

1962

A study to determine concepts and practice of self examination of the breasts by eighty graduate nursing students

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A STUDY TO DETERMINE CONCEPTS AND PRACTICE
OF SELF EXAMINATION OF THE BREASTS BY
EIGHTY GRADUATE NURSING STUDENTS

BY

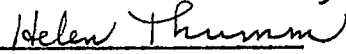
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First Reader


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CHAPTER I

INTRODUCTION

Women need to be taught that the prognosis for cancer of the breast could be much better if the cancer is discovered early and treatment is instituted immediately.¹

The validity of the foregoing statement is substantiated by statistics.

....when a delay of from two weeks to a month occurred, the five-year survival rate was 55 per cent; with a delay of between six months to a year, the survival rate decreased to 34 per cent; and with a delay of over two years, the survival rate was only 20 per cent.²

In spite of this, the one means of early detection available to women, that of self examination of the breasts is not routinely practiced.

It is somewhat understandable that the female population which is not medically oriented may be unaware of the importance of this practice. Nurses, however, are aware of the results of late detected breast masses and tumors. They are fully aware of the patient who enters the hospital for a radical mastectomy and states that she had no idea there was anything wrong. The patient says that the doctor found the mass during a physical examination, or that the mass had become so large as to cause discomfort or drainage.

¹Kathleen N. Shafer et al., Medical Surgical Nursing (St. Louis: The C. V. Mosby Co., 1958), p. 769

²George T. Pack and Irving M. Ariel, "Tumors of the Breast, Chest and Esophagus" Treatment of Cancer and Allied Diseases, Second Edition, Vol. IV, (New York: Paul B. Hoeber, Inc., 1960), p. 28

The nurse has before her one of the most concrete, expensive lessons that can be acquired. She is in a position to realize the consequences of late detected cancer of the breast, but she has before her the living proof of these consequences. This should be enough to impress upon the nurse the importance of monthly self examination of the breasts.

The nurse has a responsibility to educate the public concerning health preservation measures for their protection. How do nurses feel that they can teach the public these important concepts if they do not believe in them or practice them? Teaching the public is only part of the nurses' responsibility; she has a responsibility to herself to maintain and promote her own health and well being by drawing upon the knowledge available to her. It is only as nurses are aware of the value and role of intelligent use of information and teachings available to them that they will become effective in their dual role of responsibility; that which is due to their patients, and that which is due to themselves.

STATEMENT OF PROBLEM

This study was undertaken to determine how many graduate students at Boston University School of Nursing practice monthly self examination of the breasts and their concept of the importance of this procedure.

Questions to be answered:

1. What percent of the graduate students at the Boston University School of Nursing practice monthly self examination of the breasts?

2. If self examination of the breasts is not practiced, what is the nurse's rationale underlying this behavior?
3. Do graduate students feel that nursing students should be taught to do a monthly self examination of the breasts as part of their overall health program?

JUSTIFICATION OF PROBLEM

Statistics show that early detection and immediate treatment of cancer of the breast has a much better prognosis than that which is detected later. The medical profession has tried to impress upon the female public the importance of early detection of breast cancer. One of the methods of public education is accomplished through the nursing profession by teaching patients with whom it has contact. If the nursing profession is to play an important role in teaching health saving concepts, it should look closely at the views its members hold regarding these theories.

Since the graduate students of today are preparing for positions in teaching, supervision or administration, they should take inventory of their convictions in regard to the practice, value and role of preventive measures such as self examination of the breasts.

SCOPE AND LIMITATIONS

This study was made at the Boston University School of Nursing. Eighty graduate students who were registered for the school term starting September 1961 participated in the study.

The questionnaire used to procure the data was administered by two faculty members who conduct sectioned classes in a methods of research course.

PREVIEW OF METHODOLOGY

Permission to make the study at the Boston University School of Nursing was obtained from the Assistant Dean.

Following the selection of the sample, a questionnaire was developed. This tool consisted of thirteen items. Eight of these items required a simple Yes-No answer, and five of them a brief statement of answer. There was no pre-testing of the questionnaire before it was submitted to the study group. The thirteen items required approximately ten minutes for completion. Eighty questionnaires were distributed and all were returned completed.

SEQUENCE OF PRESENTATION

Chapter II contains the theoretical framework of the study and a review of literature. A descriptive account of methodology is found in Chapter III. Chapter IV contains the data. The summary, conclusions and recommendations compose Chapter V.

CHAPTER II

Theoretical Framework of Study

Review of Literature

Self examination of the breasts is not a new idea. It has been recognized as one of the best ways to help women to help themselves in preventing cancer of the breasts from becoming too advanced to be cured.

Auchincloss, in 1927, recommended that all young women be taught self examination of the breasts. He was convinced that these women would discover lumps far sooner than they would be discovered by a doctor doing a routine examination.¹

There are several factors that enter into the reason for self examination of the breasts to be performed throughout a woman's total life span.

Although no age is exempt from cancer, the death rate shows a rapid increase with age.

For example, statistics reveal that death from cancer of the breast in female children under 10 is less than 10 per 100,000. At age 40 it is 100, and over 75 it is 1,000 per 100,000. On the basis of clinical observations one might then say that a lump in the breast of a girl under 10 is almost certainly not cancer, in a woman age 40 there is at least an even chance that it is cancer, and in a woman aged 75 it is almost certainly cancer.²

However, age is but one of the factors in the incidence and prevalence of cancer of the breast. Shafer makes reference not only to age, but also to the fact that cancer of the breast is more

¹Lauren V. Ackerman and Juan del Regato, Cancer-Diagnosis, Treatment and Prognosis, Second Edition, (St. Louis: The C. V. Mosby Co., 1954), p. 991

²A Cancer Source Book for Nurses, (New York: The American Cancer Society, Inc., 1950), pp. 16-17.

prevalent in single women, or married women who have never had children— that is, in those women whose breasts have never functioned normally. Also, there is a higher incidence in the economically well favored and when there is a familial history of cancer of the breast.³

The only statement that can be made which applies to the curing of breast cancer is concerned with the early detection of the disease and immediate treatment. The National Cancer Institute has issued the following statement:

Since cancer of the breast is curable in its early stages, your best protection, however, is to detect it early. Such detection is going to depend very largely on you. Particularly if you are over 35 years of age, you should examine your breasts at least once a month. This should be done according to a definite plan. A haphazard examination may miss some of the signs you should be looking for.⁴

The American Cancer Society and the National Cancer Institute have issued pamphlets to help women to know what to look for when doing a self examination of the breasts. Some of the important signs of breast cancer listed by the National Institute are: any lump in the breast; any deformity or alteration in the shape of the breast; any elevation or retraction of the nipple; a rash around the nipple; discharge from the nipple; swollen gland in the arm pit; and/or a sore on the skin of the breast.⁵

³ Kathleen N. Shafer et al., op cit., p. 767

⁴ Cancer of the Breast, National Cancer Institute, (Washington, D.C., 1949), p. 14

⁵ Ibid., p. 13

The American Cancer Society has not only published pamphlets to help women to learn to do a proper self examination of the breasts, but has also produced a movie. This movie, "Breast Self-Examination" is a 16 millimeter, colored, sound film which explains how, when and why every woman should examine her breasts.⁶

The production of a movie to aid women to learn self examination of the breasts is only part of the American Cancer Society's project. If the film is not used or its existence is not known, it has no value. The Society calls upon the nursing profession to aid in its attempt to educate the female public.

The Society urges nurses to 1) encourage the female population to do monthly self examination of the breasts; 2) promote healthy psychological attitudes toward this procedure; 3) make known the importance of early treatment of the conditions discovered and 4) make known the available sources of medical help and assistance to these women.⁷

Sugarbaker and Wilfley point out that the nurse has an important role in not only helping to discover breast cancer but also in treating those patients in whom it has been discovered. There are three aspects to the nurses' responsibility: 1) education of women to discover breast cancer while it is still early; 2) emotional rehabilitation of the patient following a mastectomy and 3) the physical and psychological

⁶"Breast Self-Examination", The American Journal of Nursing, LVIX, (May 1959), p. 691

⁷The Nurse and Breast Self Examination, (New York: The American Cancer Society, Inc., 1952)

care of patients who have an advanced or inoperable cancer of the breast where there has been metastasis. The nurse is in a particularly strategic position to help detect and treat cancer of the breast by virtue of her professional skills and her sex.⁸

Knapp echoed the nurse's opportunity to aid in detection of breast cancer and other forms of the disease. She feels that the nurse, through bathing the patient is in a position to be alert for signs which may indicate the presence of cancer of conditions which might be predisposing to it. The nurse is with the patient for long periods of time and can establish rapport with her, and because she is of the same sex, the patient may prefer to discuss changes in the menstrual cycle, a lump in the breast or some change related to the reproductive organs. The nurse then has the responsibility to report these changes to the doctor immediately to prevent further delay which may cost the patient her life.⁹

One of the greatest tragedies of women with cancer of the breast is that they fail to seek medical attention immediately following the discovery of one or more signs of the disease. Brown states: "The greatest advantage of self examination is to find a lump palpable at 1 centimeter in diameter rather than at 4 or 5 centimeters, for then different treatment may be required."¹⁰ However, this is not the policy

⁸ Everett D. Sugarbaker and Lucy E. Wilfley, "Cancer of the Breast" The American Journal of Nursing, I, (June 1950), p. 334

⁹ Margaret F. Knapp, "Cancer- A Review" The American Journal of Nursing, LVI, (April 1960), p. 442

¹⁰ Amy F. Brown, Medical and Surgical Nursing II, (Philadelphia: W. B. Saunders Co., 1959), p. 682

followed by women according to Cameron:

As a rule, women who have this disease first consult a doctor when the tumor measures just under two inches across --about the size of a golf ball.

It has been estimated that it takes from 6 to 12 months for a breast cancer to grow from the size at which it can just be found to the size usually encountered at the time of surgery. These are precious months of delay that can be avoided by any woman with intelligence enough to make a regular, methodical examination of her own breasts once a month.¹¹

An editorial in the Journal of the American Medical Association makes note of the costly delay in seeking immediate medical care. An evaluation of the self examination of the breasts and attendance in detection clinics has shown that patients have been chiefly responsible for the discovery of a lesion and that these lesions average 2 centimeters or more in diameter. The delay in seeking medical attention and surgical resection varies from two to twelve months. It has also been demonstrated that when surgical resection is done, there is axillary metastasis in at least 60 per cent of the cases.¹²

Throughout the literature that has been reviewed there is one consistent fact: most cancers of the breast are found by the patient herself. In view of this, the importance of self examination of the breasts cannot be overemphasized.

¹¹ Charles Cameron, The Truth About Cancer, (Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1956), pp. 194-195

¹² Journal of the American Medical Association, Editorial, CLXXVI, (July 1961), p. 1108

Peterson adds that:

Most breast cancer is found by the patient herself. In the past it was usually found accidentally. Today, women are taught the importance of periodic examination. . . .

Nurses, too, should practice this health habit. We do not know how to prevent breast cancer, but if we can find it while it is still a small lump and if it has not metastasized to the lymph nodes, there is a 75 per cent or better opportunity for cure.¹³

Knapp infers that cancer detection and prevention measures apply to the nurse as well as to other women. However, she not only stresses monthly self examination of the breasts, but also the annual vaginal cytology test. She goes on to express that the nurse's teachings are much more likely to be convincing if she follows the advice she gives to other women.¹⁴

Cancer education has made great advances, but unfortunately so has cancer itself. Pack and Ariel indicate that:

Approximately 54,000 women in the United States develop breast cancer each year and about half of these will die of cancer within five years.

Breast cancer will account for more than 250,00 neoplasms representing 22 per cent of all malignant tumors in females. It is the most frequent primary cancer in the female.¹⁵

According to Allen, approximately 70 per cent of all cancers of the female occur in the breast, the genital tract, or the digestive tract. In giving statistics concerning breast cancer, he states that for every

¹³Rosalie I. Peterson, "Knowledge of Cancer—Equipment for Nursing" The American Journal of Nursing, LIV, (April, 1954), p. 465

¹⁴Margaret F. Knapp, op. cit., p. 442

¹⁵George T. Pack and Irving M. Ariel, op. cit., p. 3

100 females developing cancer, from 20 to 26 of these will be of the breast.¹⁶

Many authors emphasize the need for women to help themselves to promote and retain their freedom from cancer of the breast. Societies, institutions and professions have tried to make available the means by which women can do so; but the important action must come from the woman herself. Nurses have a responsibility to their patients, the female population as a whole and to themselves to promote early detection and treatment of breast cancer.

BASIS FOR HYPOTHESIS

In a class composed of graduate students in nursing the question was asked, "How many of you have a yearly physical?" A showing of hands indicated that approximately one-half of the class followed this practice. Does this response mean that nurses do not believe in or practice the health saving measures they are teaching to the public? If this is the response of nurses to one health concept, will it hold true for the practice of monthly self examination of the breasts which is another teaching that is being emphasized?

STATEMENT OF HYPOTHESIS

Graduate students in nursing do not practice the health concept of monthly self examination of the breasts.

¹⁶J. Garrot Allen et al., Surgery Principles and Practice (Philadelphia: J. B. Lippincott Co., 1957), p. 505

CHAPTER III

METHODOLOGY

Selection and Description of Sample

Eighty graduate students enrolled in the Boston University School of Nursing participated in the study. There were seventy-nine female students and one male student.

These students were preparing for positions in teaching, supervision or administration.

The Boston University School of Nursing was selected because of its willingness to participate in the study, the size of the sample which could be obtained and the accessability of the participants to the writer.

Tool Used to Procure Data

A questionnaire was developed which would provide the answers to the following questions:

1. What per cent of the graduate student population at the Boston University School of Nursing practice monthly self examination of the breasts?
2. If self examination of the breasts is not practiced, what is the nurse's rationale underlying this behavior?
3. Do graduate students feel that nursing students should be taught to practice monthly self examination of the breasts as part of their overall health program?

There were eight questions which required a simple Yes-No answer and five which required a brief statement of answer. There was also space for any comments that the respondent might wish to add. The

questionnaire was not pre-tested before it was submitted to the study group. A copy of the questionnaire will be found in Appendix A.

Procurement of Data

Permission to use the Boston University School of Nursing was obtained from the Assistant Dean of the School.

Since all graduate students are required to take a course in methods of research, an appointment was made with the two faculty members who conduct the sectioned classes of the course. The study was explained to them, and they agreed to allow the ten minutes necessary for the students to participate in the study. They also agreed to distribute and collect the instrument. The completed questionnaires were obtained from them following their respective classes.

The data for the study was collected in December, 1961.

CHAPTER IV

Presentation, Analysis and Discussion of Data

This chapter is devoted to the presentation, analysis and discussion of the data obtained from the responses to the questionnaire developed for the study.

In treating the data, no effort was made to identify the respondent. It was felt that this was not as pertinent to the study as the fact that the respondent would be returning to/or entering into a position of leadership in nursing following completion of studies. It is because she will be entering a position in administration, supervision or teaching that an inventory of her attitude toward the practice, role and value of health concepts, such as self examination of the breasts was made.

Table 1 indicates the type of replies given by the eighty respondents to the eight questions requiring a Yes-No answer. In response to Question 1, there were 15 students who indicated that they do a monthly self examination of the breasts and 64 students who indicated they do not do a monthly self examination. The numbers represent 19 per cent and 80 per cent of the group respectively. It must be pointed out here, however, that the student who did not respond to this item was a male nurse. Although he left this answer blank, he did fill in some of the other answers which pertained to patient teaching.

TABLE 1
NUMBER AND PER CENT OF REPLIES TO QUESTIONS 1, 4-10

Question	Yes		No		No Response	
	Number	Per Cent	Number	Per Cent	Number	Per Cent
1. Do you practice monthly self examination of the breasts	15	19	64	80	1	1
4. Do you occasionally do a self examination?	50	78	12	19	2	3
5. Do you feel that a monthly self examination is something every woman should do?	69	86	11	14	0	0
6. Do you feel it is the nurses' responsibility to teach patients to do a self examination?	70	88	7	9	3	3
7. Have you ever had any woman ask you how to do a self examination?	31	39	48	60	1	1
8. Do you feel this is something that should be taught to every female who is admitted to the hospital?	50	63	29	36	1	1
9. Is this procedure routinely taught to all female patients admitted to the hospital where you were last employed?	1	1	78	98	1	1
10. Do you feel that nursing students should be taught to do a monthly self examination as part of their overall health program?	69	86	9	12	2	2

Although only 15 (19 per cent) of the nurses did a monthly self examination of the breasts, 69 (86 per cent) indicated that this is something that every woman should do.

Another gross inconsistency existed between the responses to Questions 1 and 10. While only 15 (19 per cent) practiced monthly self examination of the breasts, 69 (86 per cent) felt that it should be taught to nursing students as part of their overall health program.

Of the 64 students who indicated that they did not do a monthly self examination, 12 indicated that they did not do even an occasional examination and 2 respondents omitted the answer to Question 4.

Only 19 respondents answered the questions which asked for the length of time self examination of the breasts has been practiced and the age at which it was started. Table 2 shows the length of time practiced and the age at which it was begun.

TABLE 2

NUMBER OF YEARS SELF EXAMINATION OF THE BREASTS WAS PRACTICED
AND AGE AT WHICH PRACTICE WAS STARTED

Years Practiced	Age at Which Practice was Started					Not Specified
	15-19	20-24	25-29	30-34	35-39	
One			1			
Two	1		1			
Three		1	1			1
Four	1				2	
Five	2	2		1	1	
Six	1					
Ten				1		
Twenty	1					
Several					1	

Table 3 shows the frequency of occasional self examination of the breasts as done by 43 respondents. The intervals between examinations varied from every three weeks to five years. Five of the respondents indicated that they did a self examination of the breasts irregularly or didn't know approximately how often they practiced the procedure.

TABLE 3
APPROXIMATE TIME AT WHICH RESPONDENTS WHO DID AN OCCASIONAL
SELF EXAMINATION OF THE BREASTS PRACTICED THE PROCEDURE

<u>Approximate Times</u>	<u>Number</u>
Three weeks	1
One to two months	5
Two to three months	9
Three to four months	13
Four to five months	2
Five to six months	0
Six to seven months	6
Eleven to twelve months	1
Once or twice in five years	1
Irregularly	4
Don't know	<u>1</u>
Total	43

A total of 67 students responded to Question 11 which asked for the proper time to do a self examination of the breasts. These responses are shown in Table 4.

TABLE 4

PROPER TIME TO DO A SELF EXAMINATION OF THE BREASTS
AS INDICATED BY 67 RESPONDENTS

<u>Proper Time</u>	<u>Number</u>
After the Menstrual cycle	35
At bed time	7
Between menstrual periods	6
Don't know	5
Same time every month	3
During the menstrual period	2
Bath time	2
No specific time	2
Before menstrual periods	1
Puberty, Age 14	1
When alone and relaxed	1
Any time except 1 week before or 1 week after the menstrual period	1
In the morning in front of a mirror providing the menstrual period has stopped	<u>1</u>
Total	67

The above data indicated that only 35 (44 per cent) of the graduate students were aware of the proper time to do a self examination of the breasts. Since 88 per cent believed that it was the nurse's responsibility to teach self examination of the breasts and only 44 per cent knew when to do a self examination of the breasts, there was indication that nurses needed education in this area.

Question 12 which sought to find the rationale underlying the reasons for not doing a monthly self examination of the breasts brought the following responses:

TABLE 5
REASONS GIVEN FOR NOT DOING A MONTHLY SELF EXAMINATION
OF THE BREASTS BY 61 RESPONDENTS

<u>Reasons</u>	<u>Number</u>
None	16
Forget	13
Don't feel a monthly exam is necessary	9
Neglect	5
Laziness	4
Lack of Motivation	2
Anxiety producing	2
Yearly check-up	2
Age	2
Don't anticipate that much change in a month	1
Couldn't distinguish a lump	1
Denial of possible cancer lesion	1
Indifference	1
Never developed the habit	1
Not done unless some "problem" is found while bathing.	<u>1</u>
	Total 61

One of the respondents who stated her lack of action was due to the fact that self examination of the breasts was anxiety producing stated: "If one concentrates on this aspect (a lump) the reality might appear."

Another respondent who gave age as her reason for not feeling that she needed to do a monthly self examination of the breasts stated, "I don't feel I am in the age group to start worrying." The same person, however, listed as one of the factors that influenced her doing an occasional self examination of the breasts was, "My mother had a radical mastectomy for Ca."

Forty six respondents answered Question 13 which asked for the most influencing factor that promoted doing a self examination of the breasts. The following factors were given:

TABLE 6

FACTORS GIVEN WHICH INFLUENCED DOING A SELF EXAMINATION
OF THE BREASTS BY 46 RESPONDENTS

<u>Influential Factor</u>	<u>Number</u>
Nursing education or training	8
Breast tumor or some breast condition	4
Increased number of cancer patients	4
Movie on breast cancer and self examination	4
Physical exam - including breast examination, don't feel monthly exam necessary	3
Contact with patients who have breast cancer	3
Don't do it	3
Death of a relative or a relative with the disease . .	2
Age	2
Teaching students	2
Pain or sensation in the breast	2
An excess of breast cancer and know that early detection means better prognosis	1
Advisability of early detection for improved prognosis	1
Monthly exam too frequent	1
Mirrors remind me	1
Complete knowledge of breast cancer, plus age	1
None	1
Medical importance	1
Recommended by physician	1
Working in cancer detection and cancer therapy clinic	<u>1</u>
Total	46

CHAPTER V

Summary, Conclusions and Recommendations

Summary

This study was done to determine graduate students' concepts of the health preservation measure of monthly self examination of the breasts.

Eighty graduate students at Boston University School of Nursing participated in the study. Data for the study was obtained from the responses to a questionnaire developed to answer the following questions:

1. What per cent of the graduate students at Boston University practice monthly self examination of the breasts?
2. If self examination of the breasts is not practiced, what is the nurse's rationale underlying this behavior?
3. Do graduate students feel that nursing students should be taught to do a monthly self examination of the breasts as part of their overall health program?

It was hypothesized that graduate students in nursing do not practice monthly self examination of the breasts.

The major findings of the study were:

1. Fifteen (19 per cent) of the graduate students practice monthly self examination of the breasts.
2. Thirty-five (44 per cent) knew the proper time to do a monthly self examination of the breasts.
3. Sixty-nine (86 per cent) felt that a monthly self examination of the breasts is a procedure that should be practiced by every woman.

4. Fifty (63 per cent) felt that the procedure should be taught to all female patients admitted to the hospital.
5. Sixty-nine (86 per cent) felt that self examination of the breasts should be taught to nursing students as part of their overall health program.
6. Seventy (88 per cent) felt that it is the nurses' responsibility to teach patients to do a monthly self examination of the breasts.

Conclusions

1. Fifteen of the eighty graduate students who participated in the study did a monthly self examination of the breasts.
2. Nurses teach health preservation concepts to patients that they apparently do not believe in or practice themselves.
3. Although 19 per cent of the group practiced monthly self examination of the breast, 86 per cent felt that it should be taught to nursing students as part of their overall health program.
4. Since such a large percent (88) felt that it was the nurses' responsibility to teach patients how to do a monthly self examination of the breasts and only 44 per cent knew the proper time to do the procedure, there is need for education of nurses in this area.
5. The majority who did not practice monthly self examination of the breasts stated no reason, some forgot, and others felt that it was not necessary to do this practice monthly.

Recommendations

1. That a similar study be made with registered nurses in hospitals to determine if these nurses who are in proximity to patients have the same concepts as the graduate students in regard to monthly self examination of the breasts.
2. That a similar study be made with the faculty at the University to determine what concepts are held by them in regard to monthly self examination of the breasts.
3. That similar studies be made with graduate students in other universities to determine if the findings are similar.
4. That a study, using the same hypothesis, be made using another tool or methods for obtaining data.

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APPENDIX A

QUESTIONNAIRE

The following questionnaire has been developed to obtain data to be used in a Master's Thesis. Would you please complete it and return it to the person administering it.

Just place an (x) in the blank space provided to signify your answer to the Yes-No questions, and a brief statement to answer the remaining questions. At the end of the questions there is an area marked COMMENTS; please feel free to make any comments you have regarding the subject.

THANK YOU

1. Do you practice monthly self examination of the breasts? Yes _____ No _____
2. How long have you been following this practice _____
3. At what age did you start doing a self examination? _____
4. Do you occasionally do a self examination? Yes _____ No _____
Approximately how often? _____
5. Do you feel that the practice of monthly self examination is something every woman should do? Yes _____ No _____
6. Do you feel that it is the nurse's responsibility to teach patients how to do a self examination? Yes _____ No _____
7. Have you ever had any women ask you how to do a self examination? Yes _____ No _____
8. Do you feel this is something that should be routinely taught to every female patient who is admitted to the hospital? Yes _____ No _____
9. Is this procedure routinely taught to all female patients admitted to the hospital where you were last employed? Yes _____ No _____
10. Do you feel that nursing students should be taught to do a monthly self examination as part of their over-all health program? Yes _____ No _____
11. When is the proper time to do a self examination of the breasts?
12. If you do not do a monthly self examination, is there a particular reason for this lack of action?
13. What has (have) been the most important factor(s) that has (have) influenced your doing a monthly self examination?

COMMENTS: