

Patient \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_

# Menstrual Record Chart

Year \_\_\_\_\_

| Month | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 |
|-------|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| Jan   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Feb   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Mar   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Apr   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| May   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Jun   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Jul   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Aug   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Sep   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Oct   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Nov   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Dec   |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |

No of days from start of period to beginning of next Breast Exam Done? (Y/N)

### TYPE OF FLOW

- Normal
- Exceptionally Light
- Exceptionally Heavy
- Spotting

*Don't forget to have this chart with you when you call or visit your doctor*

Dr. \_\_\_\_\_

### Breast Self Examination

#### You Should Examine Your Breasts Because:

95% of breast lumps treated by doctors are found by women themselves. Most women with breast cancer are cured if they are treated early. Most breast lumps are not cancerous.

#### What to Look for:

- Changes in size or shape of your breasts or the position of your nipples
- Inward puckering of the skin or nipple.
- Sores or scaling on the nipple or areola (The darker skin around the nipple).
- Redness of skin.
- Enlargement of skin pores.

#### How to Look for Changes:

Begin the exam in front of a mirror with your arms relaxed at your side or on your lap and look for the changes described above. Next, hold your arms straight over your head and repeat your inspection. Put your hands on your waist and push firmly inward. Look once more for any changes. Gently squeeze the nipple of each breast and look for discharge.

#### What to Feel for:

- Any changes from previous exams.
- Any lump or thickening.

#### How to Feel for Changes:

Lie down and with the flat of your fingers, feel for lumps, left hand on right breast, then right hand on left breast. Move fingers around breast as if it were a face of a clock. Be sure to cover the entire breast from the outer edges to the nipple. "Walk" fingers thoroughly in concentric circles, then squeeze under nipple. Look for a lump or a knot that was not there before, quite hard, perhaps the size of a nickel or larger and the feel of your knuckle. Be sure to cover the entire breast. If any changes are noted, call the doctor.

#### When to do the Exam:

Do the exam on the day your menstrual period ends. If you have reached menopause, examine your breasts on the same day each month, such as the first, fifteenth, or a day you'll remember. If you are pregnant, examine your breasts on the same day each month. If you have had a hysterectomy and have monthly breast changes (swelling or tenderness), examine your breasts on the day these changes disappear. If you no longer have monthly breast changes, examine your breasts on the same day of each month.

Have your self-examination techniques checked by your doctor or other health professional.

Be sure to continue to have regular check-ups with your physician.