



Breast care

Pearls to think about

Tips to reduce stress,
patient pain and anxiety.

There are so many ways to help a patient through a procedure. When it's easy, it's easy, and the right words and cooperation follow nearly automatically; when it's not easy, everything that can be misunderstood will be misunderstood.

With this in mind, we have selected a few observations from years of research and clinical experience in imaging and procedure suites that we thought may be helpful to share.¹

We hope these examples offer a moment for reflection on what may be helpful in your environment and what wording feels natural in your own style.

[Comfort Talk®](#) is an innovative, research-based, drug-free method for front line providers to reduce patient pain and anxiety from the waiting room to the exam table, while improving patient satisfaction, operational efficiency and staff resilience. Comfort Talk Level 1 Online Training is also available through [Siemens Healthineers Academy](#).²

Pearls to think about

Announcing stimuli

Many healthcare professionals believe that warning a patient about potentially painful stimuli with statements such as *“It won’t hurt that much”* or *“This will not be that bad”* is supportive and reassuring. A large clinical trial in the radiology procedure suite, however, showed that this type of wording significantly increased reported pain and anxiety.³

One option is to focus attention on a sensation instead—for example fullness, smoothing the skin, or, when giving an injection, offering choices such as *“warmth,” “coolness,”* or *“a gentle tingling.”*

During mammography screening, some teams trained in Comfort Talk® have used wording such as:

“I’m confident that if we work together, we’ll be able to make this a successful and comfortable examination. I can adjust the pressure slightly between the minimum needed and the ideal level. You can always let me know if it feels uncomfortable, and I’ll see what I can do to make it more comfortable for you.”

Patients in those teams reported significantly less pain than in teams not trained in Comfort Talk® techniques.

Encourage what you want

Were you just thinking about bananas? Probably not until they were mentioned.

Words tend to direct attention. Saying *“Don’t move”* may unintentionally focus attention on movement.

An alternative is encouragement: acknowledging the helpful behavior you want and why it matters.

For example:

“Thank you for holding still—that helps get clear images.”

Make noise your helper

Stimuli can sometimes become part of helping the patient.

When doing a breast biopsy with a biopsy instrument, you can click the biopsy instrument a few times out of sight of the patient and say:

“Each time you hear this sound, let it be a signal for the area we are working on to become even more numb.”

In MRI, some teams invite patients ***“to use the sounds of the machine to deepen their own experience”***, for example associating the rhythm of the sounds with a place they would rather be.

We have seen patients then imagine that they are at a rock concert, or at home listening to the comfortable and familiar clunk of the heating system, or at a football game with everyone cheering them on to win.

Offering options

In medical settings, patients can sometimes feel they have little control. Offering small, realistic choices may help restore a sense of participation and ease.

For example:

“Would you prefer we start with the right side or the left side?”

Pearls to think about

Mammogram interaction

Mammography often involves a fair amount of physical contact. Patients may not anticipate how vulnerable that can feel.⁴

For some, the examination may unintentionally bring up difficult memories or concerns related to privacy, body image, or prior experiences.

Simple communication can help create a sense of partnership.

For example:

“May I take a quick look under your breast to check for any moles or marks on the skin?”

If your patient is stressed

Simple suggestions can sometimes help patients settle.

Examples include:

***“With each breath in, take in strength.
With each breath out, think calm.”***

Or:

“Blow out any discomfort right through the skin.”

Or:

“Let go of whatever you would like to let go of.”

Additional techniques for tension diffusion and patient relaxation are taught in the Comfort Talk® program.

Why not test some of these suggestions in your environment and see what feels right for both you and your patient?

For more complete, evidence-based and clinically-validated training on expertly managing patient distress from arrival to exam, explore the [Comfort Talk® training options](#).

Comfort Talk Level 1 Online Training is also available through [Siemens Healthineers Academy](#).²

Please contact your local Siemens Healthineers organization for further details.

References

1 – Lang-Anderson EV, Laser E. *Patient Sedation Without Medication*. 2nd Edition, 2026

2 – Subscription required. Availability of subscription depends on country. Please contact your local Siemens Healthineers organization for further details.

3 – Lang EV, Hatzopoulos O, Koch T, et al. Can words hurt? Patient-provider interactions during invasive medical procedures. *Pain*. 2005;114:303–309.

4 – Farley, M., Minkoff, J. R., & Barkan, H. (2001). Breast Cancer Screening and Trauma History. *Women & Health*, 34(2), 15–27. https://doi.org/10.1300/J013v34n02_02

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