1. I’ve found a lump or change in my breast. Now what?
   First, don’t panic. Most lumps are not cancer. In younger women, lumps are often related to menstrual periods. They often go away on their own by the end of your cycle. But, don’t ignore any change in your breast. It is best to see a doctor to have it checked.

2. What will my doctor do?
   The doctor will ask about your personal and family medical history. He/she will ask you about what you found. Show the doctor exactly where you noticed the lump or other change in your breast. The doctor can tell a lot about a lump from its size, texture and its movement within the breast. Benign (not cancer) lumps often feel different from breast cancer. However, the doctor may refer you for tests to learn more about the lump or change.

3. What kind of tests will I need?
   A mammogram is an X-ray image of the breast. It is used to examine lumps or changes. Mammograms can also be used when screening for breast cancer.
   Breast ultrasound uses sound waves to make images of the breast. Breast ultrasound can tell the difference between a liquid-filled cyst and a solid mass. It is often used in addition to a diagnostic mammogram.
   The doctor will decide if one or more of these tests are needed.

4. How is a breast lump treated?
   Sometimes an abnormal lump is a liquid-filled sac called a cyst. Doctors can drain cysts by using a very thin needle and removing the fluid. This is called a cyst aspiration and can be done in a doctor’s office or a radiology center. Cysts are almost always benign. If the cyst does not fully collapse, or if the fluid in the cyst contains blood, the cells and fluid from the cyst may be examined under a microscope. Based on the findings, your doctor may order a diagnostic mammogram, breast ultrasound or biopsy.

5. What about breast MRI?
   Breast magnetic resonance imaging (MRI) uses magnetic fields to create an image of the breast. It can sometimes find breast cancer not seen on a mammogram or breast ultrasound.

6. What can tests show?
   The results of these tests may show:
   • The breast change is not a concern. You can return to your normal screening plan.
   • The abnormal finding is probably not cancer. You need to return for another screening in four to six months.
   • A biopsy is needed to tell whether or not the breast change is cancer.

For more information, visit www.komentoolkits.org.
7. Will I need a biopsy?
If the lump is solid, a biopsy may be needed to remove some cells or a small amount of tissue. The tissue is examined under a microscope to see if it is cancer. Usually, a needle biopsy is done first. It can show whether or not cancer cells are present. If there is a chance the biopsy needle missed the suspicious area or more tissue is needed to check for cancer, a surgical biopsy will be done.

8. What happens next?
If the lump is not cancer, you may have a benign (not cancer) breast condition. Although benign breast conditions are not cancer, some types may increase the risk of breast cancer. Your doctor will talk to you about the breast cancer screening plan that is right for you.

If you have breast cancer, your doctor will talk with you about your treatment options.

If your doctor finds nothing abnormal, but you still feel something is wrong, it is a good idea to get a second opinion. Although a lump or change may be nothing to worry about, you will have the peace of mind of a second opinion.

Resources
Susan G. Komen®
www.komentoolkits.org

Pink Alliance
www.pinkalliance.net

The above list of resources is only a suggested resource and is not a complete listing of 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 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.