

<b>Priority</b> <input type="checkbox"/> <b>STAT</b> <input type="checkbox"/> Routine <input type="checkbox"/> Call Critical Result to: # _____	<b>Height</b> _____	<b>Diagnosis:</b> _____ <b>Signs/Symptoms:</b> _____ <b>Diagnosis codes:</b> _____ <b>Insurance Name:</b> _____ <b>Authorization #:</b> _____ <b>Expires:</b> _____ <input type="checkbox"/> No Authorization required, Determined by (Name): _____ <b>Previous Images:</b> <input type="checkbox"/> None Available <b>Location:</b> _____ <b>Phone:</b> _____ <b>Address:</b> _____
	<b>Weight</b> _____	

**Mammography (to include 3D Tomosynthesis):**

- Screening (no current signs/symptoms with *either breast*)  
 Diagnostic Mammogram with Ultrasound if diagnostically indicated  No Ultrasound this appointment

**Ultrasound:**

- Breast Ultrasound, Focal Exam, with Mammogram if diagnostically indicated  No mammogram this appointment

**MRI:**

- With/without IV Contrast - for new cancer diagnosis, recurrence, high risk screening, other  
 Without IV Contrast - for implant rupture  
 Orbit X-Rays (if history of eye injury with metal)

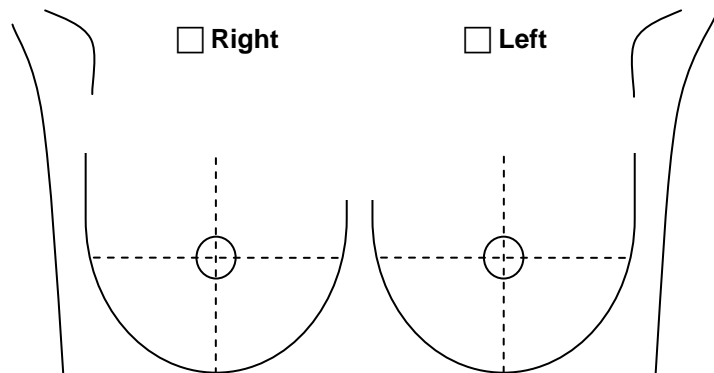
**Note:** Patients with history of kidney disease, diabetes, chemotherapy in the last week, recent serious illness or over age 60 must have a serum creatinine test within 30 days of appointment.

- Serum Creatinine (lab order) **OR** Recent Lab Results: Serum Creatinine: \_\_\_\_\_ Date: \_\_\_\_\_

**Procedures:**

- Biopsy – Ultrasound Guided  
 Biopsy – Stereotactic  
 Biopsy – MRI Guided  
 Cyst Aspiration with Subsequent Needle Biopsy if warranted  
 Ductogram

**Please indicate areas of concern:**



**Comments:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- Bone Density Central** (spine/femur) to evaluate fracture risk. Date of Last Exam: \_\_\_\_\_  
 **Bone Density Peripheral** (forearm); primary PTH, patients over 350# table limit, bilateral hip/spine hardware

**Provider Signature:** \_\_\_\_\_ **Provider Name:** \_\_\_\_\_  
(First Initial / Last Name / Title) Date / Time (Please Print)



**Mammography Orders**

DI17167 9/17/2015

**Fax this order to (360) 565-9001**  
**Scheduling: Call 565-9003**

**IR**  
**IE** Patient Name: \_\_\_\_\_  
**IQ** DOB: \_\_\_\_\_ Phone #: \_\_\_\_\_  
**U** CC: \_\_\_\_\_  
**I** Appointment Date/Time: \_\_\_\_\_  
**R**  
**E**  
**D**

## Patient Instructions

Thank you for choosing Olympic Medical Center for your diagnostic imaging needs.

- Please, no cell phones with you during the exam.
- Scheduled patients accompanied by children under the age of 12 and without another adult present, will need to reschedule their appointment.

## Additional Information

### Diagnostic Mammography Process and Options:

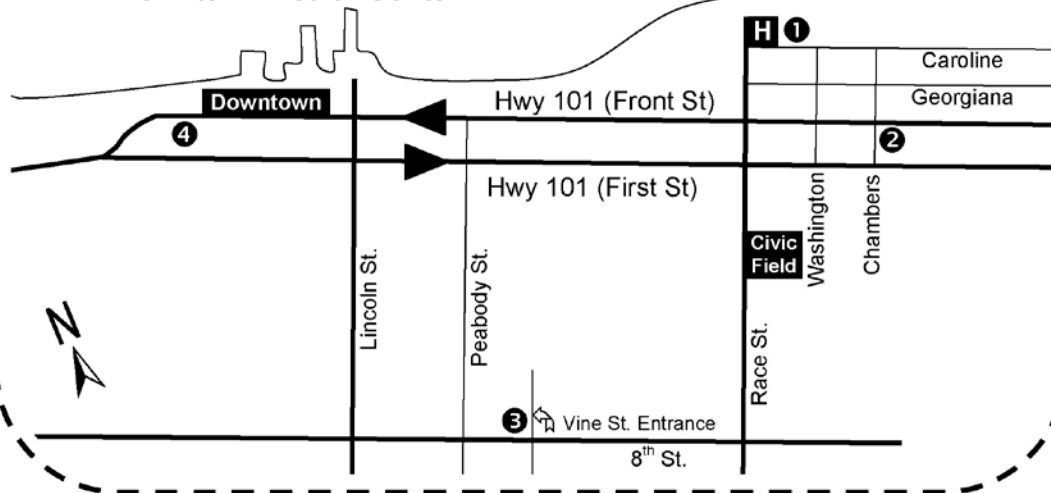
A series of tests may be needed in order to obtain a definitive diagnosis. The conditions or symptoms that prompt the need for a diagnostic mammogram are sometimes elusive and non-palpable (cannot be felt). In these cases, additional x-ray views and diagnostic studies are needed to reach a definitive diagnosis. The radiologist will recommend the tests that are right for you.

The options include:

- **Additional Views:** more x-ray views – specially focused cone compression views
- **Ultrasound:** pictures produced by sound waves tell if a lump is solid or fluid filled
- **Biopsy:** the removal of a tissue/fluid sample through a needle.
- **Aspiration:** the removal of fluid from a cyst through a needle.
- **Results:** diagnostic mammogram results will be sent to your provider who will communicate the results to the patient. If additional studies are recommended and desired, the provider and/or radiologist will consult with the patient and schedule the appointment(s) accordingly. The results from each test will be sent to the patient's provider who will communicate back to the patient.

### Port Angeles Diagnostic Imaging Locations

- 1 Olympic Memorial Hospital
- 2 Olympic Medical Imaging Center
- 3 Primary Care Clinic (8<sup>th</sup> & Vine)
- 4 Downtown Health Center



### Port Angeles

#### Screening Mammography & Bone Density

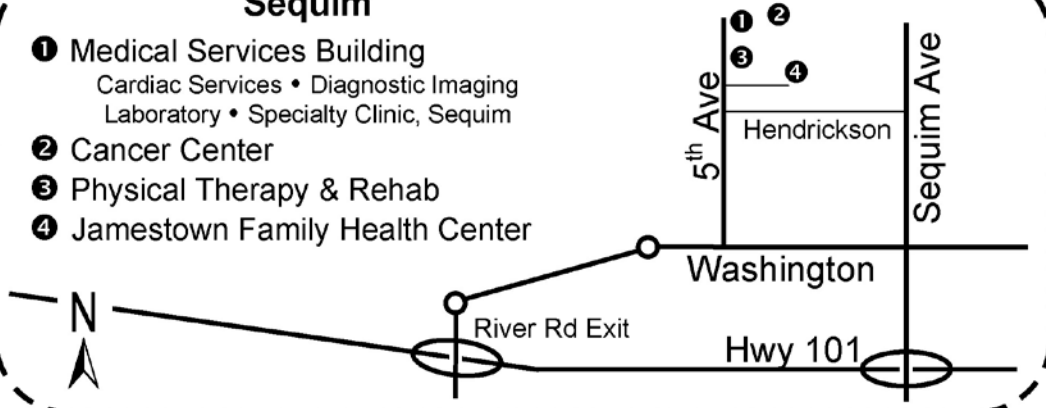
- Olympic Medical Imaging Center  
1102 E Front St.

#### Diagnostic Mammography

- Olympic Memorial Hospital  
939 Caroline St.

### Sequim

- 1 Medical Services Building  
Cardiac Services • Diagnostic Imaging Laboratory • Specialty Clinic, Sequim
- 2 Cancer Center
- 3 Physical Therapy & Rehab
- 4 Jamestown Family Health Center



### Sequim

#### Screening Mammography, Limited Diagnostic Mammography and Bone Density

- Medical Services Building  
840 N. 5th Ave., Suite 1100