WHO PEN Protocol 4
4.1 Assessment and referral of women with suspected breast cancer at primary health care

Women who present the following persistent and unexplained signs and symptoms should seek consultation at a PHC:

a) Breast lump, or any change in the shape or consistency of the breast
b) Breast lump that enlarges and/or is fixed and hard
c) Other breast problems (i.e. eczematous skin changes, nipple retraction, peau d’orange, ulceration, unilateral nipple discharge – particularly bloody discharge –, lump in the axilla) with or without palpable lump

Assess likelihood for breast cancer

- Assess signs and symptoms (i.e. history, intensity, duration, progression)
- Identify relevant breast cancer risk factors (such as age, family history, previous history of breast cancer, chest irradiation)
- Clinical examination of both breasts, axillae and neck
- Differential diagnosis: benign breast diseases (e.g. fibroadenoma, fibroadenosis, mastitis, abscess, etc.)

Women < 30 years old

- Presenting with a)
  - Invite for follow-up visit after menstrual period
- Follow-up visit: if b) or c)

Women 30 years old and above

- Presenting with: a) + relevant risk factors, or b) or c)
- Presenting with: a) b) or c)
- Refer immediately to next level

Note:
Referral of women with small breast lumps may lead to diagnosis of "early breast cancer"