



Diagnostic Breast Imaging Order Form

Central Scheduling:

(T) 651.632.5700

(F) 651.632.5701

Appointment Date:

☐ Call Patient to schedule

Exam Time:

Insurance Authorization #

☐ SPR to Request

PATIENT LABEL HERE

Providing digital mammography services at outpatient imaging centers

Patient Information

PATIENT NAME	DATE OF BIRTH	ID/MRN
CELL PHONE	HOME PHONE	WORK PHONE
INSURANCE COMPANY	POLICY #/GROUP	
CLINICAL HISTORY		
DIAGNOSIS/ORDER		
PREVIOUS FILMS?	RESULTS CHECK ALL THAT APPLY <input type="checkbox"/> Films <input type="checkbox"/> CD <input type="checkbox"/> Read & Call <input type="checkbox"/> Patient to Hand Carry	MRI SAFE?

Physician Information

REFERRING PHYSICIAN	OFFICE PHONE	OFFICE FAX
PHYSICIAN SIGNATURE (REQUIRED)	PRACTICE NAME/CLINIC	
NATIONAL PHYSICIAN ID #	SPECIAL INSTRUCTIONS	
INSTRUCTIONS / NOTES		

Clinical Examination Details

☐ DIAGNOSTIC MAMMOGRAM OR POSSIBLE US OR BIOPSY

LEFT RIGHT BILATERAL

☐ ULTRASOUND OR POSSIBLE DIAGNOSTIC MAMMO OR BIOPSY

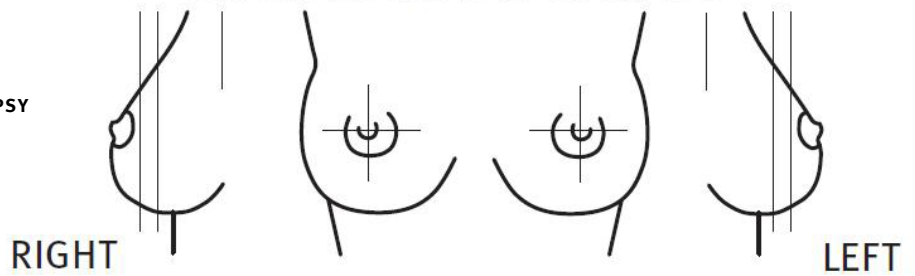
LEFT RIGHT BILATERAL

☐ ULTRASOUND GUIDED CYST ASPIRATION OR CORE BIOPSY

LEFT RIGHT BILATERAL

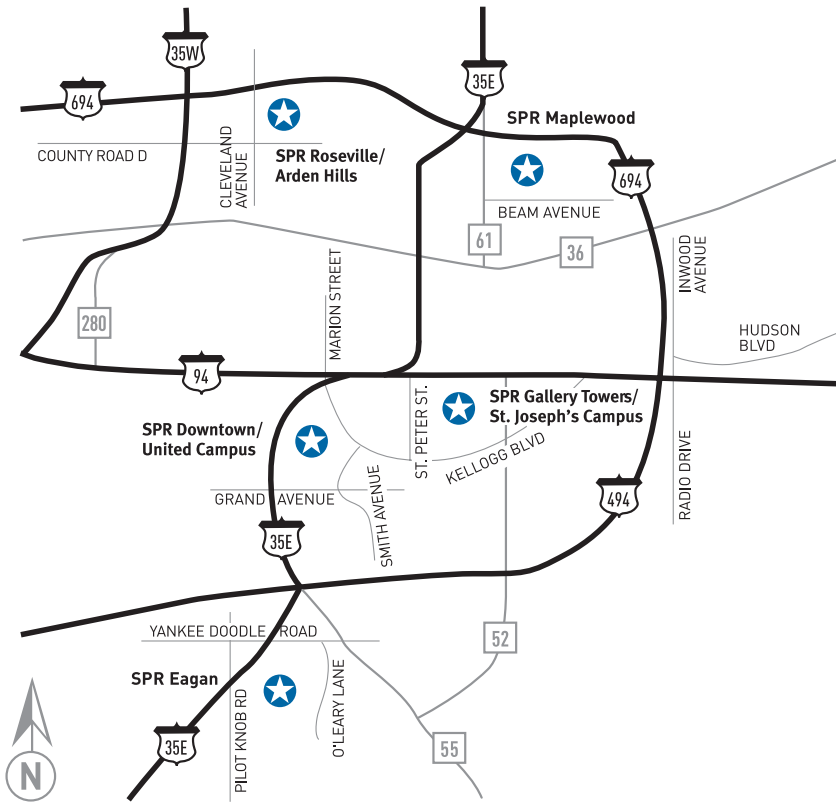
☐ BREAST MRI

SHOW LOCATION OF MASS

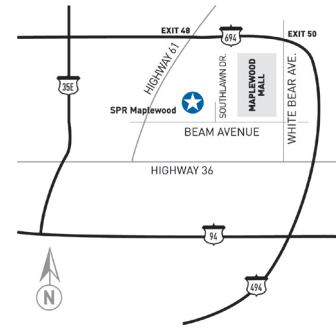


SIZE OF MOST IMPORTANT MASS (CM)	RIGHT	CM
	LEFT	CM

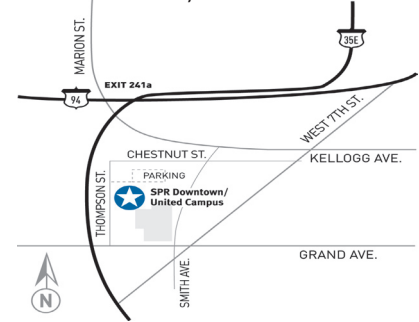
St. Paul Radiology Locations



Breast MRI Locations



SPR-Downtown/United Campus
250 Thompson Street
St. Paul, MN 55102



SPR-Maplewood
1723-A Beam Avenue
Maplewood, MN 55109

	Downtown	Eagan	Gallery Towers	Maplewood	Roseville
Clinic Hours:	7am-10pm	7am-7pm	7am-10pm	7am-10pm	7am-10pm
Sat Hours:	8am-3pm	Closed	Closed	Closed	7am-7pm
MRI					
Open MRI					
CT					
Ultrasound					
PET/CT					
Bone Density					
Mammography					
Pain Mgmt					
Health Scan					
Sedation					
Interventional					
X-Ray					

SCHEDULING

(T) 651.632.5700

(F) 651.632.5701

stpaulradiology.com

MAIN OFFICE

166 4th Street East
St. Paul, MN 55101-1421

ADMINISTRATION

(T) 651.292.2000
(F) 651.292.2192

BILLING

(T) 651.767.1400
(F) 651.297.6499

MEDICAL RECORDS

(T) 651.602.7220
(F) 651.292.2193