



Breast Cancer Screening

Kinds of Screening Tests

Breast [cancer screening](#) means checking a woman's breasts for cancer before there are signs or symptoms of the disease. Three main tests are used to screen the breasts for cancer. Talk to your doctor about which tests are right for you, and when you should have them.

- **Mammogram.** A [mammogram](#) is an X-ray of the breast. Mammograms are the best method to detect breast cancer early when it is easier to treat and before it is big enough to feel or cause symptoms. Having regular mammograms can lower the risk of dying from breast cancer. If you are age 50 to 74 years, be sure to have a screening mammogram every two years. If you are age 40–49 years, talk to your doctor about when and how often you should have a screening mammogram.
- **Clinical breast exam.** A clinical breast exam is an examination by a doctor or nurse, who uses his or her hands to feel for lumps or other changes.¹
- **Breast self-exam.** A breast self-exam is when you check your own breasts for lumps, changes in size or shape of the breast, or any other changes in the breasts or underarm (armpit).

Which tests to choose: Having a clinical breast exam or a breast self-exam have not been found to decrease risk of dying from breast cancer.² Keep in mind that, at this time, the best way to find breast cancer is with a mammogram. If you choose to have clinical breast exams and to perform breast self-exams, be sure you also get regular mammograms.

Where Can I Go to Get Screened?

Most likely, you can get screened for breast cancer at a clinic, hospital, or doctor's office. If you want to be screened for breast cancer, call your doctor's office. They can help you schedule an appointment. **Most health insurance companies pay for the cost of breast cancer screening tests.**

Are you worried about the cost? The [National Breast and Cervical Cancer Early Detection Program \(NBCCEDP\)](#) offers free or low-cost mammograms and education about breast cancer. [/cancer/nbccedp/screenings.htm](#)

References

¹Saslow D, Hannan J, Osuch J, Alciati MH, Baines C, Barton M, Bobo JK, Coleman C, Dolan M, Gaumer G, Kopans D, Kutner S, Lane DS, Lawson H, Meissner H, Moorman C,



Pennypacker H, Pierce P, Sciandra E, Smith R, Coates R. [Clinical breast examination: practical recommendations for optimizing performance and reporting.](http://www.ncbi.nlm.nih.gov/pubmed/15537576) <http://www.ncbi.nlm.nih.gov/pubmed/15537576> *CA: A Cancer Journal for Clinicians* 2004;54(6):327–344.

²U.S. Preventive Services Task Force. [Screening for Breast Cancer.](http://www.uspreventiveservicestaskforce.org/uspstf/uspsbrca.htm) <http://www.uspreventiveservicestaskforce.org/uspstf/uspsbrca.htm> Rockville, Maryland: Agency for Healthcare Research and Quality, 2009.