

BREAST MRI

Diagnostic Breast Imaging Order Form

PATIENT LABEL HERE

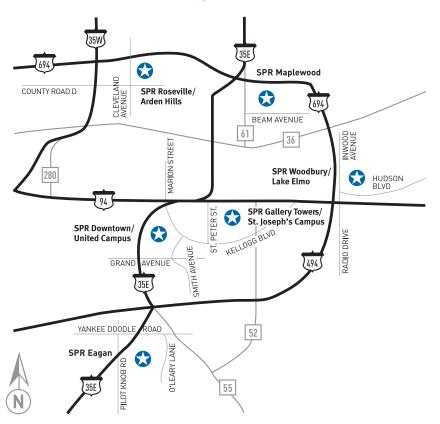
Central Scheduling: (T) 651.632.5700 (F) 651.632.5701

Appointment Date:
Call Patient to schedule
Exam Time:
Insurance Authorization #
SPR to Request

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1 Toviding digital mammography ser	vices at outputient imagi	iig centers					
Patient Information							
PATIENT NAME	DATE OF BIRTH	ID/MRN					
CELL PHONE	HOME PHONE	WORK PHONE					
CLLLINONL	HOME PHONE	WORKTHORE					
INSURANCE COMPANY	POLICY #/GROUP						
CLINICAL HISTORY							
DIAGNOSIS/ORDER							
PREVIOUS FILMS?	RESULTS CHECK ALL TH	IAT APPLY M	IRI SAFE				
	Films CD	Read & Call Patient to Hand Carry					
REFERRING PHYSICIAN	Physician Information OFFICE PHONE	OFFICE FAX					
REFERRING PHISICIAN	OFFICE FRONE	OFFICE TAX					
PHYSICIAN SIGNATURE (REQUIRED)	PRACTICE NAME/CLINI	С					
NATIONAL PHYSICIAN ID #	SPECIAL INSTRUCTIONS	s					
INSTRUCTIONS / NOTES							
C	inical Examination Details						
DIAGNOSTIC MAMMOGRAM OR POSSIBLE US OR BIOPSY							
LEFT RIGHT BILATERAL	SHOW LOC	CATION OF MASS					
ULTRASOUND OR POSSIBLE DIAGNOSTIC MAMMO OR BIO	PSY .						
LEFT RIGHT BILATERAL	S) 					
		$() \setminus () \cup () $					
	RIGHT '	/ LEF	·T				
ULTRASOUND GUIDED CYST ASPIRATION OR CORE BIOPSY							
LEFT RIGHT BILATERAL			\neg				
Dibition	SIZE OF MOST	RIGHT CM					
	IMPORTANT MASS -	Mon	_				
		LEET					
	(CM)	LEFT CM	- 1				

St. Paul Radiology Locations



Breast MRI Locations



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

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