



Patient's Name: _____ Date of Birth: _____ Patient's Phone: _____

Reason for Exam/ ICD10 Code: _____

Surgical/Navigational Protocol: _____

Referring Provider (Print): _____ Provider Signature: _____ Today's Date: _____

Phone: _____ Fax: _____ CC Report To: _____

Call in STAT results to: _____ Release CD with Patient

Insurance Plan: _____ Member ID#: _____

IMAGING SERVICES

3D Screening Digital Mammogram

(Breast Ultrasound if indicated)

- EBCD Recommended
- Asymptomatic
- Personal History of Breast Cancer
- Other _____

3D Diagnostic Mammogram

(Breast Ultrasound if indicated)

- Breast Ultrasound
 - Left Right Bilateral
- Contrast Enhanced Mammogram (CEM)
(Breast Ultrasound if indicated)
- History of Breast Cancer (within the last 2 years)
- Lump
- Focal Point of Pain
- Nipple Discharge
- Call Back from Screening
- Six Month Follow-Up
- Other _____

Ultrasound

- Screening Breast Ultrasound
- Pelvic Ultrasound (Transabdominal and Transvaginal)
- Pelvic Ultrasound Complete
(Transabdominal only)
- Pelvic Ultrasound (Transvaginal only)
- Other _____

Diagnostic Breast Ultrasound

*(Please indicate area of concern if applicable on diagram)

- Left Right Bilateral
- Palpable Lump
- Focal Point of Pain
- Mass seen on Mammogram
- Other _____

Breast MRI

- With and without contrast
(For high risk screening and tumor protocol)
- Without contrast
(Implant evaluation only)

If recommended proceed with: 3D Diagnostic Mammogram and/or Breast Ultrasound Breast Biopsy Breast MRI w/wo Contrast

Date of Last Mammogram: _____ Breast Implants

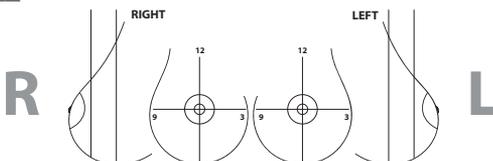
Procedures Left Right Bilateral

- Cyst Aspiration
- Ultrasound Guided Core Needle Breast Biopsy
- Stereotactic Core Needle Breast Biopsy
- MRI Guided Breast Biopsy
- CEM Stereotactic Core Needle Breast Biopsy
- Other _____

DEXA (Bone Density Scan)

Exam Findings/Special Instructions:

*LOCATION OF CONCERN MUST BE NOTED ON DIAGRAM



BREAST IMAGING SCHEDULING GUIDELINES

Preparation for Digital Mammogram Examination:

- No perfume, deodorant or body powder the day of the exam.
- Please bring any previous mammogram films and reports. (*if done at another facility*)
- Please wear two piece clothing.

Preparation for Breast Biopsy:

- No aspirin or "blood thinner" one week prior to biopsy.
- Please consult your physician prior to discontinuing medications.

NO PREP NEEDED FOR BREAST ULTRASOUND OR CYST ASPIRATION.

Preparation for DEXA Exam:

- Patients should not be scheduled within two weeks of any CT exam utilizing Barium, or any nuclear medicine exam.
- If possible, do not wear clothing with metal buttons or zippers.

LOCATIONS

Breastlink Women's Imaging Center
18133 Ventura Blvd., Ste. 200
Tarzana, CA 91356
P: (818) 784-8799
*Screening and Diagnostic Mammogram,
 3D Tomo, DEXA, Ultrasound, Ultrasound Guided
 Breast Biopsy and Stereotactic Breast Biopsy*

The Burbank Breast Care Center
2601 W. Alameda Ave., Ste. 101
Burbank, CA 91505
P: (818) 843-7462
*Screening and Diagnostic Mammogram, 3D Tomo,
 DEXA, Ultrasound, Ultrasound Guided Breast Biopsy
 and Stereotactic Breast Biopsy*

**Liberty Pacific Advanced Imaging
 Tarzana**
18133 Ventura Blvd., Ste. 100
Tarzana, CA 91356
P: (818) 933-2020
Breast MRI, MRI Guided Breast Biopsy

**Liberty Pacific Advanced Imaging
 Northridge**
18301 Roscoe Blvd.
Northridge, CA 91325
P: (818) 407-2643
*Screening and Diagnostic Mammogram,
 3D Tomo, DEXA, Ultrasound*

**Liberty Pacific Advanced Imaging
 Mission Hills**
11570 Indian Hills Rd.
Mission Hills, CA 91345
P: (818) 496-4681
2D Screening Mammogram, Ultrasound, X-Ray

**Liberty Pacific Advanced Imaging
 West Hills**
23115 Sherman Pl.
West Hills, CA 91307
P: (818) 251-9811
*Screening and Diagnostic Mammogram, 3D Tomo,
 Ultrasound, Ultrasound Guided Biopsy*

**Marcia Ray Breastlink Women's
 Imaging Center**
222 W. Eulalia St.
Glendale, CA 91204
P: (818) 502-2323
*Screening and Diagnostic Mammogram, 3D Tomo,
 Ultrasound, Ultrasound Guided Breast Biopsy and
 Stereotactic Breast Biopsy, DEXA*

Santa Clarita Imaging Center
25775 W. McBean Pkwy, Ste. 216
Valencia, CA 91355
P: (661) 255-7627
*Screening and Diagnostic Mammogram,
 3D Tomo, Ultrasound*