



The American College of  
Obstetricians and Gynecologists



FREQUENTLY ASKED QUESTIONS  
FAQ145  
WOMEN'S HEALTH

## Breast Self-Exam

- [Why should I do breast self-exams?](#)
- [How do I do a breast self-exam?](#)
- [What are some signs of breast problems?](#)
- [Glossary](#)

### Why should I do breast self-exams?

If breast cancer is found early, most women can be treated with success. That is why routine breast self-exams, **mammography** (see the FAQ [Mammography](#)), and checkups by your health care provider are vital.

By doing a monthly breast self-exam, you learn how your breasts feel. Knowing how your breasts normally feel helps you detect any changes or signs of a problem (see the FAQs [Detecting and Treating Breast Problems](#) and [Fibrocystic Breast Changes](#)).

All women should do the exam once a month, including women who

- have gone through **menopause**
- are pregnant
- are breastfeeding
- have **breast implants**

### How do I do a breast self-exam?

The best time to do the breast self-exam is a few days after your menstrual period ends each month. Your breasts are less tender or swollen at this time. If you are not having menstrual periods, try to do the exam on the same day each month. Some women choose the first day of each month to help them remember. There are two parts to a breast self-exam—looking and feeling.

### What are some signs of breast problems?

Some symptoms that you may find during your breast self-exam are listed as follows:

- A lump
- Swelling
- Skin irritation
- Dimpling
- Pain
- Nipple retraction (nipple turns in)
- Redness of nipple or breast skin
- Scaly nipple or breast skin
- Nipple discharge

Any lump should be checked right away. Tests may be needed. In some cases, a **biopsy** may be done to look at the tissue.

## Breast Self-Exam

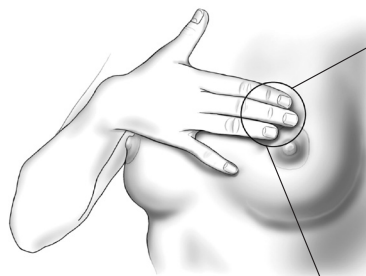
### Looking

Always do the self-exam in good light. Stand or sit in front of a mirror. Place arms at your sides. Look for dimpling, puckering, or redness of the breast skin, discharge from the nipples, or changes in breast size or shape. Look for the same signs with your hands pressed tightly on your hips and then with your arms raised high.

### Feeling

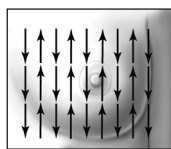
Lie flat on your back. Place a folded towel or a pillow under your left shoulder and place your left hand under or over your head. You can also feel for changes when you are standing or when you are taking a shower or bath. It often is easier to examine your breasts when they are smooth and wet with soap and water.

With your right hand, keeping the fingers flat and together, gently feel your left breast without pressing too hard. Use 1 of the 3 methods shown here. Then switch arms and do the exam on the other breast.

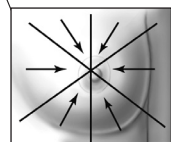


### Choose 1 of these methods

**Circle.** Begin at the top of your breast and move your fingers slowly around the outside in a large circle. When you return to the top, move your hand a little closer to the nipple and make a smaller circle. Do this in smaller and smaller circles until you have examined all of the breast tissue.



**Lines.** Begin in the underarm area. Slowly move your fingers down until they are below your breast. Move your fingers closer toward your nipple and go slowly back up, using the same motion. Use this up-and-down pattern all the way across your breast.



**Wedge.** Begin at the outside of your breast. Slowly work your way in toward the nipple, doing 1 wedge-shaped section at a time. Do this until the entire breast area has been examined.

### Don't Forget

- With any pattern, be sure to examine the nipples also. Gently squeeze the nipple and check for any discharge.
- Examine the upper chest area and below the armpits. These places also have breast tissue.
- Call your doctor if you notice any lumps or changes in your breasts.

## Glossary

**Biopsy:** A minor surgical procedure to remove a small piece of tissue that is then examined under a microscope in a laboratory.

**Breast Implants:** Sacs filled with saline or silicone gel that are placed in the chest or breast area.

**Mammography:** An X-ray of the breast, used to detect breast cancer.

**Menopause:** The process in a woman's life when ovaries stop functioning and menstruation stops.

## If you have further questions, contact your obstetrician–gynecologist.

**FAQ145:** Designed as an aid to patients, this document sets forth current information and opinions related to women's health. The information does not dictate an exclusive course of treatment or procedure to be followed and should not be construed as excluding other acceptable methods of practice. Variations, taking into account the needs of the individual patient, resources, and limitations unique to institution or type of practice, may be appropriate.

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