

Clinical Protocol for the Early Detection of Breast Cancer December 2009

The Michigan Cancer Consortium supports the breast cancer screening guidelines for average and high-risk women as recommended by the American Cancer Society (2009)¹ and the National Comprehensive Cancer Network (NCCN) Clinical Practice Guidelines in Oncology for Breast Cancer Screening and Diagnosis (V.1.2010).²

I. Recommendations for Breast Cancer Screening – Average Risk Women

Screening Exam	Interval	Age to Begin	Additional Information
Breast Awareness/ Breast Self-Exam ^{1,2}	Optional	Mid-20's	See NOTE*
Clinical Breast Exam (CBE) ^{1,2}	Every three (3) years	Asymptomatic women in their 20's and 30's	CBE should be part of a periodic health exam
	Annually	Women age 40 and older	
Mammography ^{1,2}	Annually	Average risk women starting at age 40	Yearly exams should continue for as long as a woman is in good health.

* **NOTE:** Breast Awareness/Breast Self-Exam

- Breast self-exam (BSE) is an option for women starting in their 20s. Women should be informed about the benefits and limitations of BSE. ¹
- Women should be familiar with their breasts and promptly report changes to their healthcare provider. Periodic, consistent BSE may facilitate breast self-awareness. Pre-menopausal women may find BSE most informative when performed at the end of menses. ²

II. Recommendations for Breast Cancer Screening – High Risk Women

Risk Factor	Screening Exam	Interval	Age to Begin	Additional Information
1. Prior thoracic radiation therapy* ²	CBE	6-12 months	Begin 8-10 years after Radiation Therapy or age 25 whichever occurs last.	* See Note Breast Self-Awareness
	Mammogram	Annual		
	Consider MRI as adjunct to CBE/ Mammogram	Annual		
2. Personal history of atypical hyperplasia or Lobular Carcinoma In Situ (LCIS) ²	CBE	6-12 months	Begin 5-10 years prior to earliest index case but not under age 25	* See Note Breast Self-Awareness Consider Risk Reduction Strategies (See NCCN Breast Cancer Risk Reduction Guidelines)
	Mammogram	Annual		
	For LCIS: MRI as adjunct with CBE/Mammogram	Annual		
3 Strong family history of breast cancer or genetic predisposition ² (Hereditary Breast and Ovarian Cancer Patients – HBOC)	CBE	6-12 months	Start at age 25 for HBOC patients 5-10 years prior to youngest breast cancer case for strong family history of other genetic predispositions	* See Note Breast Self-Awareness Consider Risk Reduction Strategies (See NCCN Breast Cancer Risk Reduction Guidelines) Consider referral to genetic counselor
	Mammogram	Annual		
	MRI as adjunct with CBE/Mammogram	Annual		
4. Personal History of Breast Cancer ²	CBE	6-12 months	Post Diagnosis	* See Note Breast Self-Awareness See NCCN Breast Cancer Guidelines- Surveillance Section
	Mammogram	Annual		
Women \geq 35 with 5-year risk of invasive breast cancer \geq 1.7% ²	CBE	6-12 months	After age 35.	* See Note Breast Self-Awareness Consider Risk Reduction Strategies (See NCCN Breast Cancer Risk Reduction Guidelines)
	Mammogram	Annual		

Risk Factor	Screening Exam	Interval	Age to Begin	Additional Information
Moderate Breast Cancer Risk (15% - 20% lifetime risk) ¹	CBE	6-12 months	Age risk is identified	* See Note Breast Self-Awareness Discuss with Health Care Provider about the benefits and limitations of adding MRI screening to yearly mammogram * ACS recommendations
	Mammogram	Annual		
High Breast Cancer Risk (> 20% lifetime risk) ^{1,2}	CBE	6-12 months	Age Risk is Identified	* See Note Breast Self-Awareness Consider Risk Reduction Strategies (See NCCN Breast Cancer Risk Reduction Guidelines)
	Mammogram	Annual		
	MRI	Annual		

*** NOTE:** Breast Awareness/Breast Self-Exam

- Breast self-exam (BSE) is an option for women starting in their 20s. Women should be informed about the benefits and limitations of BSE. (ACS 2003, 2009)
- Women should be familiar with their breasts and promptly report changes to their healthcare provider. Periodic, consistent BSE may facilitate breast self-awareness.. Pre-menopausal women may find BSE most informative when performed at the end of menses. (NCCN Clinical Practice Guidelines in Oncology for Breast Cancer Screening and Diagnosis V.1.2010).

III. Evaluation of Abnormal Clinical Breast Exam and/or Mammogram Results

Refer to National Comprehensive Cancer Network (NCCN) Clinical Practice Guidelines in Oncology for Breast Cancer Screening and Diagnosis (V.1.2010).²