

BREAST IMAGING REQUISITION

Patient Information:



Department of Diagnostic Imaging
 310 Juliana Drive
 Woodstock, ON N4V0A4
 Phone: 519-421-4204 Fax: 519-421-4241

Name (Last, First): _____
 DOB: _____ M F PIN: _____
MMM DD YYYY
 Address: _____
 Phone Number (Home): _____
 (Other): _____
 Health Card Number: _____ Version Code: _____

Referring Physician or Other Authorized Health Care Provider

Name (Please Print): _____
 Phone: _____ Fax: _____

Ordering Physician or Authorized Health Care Provider Signature:

By signing this requisition you are providing authorization for your patient to receive additional imaging (Mammography, Ultrasound, MRI and other procedures) as deemed necessary by the responsible Radiologist to resolve this diagnostic request.

Copy to: _____

Has this patient had a mastectomy: Right Left
 Does this patient have: Implants
 Special needs or impairments
 (specify): _____

DOUBLE APPOINTMENT TIMES ARE REQUIRED FOR PEOPLE WITH IMPLANTS OR SPECIAL NEEDS

- We will be reviewing Ontario Breast Screening Program (OBSP) eligibility: if your patient is to be booked for a screening mammogram and is eligible to enter the OBSP program, they will be scheduled through OBSP
- Please note: Women 75 years of age and older having a mammogram through OBSP require a requisition from their primary care provider
- To cancel or change your **OBSP** appointment, please call OBSP at 519-539-7838 and notify your primary care provider as well

BREAST IMAGING BOOKINGS CANNOT BE MADE UNLESS REQUISITION IS COMPLETED IN FULL
 Please submit completed requisition and all supporting documentation by fax to: 519-421-4241

Examination(s) Requested:

MAMMOGRAM

- Routine Screening Mammogram
- OBSP Screening Mammogram (50 years of age and over), call OBSP: 519-539-7838 for an appointment
- Diagnostic Mammogram (Symptomatic)

ADDITIONAL IMAGING REQUESTED BY RADIOLOGIST

Right Left

- Ultrasound of Breast
- Coned Views
- Mag Views
- Follow up _____ months

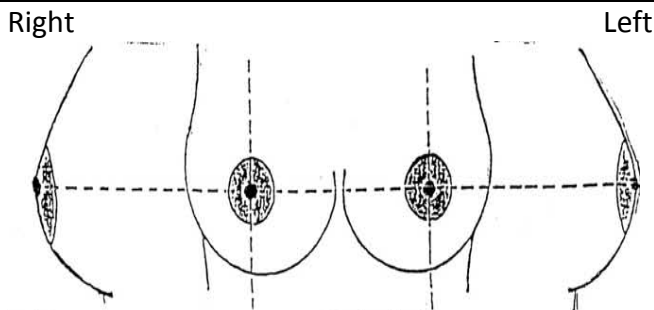
SPECIAL PROCEDURES

Right Left

- Stereotactic Core Biopsy
- Ductogram (Galactography)
- Ultrasound-guided Aspiration of Breast
- Ultrasound-guided Biopsy of Breast

CLINICAL INDICATION, HISTORY:

CLINICAL INDICATION, HISTORY: (reason for exam)



Appointment Date:

Appointment Time:

PLEASE BRING THIS REQUISITION AND YOUR HEALTH CARD
 Requirements and preparations for examinations on page 2
 To cancel or reschedule your mammography appointment please call Diagnostic Imaging: 519-421-4204



BREAST IMAGING EXAMS REQUIRING PREPARATION

EXAM	PREPARATION	DURATION
<p>Mammogram</p> <p>Mammography is a low dose radiographic examination of breast tissue</p> <p>The Canadian Cancer Society recommends that all women 50 or older have a mammogram every two years</p>	<ul style="list-style-type: none"> • If you are still menstruating, we suggest that you book your exam within the first two weeks following your menstrual period (if possible) • Please note: Women 75 years of age and older having a mammogram through OSBP require a requisition from their primary care provider • Do not use deodorant, talcum powder, ointment or creams on your breasts and underarms the day of your appointment (if you do, please notify the technologist so that she can direct you to the washroom to wash it off) • If you wear a dermal patch (nitroglycerin, pain medication, or hormone), please do not place it on the chest region on the day of your appointment • For your comfort, if your breasts are tender, we recommend that you: <ul style="list-style-type: none"> - refrain from caffeine for 48 hours prior to your appointment - have your attending physician advise you on any recommended medications to manage tenderness in breasts - the radiologist recommends taking two Tylenol (or equivalent) tablets about 1 hour prior to your appointment (if needed) • What to wear: <ul style="list-style-type: none"> - two piece outfit as you will be asked to remove everything from your waist up and to put on a hospital top (It is important that you have something on from your waist down to keep you covered) - if you have long hair, please secure it back prior to your exam • Before the exam: <ul style="list-style-type: none"> - the technologist or a volunteer will ask you questions about your medical history - the procedure will be explained to you by the technologist (if you have any questions or concerns, please ask the technologist) • Compression of the breast is a necessary part of the exam (it will be firm, but tolerable) 	<p>20 minutes</p> <p>40 minutes for patients with implants or special needs</p>
<p>Stereotactic Core Biopsy</p>	<ul style="list-style-type: none"> • No restrictions on food or drink • No blood thinners (including aspirin), for 10 days prior to procedure (if there is a concern regarding this, please consult with your attending physician and radiologist) • The Mammography Department must be notified if there are any modifications to the prep regarding medications 	<p>1 hour</p>
<p>Ductogram (Galactography)</p>	<ul style="list-style-type: none"> • DO NOT express ANY fluids or excretions from your breast the day of your appointment until after your exam • Follow same instructions from Mammogram section 	<p>1 hour</p>
<p>Mammogram with Needle Localization</p>	<ul style="list-style-type: none"> • Please follow instructions as per Pre-Admit Clinic 	<p>1 hour</p>

PLEASE CONTACT YOUR ATTENDING PHYSICIAN FOR ANY QUESTIONS REGARDING YOUR MEDICATIONS
To cancel or reschedule your **OBSP** appointment please call OBSP at 519-539-7838
To cancel or reschedule your **non-OBSP** appointment please call Diagnostic Imaging: 519-421-4204
For any questions regarding Mammography please call: 519-421-4204

Please be aware that this is a "Fragrance Free" facility