Breast cancer is the most common cancer in women and the second leading cause of cancer deaths for women in the United States (Ferrante, Chen, & Kim, 2008). In 2008, more than 1 million women underwent a breast diagnostic evaluation in the United States, with about 182,500 being diagnosed with cancer (American Cancer Society, 2009). Concern is increasing regarding the prolonged psychological impact of the uncertainty experienced while undergoing a diagnostic evaluation for breast disease. For women diagnosed with cancer, this experience is believed to influence treatment outcomes (Thorne, Harris, Hislop, & Vestrup, 1999). In women with benign disease, an unfavorable psychological experience may result in behavioral changes persisting for years afterwards, including a reduction in the likelihood of additional screening compliance (Andrykowski et al., 2002; Barton et al., 2004; Brett, Austoker, & Ong, 1998; Haas, Kaplan, McMillan, & Esserman, 2001; Lampic, Thurfjell, Bergh, & Sjoden, 2001; Lowe, Balanda, Del Mar, & Hawes, 1999; Olsson, Armelius, Nordahl, Lenner, & Westman, 1999; Scott, 1983; Thorne et al.) or overuse of mammography services from a misperceived increased risk of breast cancer (Aro, Pilvikki Åbsetz, van Elderen, van der Ploeg, & van der Kamp, 2000; Thorne et al.). The purpose of this article is to present the state of the science of uncertainty in the context of women undergoing diagnostic evaluation for suspected breast cancer. This article includes a description and definition of uncertainty, presents a synthesis of quantitative and qualitative studies, a discussion of methodologic issues, and suggestions for additional research.

**Conceptual Dimension**

Uncertainty in illness is defined as the inability to determine the meaning of an illness-related event and occurs when an individual is unable to predict outcomes accurately (Mishel & Braden, 1988). This upsets the valued order of everyday life and threatens the sense of the taken-for-granted world by challenging the belief that an individual is healthy and forcing that person to confront the possibility of having a potentially life-threatening disease (Jordens, Little, Paul, & Sayers, 2001). Penrod (2007) stated that being in a state of uncertainty is disconcerting, expressed by varying degrees of accompanying fear, shock, powerlessness, anxiety, and uneasy sensations. Characterization of uncertainty comes from how an individual appraises and manages the illness-related event (Mishel, 1990). Appraising uncertainty is based on past experiences, personality dispositions, and the person’s interpretation concerning the severity of an illness and the potential impact of the illness on that person’s everyday way of life.

In her analysis of uncertainty, McCormick (2002) asserted that situations that elicit uncertainty occur