

# BREAST IMAGING ORDER FORM

## SCHEDULING

See specific market

P: 855.643.7226

E: PSScheduling@RAYUSradiology.com

## INSURANCE SPECIALIST LINE

P: 425.250.1160

## MEDICAL RECORDS FAX LINE

P: 425.251.4307

- Patient will call to schedule
- Call patient to schedule



- Auburn - Breast Imaging P: 253.735.1991 F: 253.735.8837
- Bellevue - Breast MRI only P: 425.637.9729 F: 425.462.8309
- Bellevue - Breast Imaging P: 425.974.1044 F: 425.974.1033
- Bremerton P: 360.598.3141 F: 360.598.3431
- Federal Way - Breast MRI only P: 253.942.7226 F: 253.942.3517

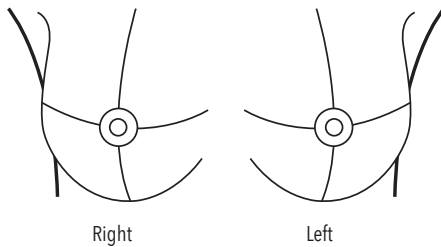
- Federal Way - Breast Imaging P: 253.735.1991 F: 253.941.6941
- Port Orchard P: 360.598.3141 F: 360.598.3431
- Poulsbo P: 360.598.3141 F: 360.598.3431
- Puyallup P: 253.286.2092 F: 253.848.2161

Appointment date and time		Check-in time	Patient DOB	<input type="radio"/> M <input type="radio"/> F
Patient name (as shown on insurance card)		Primary phone #	Secondary phone #	
Insurance name	Insurance ID #	Authorization #	Authorization insurance phone #	
<b>(REQUIRED) Written diagnosis/reason/symptom for exam(s).</b> Must include <b>specific</b> clinical indications (such as location, context and severity) to support medical necessity for each test.			<b>Clinical Decision Support (CDS)</b>	
			<b>Required for Medicare Part B</b>	
			Modifier (determination)	G-code (vendor)

## EXAMINATION REQUESTED

- Screening mammogram (with computer-aided detection and 3D tomosynthesis)  
*There are no patient or physician concerns; proceed with diagnostic evaluation if abnormality is found.*
- Diagnostic breast evaluation to include mammography, physical exam, breast ultrasound, FNA, cyst aspiration, MRI and/or core biopsy as clinically indicated.
- Breast MRI (bilateral) - Bellevue, Federal Way and Poulsbo locations  
*For high-risk surveillance*
- Bone densitometry (DXA Scanning) - Auburn, Bremerton, Federal Way-Breast Imaging, Port Orchard and Poulsbo locations
  - Vertebral fracture assessment (VFA)
- Other \_\_\_\_\_

## LOCATION OF CONCERN



Distance from the nipple \_\_\_\_\_ cm  
Size \_\_\_\_\_ cm

<b>Where was the previous mammogram performed?</b> _____		<b>When?</b> _____	
<b>Does the patient have breast implants?</b> <input type="radio"/> No <input type="radio"/> Yes			
<b>Patient considerations (check all that apply)</b>			
<input type="radio"/> Allergies to contrast agents			
<input type="radio"/> Interpreter needed (language) _____			
<input type="radio"/> History of dense breasts			
<input type="radio"/> Other _____			
<b>REPORTING METHOD</b>			
<input type="radio"/> Routine		<input type="radio"/> Read and call _____	
<input type="radio"/> Hold and call _____		<input type="radio"/> STAT/ASAP	
		<input type="radio"/> Patient to hand carry films/CD/report	
		<input type="radio"/> Next-day follow-up	
Provider name (print)	Provider location	Phone #	
	<b>City/Zip</b>		
<b>Provider signature (required)</b>	<b>NPI # (required for new providers)</b>	Date	
<b>Do not use rubber stamp.</b>			

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**PATIENT PREPARATION**

*No children under 12 allowed in the waiting room unless accompanied by another adult.*

**MAMMOGRAM**

Do not use talcum powder or underarm deodorant the day of your exam, as this can interfere with the detection of calcifications. Please wear a two-piece outfit.

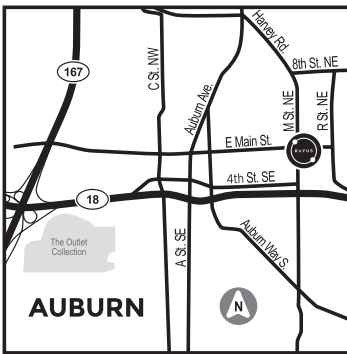
**BREAST BIOPSY**

Discontinue use of aspirin, or other mild blood thinners, five days prior to the biopsy. If you take Coumadin, Plavix or other more potent blood thinners, you must first consult your physician to make sure it's safe to stop that medicine in advance. Please wear a two-piece outfit.

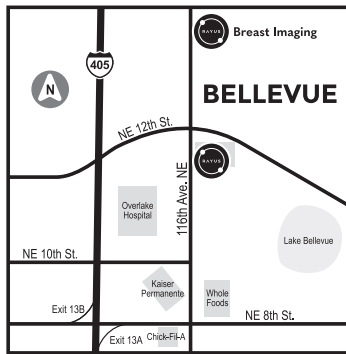
**BONE DENSITOMETRY**

No calcium supplements 24 hours prior to exam. Wear an outfit with no metal buttons around waist.

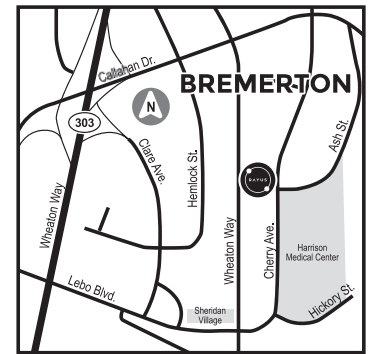
Visit [RAYUSradiology.com](http://RAYUSradiology.com) for detailed driving directions to our centers. Call us at 855.643.7226.



**AUBURN - BREAST IMAGING**  
1268 E. Main St., Suite 1  
Auburn, WA 98002

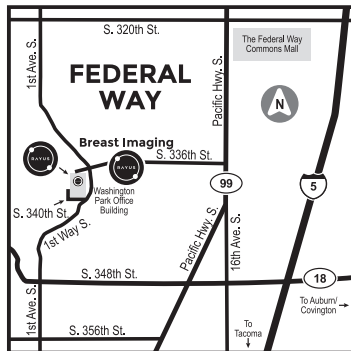


**BELLEVUE**  
1310 116th Ave. NE, Suite E  
Bellevue, WA 98004



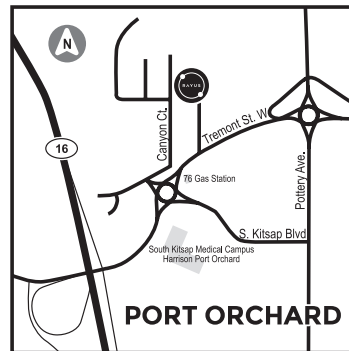
**BREMERTON**  
2601 Cherry Ave., Suite 105  
Bremerton, WA 98310

**BELLEVUE - BREAST IMAGING**  
1810 116th Ave. NE, Suite 101  
Bellevue, WA 98004

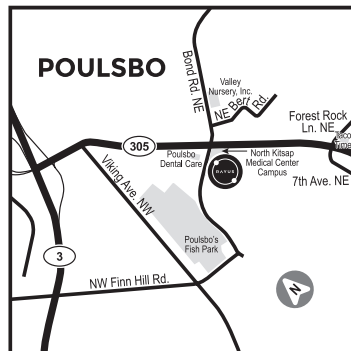


**FEDERAL WAY**  
33801 First Way S., Suite 101  
Federal Way, WA 98003

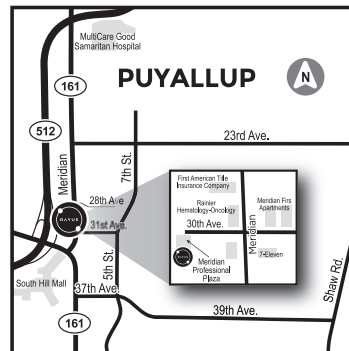
**FEDERAL WAY - BREAST IMAGING**  
909 S. 336th St., Suite B101  
Federal Way, WA 98003



**PORT ORCHARD**  
463 Tremont St. W., Suite 130  
Port Orchard, WA 98366



**POULSBO**  
North Kitsap Medical Center  
20700 Bond Rd. NE, Bldg. B  
Poulsbo, WA 98370



**PUYALLUP**  
2930 S. Meridian, Suite 160  
Puyallup, WA 98373