



15

Breasts and Axillae

LEARNING OBJECTIVES

After studying Chapter 14 in the textbook and completing this section of the workbook, students should be able to:

1. Conduct a history related to the breasts and axillae.
2. Discuss examination techniques for the breasts and axillae.
3. Identify normal age and condition variations to the breasts and axillae.
4. Recognize findings that deviate from expected findings.
5. Relate symptoms or clinical findings to common pathologic conditions.

TEXTBOOK REVIEW

Chapter 15 Breasts and Axillae (pages 496–524)

CONTENT REVIEW QUESTIONS

Multiple Choice

Circle the correct answer for each of the following questions.

1. A patient complains of a red rash on her breast. Which finding helps an examiner differentiate Paget's disease from eczema? The lesion is:
 - a. unilateral.
 - b. red.
 - c. located on the nipple.
 - d. raised and fluid-filled.

2. Yvonne had a mastectomy to the right breast 2 years ago. Which true statement assists the examiner with breast examination of this patient?
 - a. Swelling, thickening, and small lumps around the mastectomy site are normal.
 - b. The mastectomy site should be inspected but not palpated because of pain at the site.
 - c. If malignancy recurs, it may be at the scar site.
 - d. There is no need to examine the mastectomy site.
3. A woman in her third trimester of pregnancy asks the examiner about the drainage from her nipples. Her nipples are symmetric without redness. Which statement is true?
 - a. Colostrum secretion is normal in the last trimester.
 - b. Cultures should be taken to rule out an infection.
 - c. Drainage from the nipple is an indication of a malignancy.
 - d. The drainage is a sign of witch's milk.
4. While palpating the axilla, it is best to place the patient in a:
 - a. sitting position with hands over head.
 - b. sitting position with arms at sides.
 - c. supine position with arms on hips.
 - d. lateral position with arms at sides.
5. A 58-year-old woman asks the examiner how often a mammogram is recommended for her. The best response by the examiner is:
 - a. "every 1 to 2 years if you have no symptoms."
 - b. "every 3 years."
 - c. "every 5 years if you have no symptoms."
 - d. "every 3 years if you have a family history of cancer."
6. A supernumerary nipple is found on a Caucasian newborn infant girl. Which of the following may accompany this finding?
 - a. increased risk for breast cancer as an adult
 - b. increased lactation volume as an adult
 - c. congenital renal or cardiac anomalies
 - d. mental retardation
7. A patient reports that she is concerned about the changes in her breasts that accompany her menstrual cycle. What should the examiner tell her about these changes?
 - a. These changes are most likely to occur prior to and after the menstrual flow.
 - b. These changes are alarming and might signal the development of a malignancy.
 - c. These changes are a common response to hormonal changes during the menstrual cycle.
 - d. Changes are most noticeable during the week after menstrual flow.
8. Which of the following is the correct position in which to place the patient for breast palpation?
 - a. supine with arms at side; pillow under neck
 - b. supine with arm over head and small pillow under shoulder of side being assessed
 - c. left lateral position with arm bent backward
 - d. sitting slightly forward with breasts hanging away from chest; hands on hips
9. Which statement made by a 37-year-old woman would make the examiner suspect fibrocystic disease?
 - a. "I have a lump in my breast that is not tender."
 - b. "My right breast is larger than the left breast."
 - c. "My nipples are darker than before my baby was born."
 - d. "I feel a lump before my period."

10. A patient, 3 weeks postpartum, tells the examiner that she is breast-feeding, but might stop because her nipples are sore. The examiner observes dry and cracked nipples. Which of the following questions would be helpful in gaining information relevant to treating the problem?
 - a. "Do you pump your breasts?"
 - b. "How do you clean your breasts?"
 - c. "Have you been able to bond with your infant?"
 - d. "What medications have you been taking?"
11. In an older male, gynecomastia may be secondary to:
 - a. a decrease in physical activity.
 - b. increased lactiferous duct glands.
 - c. lymphatic engorgement.
 - d. a decrease in testosterone.
12. Which of the following questions asked by the examiner will best validate the patient's understanding of breast self-examination?
 - a. "Do you do breast examinations on yourself?"
 - b. "How often do you examine your breasts?"
 - c. "Would you show me how you examine your breasts?"
 - d. "Why is breast self-examination important to do on a regular basis?"
13. Symptoms consistent with underlying ductal malignancy include:
 - a. erythema, heat, and pain over and around one nipple.
 - b. red, scaling, crusty patch on one nipple.
 - c. bilateral inflammation, tenderness, and sticky multicolored nipple discharge.
 - d. gynecomastia and a deepening color of the nipple.
14. While examining the breast of a 52-year-old woman, the examiner notes nipple discharge. Which of the following diagnostic tests would be appropriate?
 - a. cytologic examination of the discharge
 - b. culture and sensitivity examination of the discharge
 - c. white blood cell count
 - d. estrogen level
15. While performing a breast examination on a 68-year-old female, which finding is expected? The:
 - a. breast tissue has multiple large, firm lumps in it.
 - b. breast tissue has a granular feel to it.
 - c. tail of Spence is no longer observed.
 - d. axillary lymph nodes are enlarged.

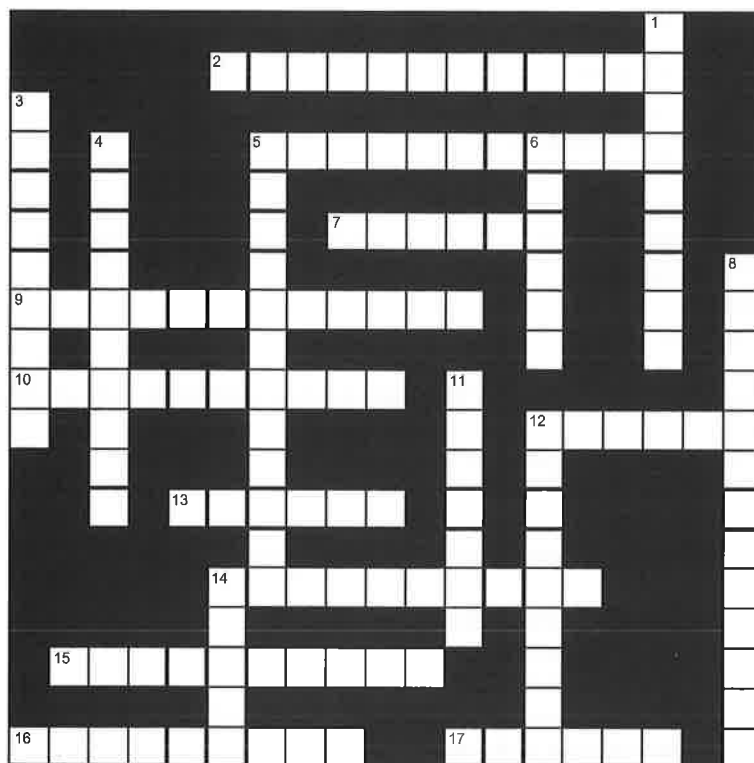
Terminology Review

Matching

Match each clinical finding to its corresponding associated factor or cause.

Clinical Finding	Associated Factor or Cause
16. _____ Galactorrhea	a. Malignant breast tumor
17. _____ Mastitis	b. Ductal enlargement
18. _____ Fibrocystic disease	c. Possible sign of breast malignancy
19. _____ Dimpling in breast	d. Administration of phenothiazines
20. _____ Nipple retraction	e. Clogged milk duct

Crossword Puzzle



Across

- 2. Unexpected enlargement of breast tissue
- 5. Disease resulting in benign breast cyst formation
- 7. Projection at the apex of the breast on the surface of which the lactiferous ducts open
- 9. Lactation not associated with child-bearing
- 10. Important constituent of colostrum in addition to protein and minerals
- 12. Staging for sexual maturity
- 13. Ligaments that support the breast
- 14. Small tumors of the subareolar ducts
- 15. Follicles that are tiny sebaceous glands and may appear in the areola
- 16. Clear or milky white fluid expressed from breast prior to milk production
- 17. Pigmented area surrounding the nipple

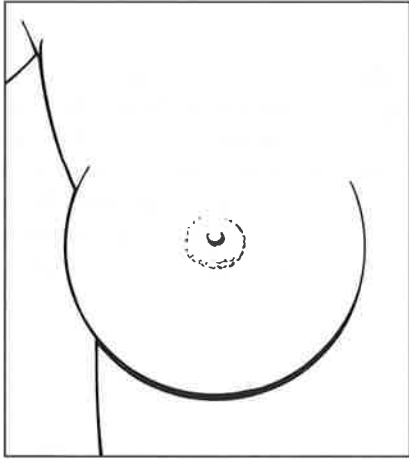
Down

- 1. Peau d'orange appearance indicates blocked lymph drainage in this condition
- 3. Common radiologic procedure for breast examination
- 4. Interval following termination of lactation when breasts decrease in size
- 5. Benign neoplasm of breast tissue
- 6. Area where most malignancies occur in breast tissue
- 8. Exceeding the normal number
- 11. Lymph nodes signaling lymphatic invasion of carcinoma from abdomen or thorax
- 12. Beginning of breast development in the female
- 14. Disease which is a surface manifestation of underlying ductal carcinoma

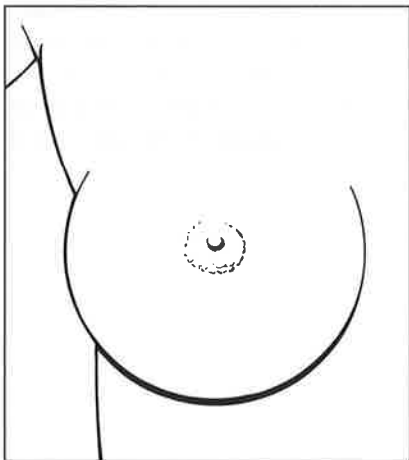
CONCEPTS APPLICATION

On the illustrations below, draw the direction of palpation the examiner would use for (a) back-and-forth technique; (b) concentric circles technique; and (c) wedge technique.

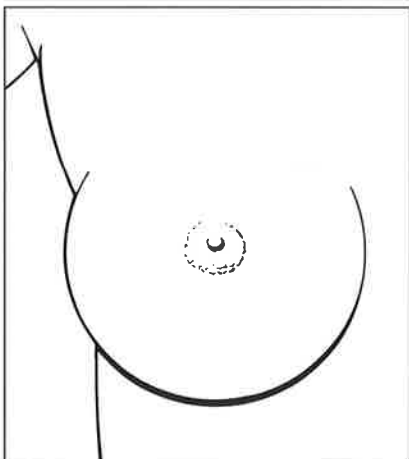
a



b



c



CASE STUDY

Julie is a 46-year-old female who comes to the clinic because she has discovered a lump in her left breast. Listed below are data collected during an interview and examination.

Interview Data

Julie tells the examiner that she first noticed the lump about 9 months ago. Because it seemed small and did not hurt, she did not feel that it was much to worry about. Recently, Julie began noticing that the lump felt bigger and decided she better have someone look at it. Julie tells the examiner, "I just know it is not cancer because I am much too young and healthy. And if it is, I am not about to let some doctor mutilate me with a knife. I'd rather die than have my breast cut off." The examiner asks her if she has noticed any redness or dimpling of the breast. Julie tells the examiner, "No, not really, but I don't pay attention to those sorts of things." Julie tells the examiner that she started having regular menstrual cycles at the age of 11 and still has not reached menopause. She has never been married and has no children.

Examination Data

General survey: Very nervous, well-nourished female. Is hesitant to expose her breast for examination.

Breast exam: Inspection reveals breasts of typical size with right and left breast symmetry. The skin of both breasts is smooth, with even pigmentation. The nipples protrude slightly with no drainage noted. The left nipple is slightly retracted. Significant dimpling noted on left breast in upper outer quadrant when arms are raised over her head. Right breast appears normal. Palpation of the left breast reveals a large hard lump in the upper outer quadrant. No lumps or masses noted in right breast. The left nipple produces a clear bloody-type discharge when squeezed; the right nipple is unremarkable.

1. What data deviate from normal findings, suggesting a need for further investigation?
2. What additional questions could the examiner ask to clarify symptoms?
3. What additional physical examination, if any, should the examiner complete?
4. What primary problems does the patient have?

