns about their personal risk should talk with their health care provider about when to start getting mammograms or other tests, such as breast MRI, and how often to have them.

Age 20-39	Frequency	Age 40 and older	Frequency
clinical breast exam	at least every three years	clinical breast exam	once a year
Women at higher risk may need to get screened earlier and more frequently as recommended.		mammogram	once a year

## Questions to ask

Talk with your health care provider about your risk of breast cancer. Ask which screening tests are right for you.

Here are some questions you might want to ask:

1. What is my risk for getting breast cancer?
2. Do I need a mammogram? If not, why not?
3. Where can I go to get a mammogram?
4. What if I cannot afford a mammogram?
5. How often should I get a mammogram?
6. How often do I need a clinical breast exam?
7. Should I consider other tests related to my risk?
8. Does my mammogram show that I have dense breasts?

## Resources

You can receive information about mammograms and clinical breast exams by contacting the organizations listed on this page.

Susan G. Komen for the Cure®  
1-877 GO KOMEN (1-877-465-6636)  
[www.komen.org](http://www.komen.org)

American Cancer Society  
1-800-ACS-2345  
[www.cancer.org](http://www.cancer.org)

National Cancer Institute's Cancer  
Information Service  
1-800-4-CANCER  
[www.cancer.gov](http://www.cancer.gov)

## Signs that you should not ignore

Be aware of any change in your breast or underarm area. If you notice any of the following signs, see your health care provider.

- lumps, hard knot or thickening inside the breast or underarm area
- swelling, warmth, redness or darkening of the breast
- change in the size or shape of the breast
- dimpling or puckering of the skin
- itchy, scaly sore or rash on the nipple
- pulling in of your nipple or other parts of the breast
- nipple discharge that starts suddenly
- new pain in one spot that does not go away

### Related fact sheets in this series:

- Benign Breast Conditions
- Breast Cancer Facts
- Breast Density
- Mammography
- When You Discover a Lump or Change

The above list of resources is only a suggested resource and is not a complete listing of breast health and breast cancer materials or information. The information contained herein is not meant to be used for self-diagnosis or to replace the services of a medical professional. Komen for the Cure does not endorse, recommend or make any warranties or representations regarding the accuracy, completeness, timeliness, quality or non-infringement of any of the materials, products or information provided by the organizations referenced herein.

Developed in collaboration with the Health Communication Research Laboratory at Saint Louis University. ©2011 Susan G. Komen for the Cure. Item No. KOM EED009400 9/11