



Breast Screening Recommendations

Screening Mammography

Screening mammograms are intended for annual screening for women who are asymptomatic and/or have no breast concerns/complaints.

- Women who do not have a risk factor for breast cancer (average risk) should annual screening mammography at 40 years of age. Screening mammography saves more years of life for women who get screened every year rather than every other year.
- Women who have a one of the following risk factors (high risk) should follow their health care provider's recommendation for screening include:
 - ✓ Women with a family history of breast cancer in a first degree relative (i.e., mother, sister, daughter) may begin annual screening mammography 10 years prior to the age of the relative diagnosed, or age 40, whichever comes first.
 - ✓ Women with suspected or confirmed genetic mutations known to increase risk of breast cancer (such as BRCA) may start by 30 years of age, but not before 25 years of age.
 - ✓ Women with a history of previous radiation therapy to the chest between 10 and 30 years of age; begin annual screening mammography eight years after the radiation therapy, but not before 25 years of age.
 - ✓ Women with a personal history of breast cancer.

Clinical Breast Exams (CBE):

- Recommended for all women annually.
- Required for coverage of the office visit by Care for Yourself and WISEWOMAN Programs.
- Recommended for women with a breast change/issue who are younger than 40 years old.

Diagnostic Mammography

Diagnostic mammograms are used to take more detailed images of certain areas to determine if abnormalities in the breast. A clinical breast exam (CBE) should be performed before a diagnostic mammogram.

Breast symptoms, changes or problems include but are not limited to:

- Palpable lumps or abnormalities.
- Pain or tenderness in the breast or axilla (armpit).
- Nipple discharge or changes of skin on the breast.
- Six-month follow-up as recommended by the provider and/or radiologist.
- Patients with a previous history of breast cancer.
- Patients with a difficult breast exam.
- Patients with a finding (such as pain, lump, discharge or recommended follow-up) should have a diagnostic mammogram of both breasts.

Sources: American Cancer Society, American College of Radiology, American Medical Association, Care for Yourself & WISEWOMAN Programs and the Centers for Disease Control.