



BREAST IMAGING REFERRAL FORM *Please bring this form with you. We cannot perform any exam without it.*

Patient Name _____ DOB _____ Patient Phone _____

Referring Physician (Print) _____ Physician Phone _____

Physician Signature _____

CC: _____ Order Date _____

Medicare Patient? Yes No **If so, for Breast MRI include Appropriate Use Criteria/CDS: G10 -M**
GCode Modifier

Special Instructions

SCREENING BREAST IMAGING *(Routine screening exam; patient has no breast problems)*

Screening Mammogram

Left Right Bilateral w/Implants

3D/TOMO* Screening Mammogram

Proceed with Comprehensive Referral, if needed post screening: Checking box authorizes radiologist to schedule Diagnostic Mammogram, Ultrasound and/or Biopsy if indicated to streamline patient care.

Breast imaging does not include physical exam or consultation with physician unless warranted.

Bilateral Screening Whole Breast Ultrasound
(for those with dense breasts or family or personal history)

Complete Screening Ultrasound*

**May not be covered by insurance. Must be paid at time of service.*

OSTEOPOROSIS SCREENING

DXA - Bone Density

VERTEBRAL ASSESSMENT

Vertebral Fracture Assessment (VFA)

DIAGNOSTIC BREAST IMAGING

Comprehensive Diagnostic Referral: Checking this box authorizes any of the below breast-related studies to be performed without a separate order to streamline patient care.

Diagnostic Mammography Work-up

3D/Tomo Diagnostic Mammogram

Implants

Right Left Bilateral

Breast Ultrasound

Right Left Bilateral

Breast Biopsy Options:

Right Left Bilateral

Ultrasound Guided

Stereotactic Guided

MRI Guided *(HHIC-Fair Oaks only)*

Breast MRI with Gadolinium *(HHIC-Fair Oaks & Glendora only)*

Mark Clinical Indications for Diagnostic Imaging Only.

Mass/Lump

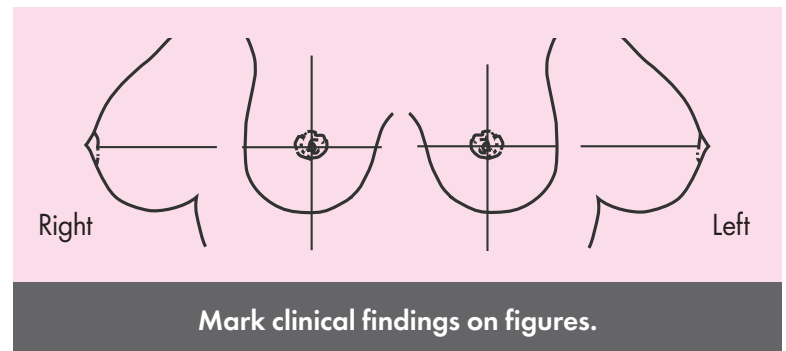
Discharge: (bloody/clear, spontaneous)

Previous Breast Carcinoma (within 2 years)

Skin or nipple findings

Focal pain or breast tenderness, unrelated to menses

Other: _____



ALL PATIENTS

We cannot perform any exam without a doctor's order or authorization.

You **MUST** bring your current insurance card and authorization with you to register at the time of your appointment **OR** you will be held financially responsible for the cost of the exam.

If you cannot keep your appointment, please call to let us know and to reschedule.

If your specific exam is not listed below, no special preparation is required.

Mammogram Patients

Please wear a two-piece outfit so that you can remove your top for the exam.

Do **NOT** wear any powder, deodorant, lotion or perfume under the breast or underarm area.

If you have had a previous mammogram at another facility, it is extremely important for you to bring those films with you when you come in for your appointment.

TODOS LOS PACIENTES

No podemos realizar ningún examen sin la orden o autorización de un médico.

DEBE traer su tarjeta de seguro actual y autorización para registrarse en el momento de su cita **O DEBERÁ** ser responsable financieramente por el costo del examen.

Si no puede asistir a su cita, llámenos para informarnos y reprogramarla.

Si su examen específico no figura a continuación, no se requiere preparación especial.

Pacientes con mamografía

Use un atuendo de dos piezas para que pueda quitarse la parte superior para el examen.

No use ningún polvo, desodorante, loción o perfume debajo del área de los senos o las axilas.

Si ha tenido una mamografía previa en otra instalación, es extremadamente importante que traiga esas películas cuando vaya a su cita.

所有病人

若無醫生指令或授權，我們不能執行任何檢查。

在您約定的檢查時間登記時，您必須攜帶身份證，有效的保險卡、保險批准書，否則您可能要自付檢查費用或重新安排檢查時間。

若您無法在約定時間前來進行檢查，請提前24小時致電通知我們並重新安排檢查時間。若您要接受的檢查不在下表範圍內，則無需特別準備。

接受乳房 X 光檢查的病人

請穿上兩件式服裝，便於您脫掉上衣接受檢查。

不要在乳房或腋下附近塗抹任何藥粉、除臭劑、乳液或香水。

若您之前曾在另一家機構做過乳房 X 光檢查，檢查時，您必須攜帶在另外機構做過的乳房 X 光檢查片一同前來，這非常重要。

	X-ray	Breast Imaging					
		Diagnostic				Screening	
	DXA	Diagnostic Mammography	Breast Ultrasound	Breast MRI	Breast Biopsy	2D Mammography	3D Mammography/ Tomosynthesis
Jim & Eleanor Randall Breast Center	●	●	●		●	●	●
HHBC - Arcadia		●	●			●	●
HHIC - Fair Oaks				●	●		
HHIC - Cordova						●	
HHIC - Glendora	●	●	●	●		●	
HHIC - West Covina	●					●	