Education + Early Detection = Cure
Complete Women's Imaging PC

Abraham Port, M.D.
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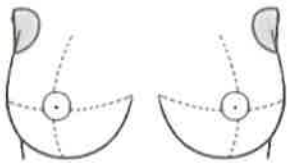
ACR Breast Center of Excellence

Patient Name Date of Birth

R  L

MAMMOGRAPHY

- ☐ Screening
- ☐ Diagnostic ☐ Bilateral ☐ Unilateral ☐ Lt. ☐ Rt.
- ☐ Wire Localization ☐ Lt. ☐ Rt.
- ☐ Stereotactic Core Biopsy ☐ Lt. ☐ Rt.

ULTRASOUND

- ☐ Breast ☐ Bilateral ☐ Unilateral ☐ Lt. ☐ Rt.
- ☐ Thyroid/Neck ☐ Both Pelvic and Transvaginal
- ☐ Pelvic Transabdominal ☐ Abdominal Complete
- ☐ Transvaginal ☐ Pelvic Doppler Complete
- ☐ Testicular ☐ Renal/Aorta (Retroperitoneal)
- ☐ Hysterosonography ☐ Carotid Doppler Complete
- ☐ Obstetrical ☐ Venous Doppler
- ☐ Biophysical Profile

- ☐ Fine Needle Aspiration ☐ Breast ☐ Thyroid ☐ Lt. ☐ Rt.
- ☐ Core Biopsy (Breast) ☐ Lt. ☐ Rt.
- ☐ Core Biopsy Other: _____
- ☐ Cyst Aspiration (Breast) ☐ Lt. ☐ Rt.
- ☐ Cyst Aspiration Other: _____
- ☐ Wire Localization ☐ Lt. ☐ Rt.

MRI of the BREAST

- ☐ With Contrast ☐ Implant Evaluation (No Contrast)
- ☐ Core Biopsy ☐ Lt. ☐ Rt.
- ☐ Wire Localization ☐ Lt. ☐ Rt.

BONE DENSITY (DEXA) ☐ Axial ☐ Appendicular

☐ OUTSIDE FILM REVIEW Exam Type _____

☐ OTHER _____

REASON FOR EXAM
(Check Diagnosis or Indicate as Other)

Breast	
Routine Screening Mammo	☐
Screening mammo for High Risk	☐
Family Hx, Malignant Neoplasm, Breast	☐
Personal Hx, Malignant Neoplasm, Breast	☐
Malignant Neoplasm, Breast (Female)-Current	☐
Malignant Neoplasm, Breast (Male)-Current	☐
Benign Neoplasm of Breast	☐
Carcinoma in situ of Breast	☐
Neoplasm of uncertain behavior of breast	☐
Solitary Cyst of Breast	☐
Mastodynia (Breast Pain)	☐
Breast Mass	☐
Other Signs and Symptoms, Breast	☐
Mammographic Microcalcifications	☐
Other Abnormal findings of the Breast	☐
Thyroid	
Thyroid Goiter	☐
Swelling of Head and Neck	☐
Pelvic/Abdominal/Transvaginal	
Pelvic Pain	☐
Postmenopausal Menorrhagia	☐
Postmenopausal Bleeding	☐
Renal Colic	☐
Abdominal Mass	☐
Abdominal Pain	☐
Bone Density	
Hypothyroidism	☐
Osteoporosis, Unspecified	☐
Disorder of Bone and Cartilage Unspecified (Osteopenia)	☐
Primary Hyperparathyroidism	☐
Asymptomatic Postmenopausal Status (Natural Age Related)	☐
Long Term Use of Medications for Osteoporosis	☐
Long Term Use of Steroids	☐
Family History of Osteoporosis	☐

OTHER:

Physician Name **Signature** **Date**

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