**Know what is normal for you**

The signs of breast cancer are not the same for all women. It’s important to know how your breasts normally look and feel.

Many women find their breasts feel lumpy. Breast tissue often has bumpy texture. Lumps that feel harder or different than the rest of the breast tissue (or the tissue of the other breast) or that feel like a change are a concern. If you feel or see any change in your breasts or underarm, see a doctor.

**Signs you should not ignore**

- Lump, 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 the 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 Density
- When You Discover a Lump or Change

**Resources**

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

American Cancer Society
800-227-2345
[www.cancer.org](http://www.cancer.org)

National Cancer Institute’s
Cancer Information Service
1-800-4-CANCER (1-800-422-6237)
[www.cancer.gov](http://www.cancer.gov)

**For more information,**

visit komen.org or call the Susan G. Komen breast care helpline at 1-877 GO KOMEN (1-877-465-6636) Monday through Friday, 9 AM to 10 PM ET.
Screening tests are used to find a disease (such as breast cancer) in a person without symptoms. Follow-up tests may be needed if the screening tests show an abnormal finding.

**Breast cancer screening tests**

**Mammogram** — A mammogram uses X-rays to create an image of the breast. Mammography can find breast cancers early when they are small, before they can be felt. Overall, it’s the best screening test used today to find breast cancer for most women.

**Clinical breast exam (CBE)** — A CBE is done by a doctor or nurse who checks your breasts and underarm areas for any lumps or changes. It’s often part of your regular medical check-up.

**Breast MRI** — A breast MRI uses magnetic fields to create an image of the breast. Breast MRI may be used with mammography for screening some women at a higher risk of breast cancer (such as those with a BRCA1/2 gene mutation). It’s not recommended for screening women at average risk.

As new screening tools are developed and we learn more about risk, we may learn who will benefit most from any given screening test. Women should discuss their risk of breast cancer and their screening options with a doctor.

**Follow-up Tests**

**Diagnostic mammogram** — A follow-up mammogram is like a screening mammogram with more views/images. Although called a “diagnostic” mammogram, it doesn’t diagnose breast cancer. A biopsy is needed to diagnose breast cancer.

**Breast ultrasound** — Breast ultrasound uses sound waves to make images of the breast. It can tell the difference between a liquid-filled cyst and a solid mass (which may or may not be cancer).

**Breast MRI** — A follow-up breast MRI can give a detailed image of the abnormal finding.

If a follow-up test suggests a possible breast cancer, a biopsy is done to remove cells or tissue to check for cancer.

**Questions to ask your doctor**

1. What are the risks and benefits of screening?
2. Would I benefit from getting a mammogram or CBE?
3. When do you suggest I start getting mammograms and/or CBEs?
4. How often do you suggest I get screened?
5. Where can I get a mammogram?
6. What if I cannot afford a mammogram?
7. Am I at higher risk of breast cancer? If so, do I need special screening tests or do I need to be screened more often?

If you are asked to come back for a follow-up test, here are some questions to ask:

1. Why do you suggest I have this test?
2. How accurate is the test?
3. When and how will I get the results?
4. If a problem is found, what will we do next?