



ACP Academy

Breast Examination – Step-by-Step OSCE Guide ACP Academy Format (Refreshed Edition)

GETTING STARTED

1. Perform hand hygiene and don PPE as required.
2. Introduce yourself: “Hi, I’m Jamie, one of the advanced clinical practitioners.”
3. Confirm the patient’s full name and date of birth.
4. Explain the examination: “I’d like to examine your breasts today to check for any lumps, skin changes, or other abnormalities. This will involve looking and gently feeling around the chest area.”
5. Emphasise the need for a chaperone, and ensure one is present.
6. Gain verbal consent to proceed.
7. Offer the patient privacy to undress from the waist up and ask them to lie flat on the examination couch, with a sheet provided for modesty.
8. Confirm that the patient is ready and ask if they have any pain before proceeding.

INSPECTION

9. With the patient sitting upright, inspect the breasts with:
 - Arms relaxed by their sides
 - Hands placed on hips (to contract pectoral muscles)
 - Arms raised above the head and leaning forward (to accentuate asymmetry)
10. Look for:
 - Skin changes (e.g. dimpling, puckering, erythema)
 - Nipple abnormalities (e.g. inversion, discharge, scaling)
 - Breast symmetry and contour
 - Visible masses or lesions

PALPATION

11. Ask the patient to lie flat with one arm behind their head on the side being examined.
12. Using the flat of your fingers, palpate each breast systematically:
 - Use either circular, radial, or vertical strip technique
 - Cover the entire breast, including the axillary tail and retroareolar area
13. Gently palpate the nipple-areolar complex and check for any discharge.
14. Lift the breast to inspect and palpate underneath for any hidden lesions or skin tethering.

LYMPH NODE ASSESSMENT

15. With the patient relaxed, palpate the lymph nodes in the following regions:
 - Axillary (anterior, posterior, lateral, central, apical)
 - Supraclavicular and infraclavicular
 - Cervical chain (if indicated)
 - Parasternal nodes along the edge of the sternum

CLOSING THE EXAMINATION

16. Cover the patient, thank them, and offer help to redress if needed.
17. Perform hand hygiene.
18. Summarise your findings clearly.
19. Suggest appropriate next steps, which may include:
 - Further imaging: mammography, ultrasound
 - Triple assessment in breast clinic
 - Referral for biopsy if suspicious lesions are found

Breast examination requires sensitivity, respect, and clear communication. A structured approach ensures you don't miss key findings, while maintaining patient dignity and confidence.