

# Breast masses and enlargement

(March 2022)

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## Rationale

Breast masses are common and can be either benign or malignant. Given the prevalence of breast cancer in women, screening is important for detection of the disease in its early stages. Breast enlargement may be due to physiological causes or an underlying mass effect.

## Causal Conditions

(list not exhaustive)

- Malignant breast masses
- Nonmalignant breast masses
  - a. Fibrocystic change
  - b. Breast infections
  - c. Associated with lactation
- Gynecomastia
  - a. Physiologic (newborn, adolescence, elderly)
  - b. Pathologic (e.g., testosterone deficiency or increased estrogen production, medications)

## Key Objectives

Given a patient with a breast mass or gynecomastia, the candidate will diagnose the cause, severity, and urgency, and will initiate an appropriate management plan. The candidate will also recommend appropriate screening for asymptomatic patients who meet the screening criteria.

## Enabling Objectives

Given a patient with a breast mass or gynecomastia or a patient who presents with concerns about developing a breast mass, the candidate will recognize when an asymptomatic patient meets the criteria for breast cancer screening and recommend the appropriate actions for the patient to take.

Given a patient with a breast mass or gynecomastia or a patient who presents with concerns about developing a breast mass, the candidate will

- list and interpret critical clinical findings, including
  - a. results of an appropriate history and physical examination (e.g., substance use, family history of breast cancer, carrier of genetic mutations known to be associated with breast cancer); and
  - b. identified risk factors for malignancy;
- list and interpret critical investigations (e.g., imaging, biopsy); and
- construct an effective management and prevention plan, including
  - a. screening;
  - b. treatment;
  - c. referral if necessary; and
  - d. follow-up assessment and support (e.g., genetic testing).