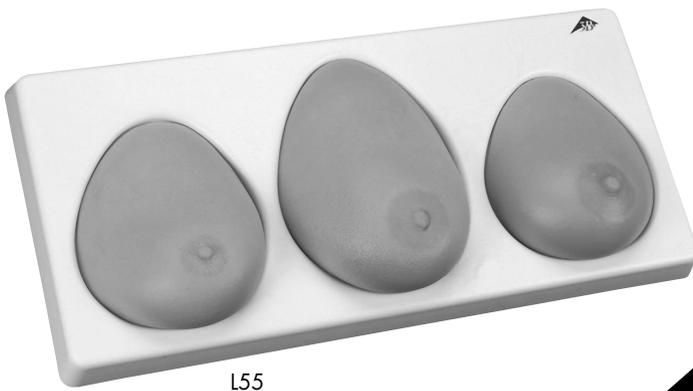
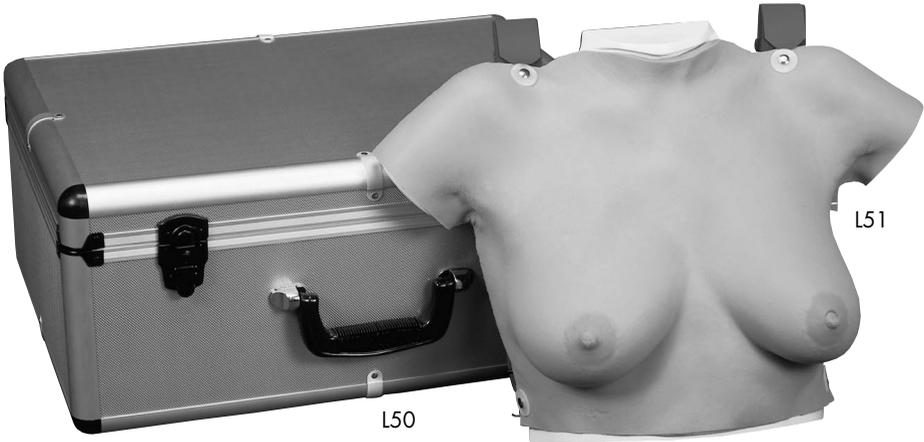


L50, L51, L55



L50, L51

English

You have chosen a Breast Examination Model made of 3B SKINlike™ material. This material is a dermatologically tested silicone with an especially realistic feel reproducing even fine skin structures accurately in every detail.

If you follow these tips for care and handling you will be able to work with your 3B Scientific® Breast Examination Model for a long time.

Light soiling can be removed with a mild soap solution. Please use no detergents containing solvents, as these could damage the material. Sharp or pointed objects (e.g. syringes) will damage the model surface. For a softer feel of the skin apply some talcum powder from time to time.

Strap-Around Breast Examination Model with Carrying Case (L50)

Strap-Around Breast Examination Model (L51)

This model shows the cast from an original female chest with a middle sized breast.

To demonstrate the breast examination of a woman in a reclining position, place the model on the supplied base (the carrying straps can be fastened underneath the base).

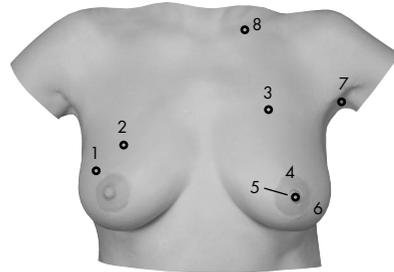
The strap-around mechanism also allows studying and practicing breast examination in an upright position or as self-examination. Strapping around the Breast Examination Model is done easiest with the assistance of another person. The carrying straps are crossed behind the back, threaded through the white clips at the bottom side of the model and secured with the Velcro fastening.

After usage, store the model while it is resting on the base. Please do not compress, roll or fold up the model. Please also avoid violently pulling or tearing the straps.

The Strap-Around Breast Examination Model illustrates the following anomalies:

1. Right breast: round, movable tumor at a depth of 10 mm, 20 mm in diameter, presumably benign.
2. Right breast: round, movable tumor at a depth of 5 mm, 20 mm in diameter, presumably benign.
3. Left breast: irregular tumor at a depth of 5 mm, adhering to the chest wall, diameter of approx. 35 x 25 mm, presumably malign.
4. Column-shaped, irregular tumor at a depth of 5 mm, adhering to the chest wall, approx. 30 mm in diameter, malign.
5. Left breast: permanently inverted nipple (recently occurred), frequently in combination with a malign tumor.
6. Left breast: "orange-peel skin", skin structure as in an orange peel with pore retraction through lymphostasis (blocked lymph ducts) caused by malign tumors.
7. Left armpit: irregular, firmly adhering lymph node at a depth of 10 mm, diameter approx. 35 x 25 mm, presumably malign.
8. Above left clavicle: Malign tumor at a depth of 5 mm, 20 mm in diameter.

It is essential to consult your gynecologist about all of the described anomalies! Only an expert can determine the cause of any changes and decide on further action.



English

L55

Three Single Breasts in Base (L55)

This model shows the cast from three original different female breasts (middle sized breast and large breast). The individual breasts are supplied with a base for storage. The breasts are marked with the numbers "1", "2" and "3" at the bottom so that they can be assigned to the base and the drawing. The three single breasts illustrate the following changes:

Model 1 (Left breast)

1. Round, movable tumor at a depth of 10 mm, 20 mm in diameter, presumably benign.
2. Round, movable tumor at a depth of 10 mm, 20 mm in diameter, presumably benign.

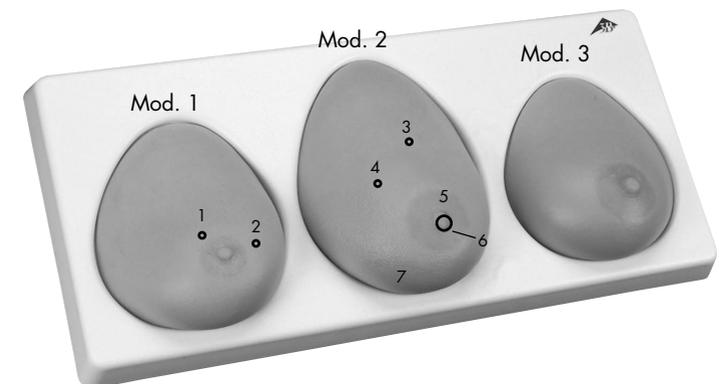
Model 2 (Left breast)

3. Irregular tumor adhering to the chest wall at a depth of 15 mm, approx. 15 mm in diameter, presumably malign.
4. Irregular tumor adhering to the chest wall at a depth of 15 mm, approx. 20 mm in diameter, presumably malign.
5. Column-shaped, irregular tumor at a depth of 10mm, adhering to the chest wall, approx. 30 mm in diameter, malign.
6. Permanently inverted nipple (recently occurred), frequently in combination with a malign tumor
7. "Orange-peel skin", skin structure as in an orange peel with pore retraction through lymphostasis (blocked lymph ducts) caused by malign tumors.

Model 3 (Right breast)

Healthy

It is essential to consult your gynecologist about all of the described anomalies! Only an expert can determine the cause of any changes and decide on further action.



Self Examination of the Female Breast

How to begin

Step in front of a large mirror with the upper body unclothed and relax. Direct your attention to your breast with your arms relaxed at your sides. Slowly turn in both directions to examine your chest from a diagonal perspective and from the side. Also bend down. Is there anything unusual? Upon taking a closer look you might find differences in shape, size or position of both breasts: they are usually not exactly symmetrical. In the course of the monthly examinations you should become so familiar with the look of your breasts that you will immediately notice any changes and anomalies.

What to look for

Now place your hands on your hips and look at yourself from the front again and then turn to both sides. Are there changes in comparison to the previous month regarding shape and position of your breasts? Have their size or look changed? Compare both sides! Are there any retractions or protrusions of the skin? Watch out for any redness or discoloration. Are there any fine skin protruberances ("orange skin")? Do not forget the area of the fold below your breast. If you notice any of the described or other changes which persist throughout the menstrual cycle please consult your gynecologist.

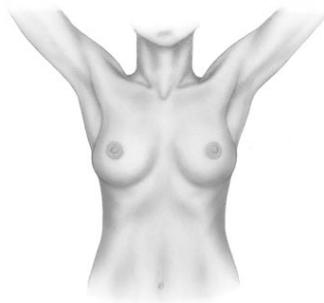
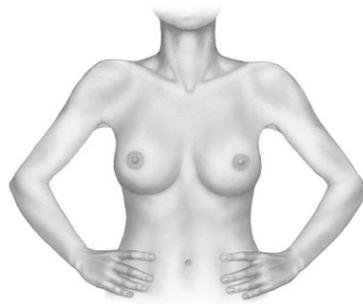
Examination

Slowly lift up your arms several times and clasp your hands behind the neck: Do both breasts follow the upward movements of your arms in a regular way or does one of the breasts not follow these movements as usual? Can the breast tissue be easily shifted against the chest wall? Please check for any changes of your nipples and their areolae: has any redness or inversion occurred recently? Are both nipples approximately at the same height? Carefully check that no liquid can be squeezed out of the nipple.

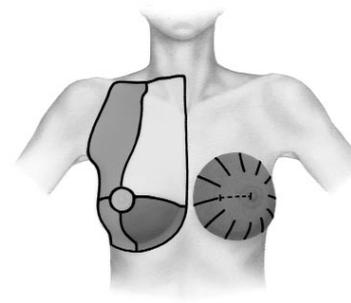
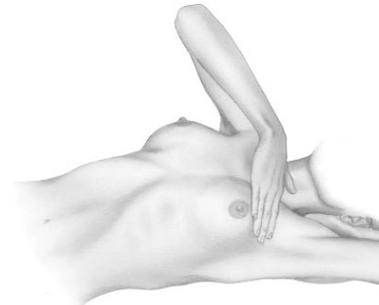
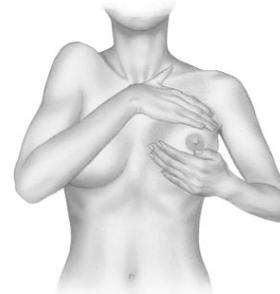
Palpation in Upright Position

Begin with the self-examination of your breast while you are standing. You can also examine your breast in the shower or after applying oil to the skin. You can practice your examination skills! With your pointer, middle and ring fingers of one hand together, place the fingertips flatly onto the skin of the breast on the other side. First perform palpation of the tissue with slight, then increa-

English



English



Self Examination of the Female Breast

sing pressure against the chest wall or the palm of your other hand. In this way you can feel the layers both at the surface and at greater depth. Also repeat the examination while lifting up the elbow, placing the hand in the neck.

Also check the armpits for lumps or hardness, first while the arm is hanging down loosely, then while lifting it up. By the way, disorders which do not concern the breast can also cause swelling of the lymph nodes in the armpit. Consult your doctor on any new lumps, especially if they cause no pain.

Palpation in Reclined Position

For a thorough examination lie down in a comfortable position on your back, with the head flat down. To examine your left breast, lift up the left arm and place the hand behind the neck. If you have rather large breasts, turn to the right side (perhaps with drawn up legs) so that the left breast settles evenly on the chest wall. Now carefully examine the left breast and the indicated adjacent areas with the fingertips of the right hand. Then proceed with the other side. Systematically examine the marked area around the breast including the pit above the collarbone for lumps or changes. In the area between the armpit and the breast there are frequently benign changes of the tissue. However, since carcinomas are most likely to occur in this region, it is especially important: Show any recent changes to your gynecologist.

Systematic Procedure

A thorough examination of your breast should include the entire marked region: from the breastbone as middle line towards the sides to include the armpits, from the armpits down to below the fold of the breast and up to the pit above the collarbone. Develop a system that won't miss any of these regions and that you follow in each self-examination. You can proceed in any of the following ways:

- Star-shaped, proceeding from the edges of the breast region towards the middle. Then examine the area behind the nipple.
- Proceeding in parallel lines, moving upwards and downwards.
- Proceeding in a spiral form, starting with the outer regions and moving towards the center of the breast.

For orientation purposes when you wish to perform a thorough examination or re-examination of a specific region you can imagine that the breast is divided into quadrants or wedges as in a clock dial, adding the distance to the breast nipple.



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