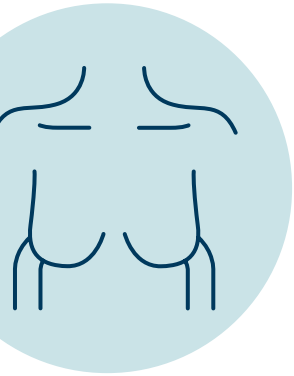


# BREAST CANCER

## THINK A-G

Supporting earlier & faster cancer diagnosis



### ASSESSMENT

People with red flag symptoms of breast cancer, such as a breast or axillary lump, new unilateral nipple retraction or suspicious skin changes, need referral for triple assessment.



A



B



C



D



E



F



G

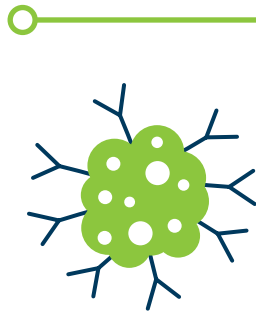


### BREAST PAIN

Breast pain, without red flag symptoms, is not a symptom of breast cancer.

### CONSIDER BREAST CANCER IN MEN AND TRANSGENDER PATIENTS

Breast cancer can occur in cisgender men, transgender men and transgender women. It is important to refer if symptoms are consistent with breast cancer.



### DISCHARGE

- Nipple discharge can be pathological or physiological
- Refer people, using a suspected cancer pathway, who have a uniductal, unilateral nipple discharge that is bloody or clear and that occurs spontaneously (without pressing)
- Multiductal, bilateral milky, yellow, green, grey or brown discharge is not a cause for concern.



### EXAMINATION

A breast examination is required before referral. Be alert to: breast and axillary lumps; pathological nipple discharge; new unilateral nipple retraction; unexplained skin changes such as tethering, indentation or erythema.

### FAMILY HISTORY

A first- and second-degree family history should be taken in all patients with breast symptoms to assess risk. If a patient meets the NICE referral criteria, please refer in to the family history clinic at your local breast unit.



### GREATER MANCHESTER REFERRAL PROFORMA

- Please refer all patients using the Greater Manchester form
- Ensure the patient understands the reason for referral
- Include frailty information as this helps direct patients to the most appropriate investigation or assessment

### REFERRAL PROCESS FOR GREATER MCR

- GM referral form
- Examination
- Medical history