

# WOMEN'S SERVICES SCHEDULING



**Radiology Ltd.**  
**Diagnostic Imaging Services**  
 Centralized Scheduling Tel: (520) 733-7226  
 Toll Free Tel: 1-866-565-2220  
 Toll Free Fax: 1-866-707-0750

**To schedule an appointment, please call (520) 733-7226 or fax to (520) 290-8377.**

PHYSICIAN'S NAME: \_\_\_\_\_ PHONE #: (\_\_\_\_) \_\_\_\_\_ FAX #: (\_\_\_\_) \_\_\_\_\_

If physician practices at multiple locations, please include address for these results to be sent: \_\_\_\_\_

PATIENT: (First Name) \_\_\_\_\_ (Last Name) \_\_\_\_\_ (Middle Initial) \_\_\_\_\_

DOB: \_\_\_\_\_ HOME PHONE: (\_\_\_\_) \_\_\_\_\_ WORK PHONE: (\_\_\_\_) \_\_\_\_\_ BEST TIME TO CONTACT: \_\_\_\_\_ AM PM

PATIENT INSURANCE: \_\_\_\_\_ POLICY/GROUP #: \_\_\_\_\_ INS. PHONE: (\_\_\_\_) \_\_\_\_\_

PRIOR AUTHORIZATION # (if needed): \_\_\_\_\_

**MAMMOGRAPHY**

**Please check appropriate box:**

- Screening Digital Mammography w/CAD\* (& Breast Ultrasound if clinically indicated)
- Screening Digital Mammography w/3D Tomosynthesis w/CAD\* (& Breast Ultrasound if clinically indicated) (Wilmot & La Cholla only)
- Adjunctive Imaging (for dense breasts) w/3D Tomosynthesis (& Breast Ultrasound if clinically indicated) (Wilmot & La Cholla only)

**The following exams are done at Wilmot & La Cholla only:**

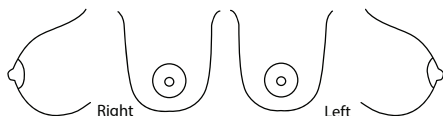
- Diagnostic Digital Mammography w/CAD (& Breast Ultrasound if clinically indicated)
- Diagnostic Digital Mammography w/3D Tomosynthesis w/CAD\* (& Breast Ultrasound if clinically indicated)
  - Breast Pain
  - Nipple Discharge / Inversion / Retraction or Thickening
  - Contusion to the Breast
  - Gynecomastia / Enlargement
  - 6 Months F/U  RT  LT
  - Breast Mass
  - Other: \_\_\_\_\_
- Breast Ultrasound

Date of last Mammogram: \_\_\_\_\_

Location of last Mammogram: \_\_\_\_\_

History / Indications: \_\_\_\_\_

**Please indicate area of concern:**



**PATIENT INSTRUCTIONS:** Please bring this prescription to your appointment. **Avoid** wearing deodorant, lotion, powder, or perfume. If you develop a problem before your appointment, you must contact your doctor and get a diagnostic order. Please call us to change your appointment to a diagnostic mammogram and bring the new order with you to your appointment.

*\*Radiology Ltd. recommends that screening mammograms be scheduled at least 366 days (1 year + 1 day) from date of last mammogram.*

**DEXA**

**Please check appropriate box:**

- DEXA
- DEXA w/Vertebral Fracture Assessment
- Vertebral Fracture Assessment Only
- Whole Body - Body Composition Assessment\*

Date of last DEXA: \_\_\_\_\_

Location of last DEXA: \_\_\_\_\_

History / Indications: \_\_\_\_\_

**Please check appropriate clinical indications:**

- Post Menopause
- Early Surgical Menopause
- Long-Term Current Use of Other Medication
- Long-Term Current Use of Steroid Treatment
- Vertebral Abnormalities
- Follow-up Treatment for Prevention / Monitoring of Osteoporosis

**PATIENT INSTRUCTIONS:** Please bring this prescription to your appointment. **Avoid** taking vitamins, minerals, and calcium supplements on the day of your Bone Densitometry (DEXA) exam.

*\*This exam may not be covered by most insurance plans.*

**Notes:**

**Referring Physician's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_