



# Breast Imaging Referral

360-337-6500 or 1-800-972-9264 • Scheduling Fax: (360) 662-5501

Silverdale: 1780 NW Myhre Road, #1220, Silverdale  
 Port Orchard: 450 South Kitsap Blvd., #110, Port Orchard  
 Poulsbo: 22180 Olympic College Way NW, #100, Poulsbo

## Instructions and Directions on Back

Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_  Phone Report \_\_\_\_\_

Patient Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Birthdate: \_\_\_\_\_  Fax Report \_\_\_\_\_

Previous Films:  No  Yes Where? \_\_\_\_\_ When? \_\_\_\_\_  Send Films

Appointment Date: \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_  Routine, send report

Referred by \_\_\_\_\_  Send copy of report to:

Please have patient bring completed form to appointment or to expedite service, fax form to (360) 662-5501 and AMI will schedule appointment.

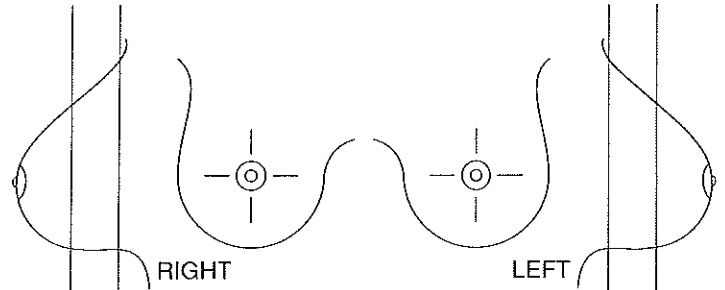
Please make arrangements for children as they may not be left unattended in the waiting room.

### Available in Silverdale, Port Orchard or Poulsbo

- SCREENING MAMMOGRAM**  
 Bilateral or Unilateral, with no current signs, symptoms, or other indications listed below.
  - With Tomosynthesis (3D) add on (Silverdale Only)
  - Patient has implants
- DEXA Bone Densitometry** Reason: \_\_\_\_\_
- VFA Vertebral Fracture Assessment**
- DEXA w/VFA**

### Available in Silverdale only

- DIAGNOSTIC MAMMOGRAM, WITH TOMOSYNTHESIS AND/OR ULTRASOUND IF INDICATED**  
 (Perform bilateral mammogram if patient is due)
  - 1. Palpable mass (*mark diagram*)
  - 2. Skin dimpling/nipple retraction
  - 3. Persistent focal pain (*mark diagram*)
  - 4. Bloody or clear nipple discharge
  - 5. First mammogram post biopsy
  - 6. Other \_\_\_\_\_



- ULTRASOUND**
  - Right
  - Left

Please mark area of concern.

- SPECIAL PROCEDURES**

<input type="checkbox"/> Cyst aspiration	<input type="checkbox"/> Right	<input type="checkbox"/> Left
<input type="checkbox"/> Cyst aspiration, if indicated	<input type="checkbox"/> Right	<input type="checkbox"/> Left
<input type="checkbox"/> Needle Biopsy ( <i>stereotactic or US-guided</i> )	<input type="checkbox"/> Right	<input type="checkbox"/> Left
<input type="checkbox"/> Galactogram	<input type="checkbox"/> Right	<input type="checkbox"/> Left
<input type="checkbox"/> Wire localization	<input type="checkbox"/> Right	<input type="checkbox"/> Left

- MRI - (in Silverdale)**
  - Breast MRI
  - MRI - guided Biopsy

# Instructions for Breast Imaging

## MAMMOGRAMS

### *Mammogram, galactogram (ductogram), wire localization*

1. Please wear a two-piece outfit.
2. Wear no deodorant or powder.
3. For a wire localization, follow instructions given to you by your surgeon or surgery center.

## ULTRASOUND

### *Breast ultrasound or cyst aspiration*

No preparation is necessary, unless you are also having a mammogram or extra views for your mammogram, in which case you would follow the above instructions for a mammogram.

## NEEDLE BIOPSY

### *(Stereotactic, Ultrasound-guided, MRI-guided)*

Please call 360-337-6551 for instructions.

For questions on imaging or directions, please call (360) 337-6500 or (800) 972-9264

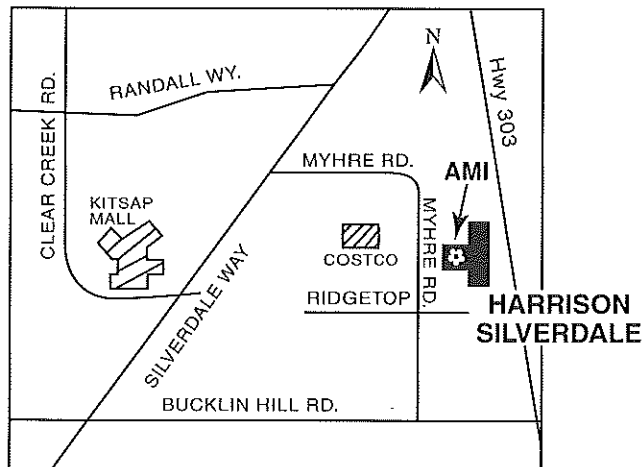
### **Women's Diagnostic Center, Silverdale**

*Mammography, Ultrasound, DEXA Scan*

*Special Procedures, Breast MRI*

1780 NW Myhre Road, #1220, Silverdale

(1st Floor in Harlow Medical Building on Harrison Silverdale campus)

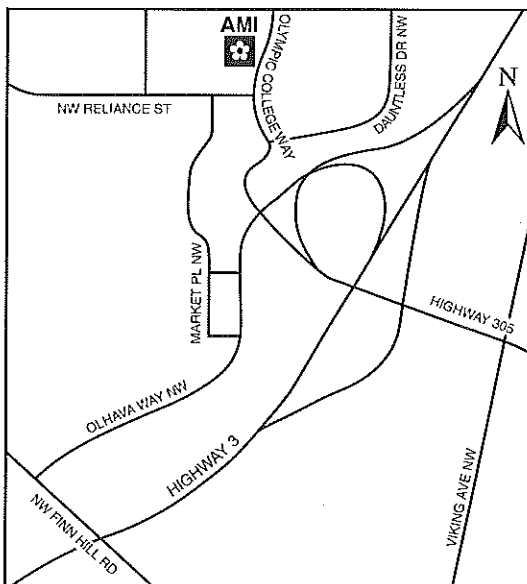
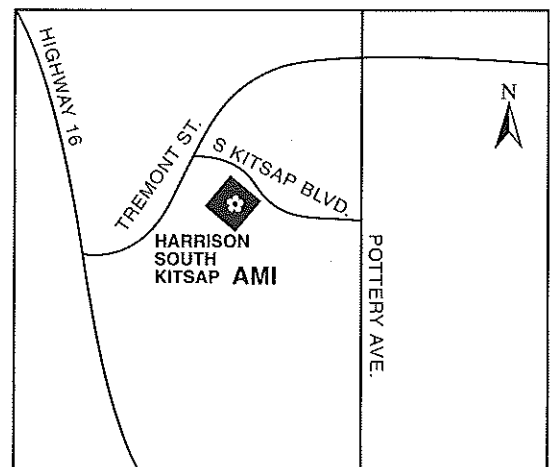


### **Women's Diagnostic Center, South Kitsap**

*Screening Mammography, DEXA Scan*

450 South Kitsap Blvd., #110, Port Orchard

(1st floor on Harrison Port Orchard campus)



### **Women's Diagnostic Center, Poulsbo**

*Screening Mammography, DEXA Scan*

22180 Olympic College Way NW, #100

(1st Floor in Cascade View Medical Center)