Corona Comprehensive Imaging Center
A RadNet Imaging Center

801 S. Main Street, Suite 101, Corona, CA 92882
Scheduling Phone: (951) 682-1099
Scheduling Fax: (951) 351-1025

MAMMOGRAPHY REFERRAL FORM

Appointment Date: _____ Appointment Time: _____ Today's Date: _____

Patient's Name: _____

Patient's Phone: _____ DOB: _____

Referring Physician: _____ Phone: _____

Referring Signature : _____ Fax: _____

Site/Source of Previous Mammo: _____

Breast Implants: Yes No (circle one)

IMAGING SERVICES

☐ **Screening Digital Mammogram** (no current problems)
Prior breast imaging BIRADS 1 or 2 only.
- ☐ 2D Screening
- ☐ 3D Screening Tomosynthesis

☐ **Diagnostic Mammogram** (Ultrasound if indicated)
*(Please indicate area of concern if applicable)
- ☐ Left ☐ Right ☐ Bilateral
- ☐ History of Breast Cancer
- ☐ Lump
- ☐ Focal Pain
- ☐ Nipple Discharge
- ☐ Call Back from Screening (BIRADS 0)
- ☐ Six Month Follow-Up (BIRADS 3)
- ☐ Other _____

☐ **Screening Breast Ultrasound**

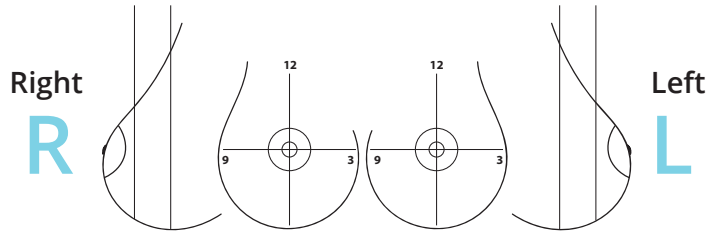
☐ **Diagnostic Breast Ultrasound**
*(Please indicate area of concern if applicable)
- ☐ Left ☐ Right ☐ Bilateral
- ☐ Palpable Lump
- ☐ Focal Point of Pain
- ☐ Other _____

☐ **Procedures**
- ☐ Left ☐ Right ☐ Bilateral
- ☐ Cyst Aspiration
- ☐ Ultrasound Guided Core Needle Biopsy
- ☐ Stereotactic Core Needle Breast Biopsy
- ☐ MRI Guided Core Needle Biopsy
- ☐ Ductogram (Galactogram)

☐ **Breast MRI**
- ☐ With contrast
(High risk screening and tumor protocol)
- ☐ Without contrast
(For implant evaluation only)

Exam Findings/Special Instructions:

Location of concern must be noted on referral
*please mark location for study



BREAST IMAGING SCHEDULING GUIDELINES

Preparation for Digital Mammogram Examination:

- No perfume, deodorant or body powder the day of the exam
- Please bring any previous mammogram films and reports (if done at another facility).
- Please wear two piece clothing.
- Do not schedule one week before menstrual period.

Preparation for Breast Biopsy:

- No aspirin or "blood thinner" one week prior to biopsy.
- Please consult your physician prior to discountinuing medications.

NO PREP NEEDED FOR BREAST ULTRASOUND OR CYST ASPIRATION.

INTRODUCING OUR "NEW" VIRTUAL WAITING ROOM

Now offering Remote Check-in

- Simple step by step instructions for patients and a quick and easy way to communicate with our staff.
- Reduced lobby traffic and greater social distancing by waiting in the comfort of patient's vehicle.

How does it work?

- During your pre-check-in process you will be given a number to text, notifying us of your arrival.
- We will text back and include links to complete check-in from outside the center.

CORONA COMPREHENSIVE IMAGING CENTER

801 S. Main Street, Suite 101, Corona, CA 92882
Phone: (951) 682-1099 | **Fax:** (951) 351-1025 | **Virtual Waiting Room:** (951) 783-4682
Services: ***MMRI/MRA, CT/CTA, Fluoroscopy, Ultrasound, Mammography, Tomosynthesis***