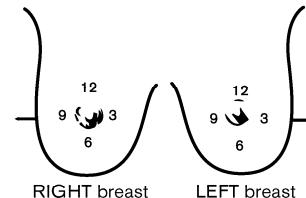
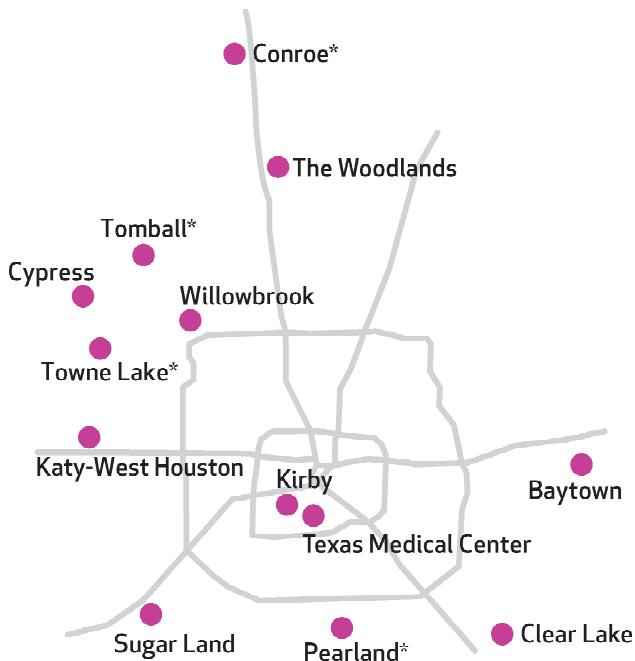


PLEASE CHECK LOCATION

<input type="checkbox"/> Texas Medical Center	<input type="checkbox"/> Clear Lake	<input type="checkbox"/> Pearland	<input type="checkbox"/> The Woodlands	<input type="checkbox"/> Willowbrook
<input type="checkbox"/> Baytown	<input type="checkbox"/> Kirby	<input type="checkbox"/> Sugar Land	<input type="checkbox"/> Towne Lake	<input type="checkbox"/> West
<input type="checkbox"/> Cypress	<input type="checkbox"/> Tomball	<input type="checkbox"/> Conroe		

Patient Name	SSN	DOB	Sex	<input type="checkbox"/> M	<input type="checkbox"/> F
Patient Home Phone:	Patient Work Phone:	Patient Cell Phone:			
Insured Name	Plan Name	Plan Phone No.			
ID No.	Group No.	Auth No.			
Diagnosis	ICD-10 Code				
BREAST IMAGING PROCEDURES					
<input type="checkbox"/> Screening mammogram (patients with no symptoms) (Follow-up diagnostic work-up, if clinically indicated by screening exam)	<input type="checkbox"/> Tomosynthesis				
<input type="checkbox"/> Bilateral diagnostic mammogram (procedure to treat or diagnose a patient's specific symptoms) Breast ultrasound, if clinically indicated	<input type="checkbox"/> Tomosynthesis, if needed	<input type="checkbox"/> With contrast, if needed	<input type="checkbox"/> With contrast, if needed		
<input type="checkbox"/> Unilateral diagnostic mammogram Breast ultrasound, if clinically indicated	<input type="checkbox"/> Tomosynthesis, if needed	Please circle	RIGHT breast	LEFT breast	
<input type="checkbox"/> Ultrasound breast		Please circle	RIGHT breast	LEFT breast	
<input type="checkbox"/> Ultrasound axilla		Please circle	RIGHT breast	LEFT breast	
<input type="checkbox"/> Molecular breast imaging (only available at the Kirby and Sugar Land locations)					
<input type="checkbox"/> MRI breast bilateral (unilateral for mastectomy patients only)	<input type="checkbox"/> Without contrast	<input type="checkbox"/> With and without contrast			
INTERVENTIONAL PROCEDURES					
Outside films and reports are required prior to scheduling an MRI or interventional procedure, if the patient has not had a recent mammogram at a Houston Methodist facility.					
<input type="checkbox"/> Breast biopsy if clinically indicated					
<input type="checkbox"/> Ultrasound - guided aspiration/biopsy		Please circle	RIGHT breast	LEFT breast	
<input type="checkbox"/> Stereotactic core biopsy		Please circle	RIGHT breast	LEFT breast	
<input type="checkbox"/> Abscess drainage		Please circle	RIGHT breast	LEFT breast	
<input type="checkbox"/> Galactogram		Please circle	RIGHT breast	LEFT breast	
<input type="checkbox"/> Localization prior to breast surgery		Please circle	RIGHT breast	LEFT breast	
<input type="checkbox"/> MRI breast biopsy with and without contrast		Please circle	RIGHT breast	LEFT breast	
<input type="checkbox"/> Lymph node biopsy		Please circle	RIGHT breast	LEFT breast	
OUTSIDE FILM INTERPRETATION					
<input type="checkbox"/> For outside film interpretation please attach a copy of the patient's insurance card for registration purposes.					
BONE DENSITY IMAGING					
<input type="checkbox"/> Bone density (DEXA)	ICD-10 code				
CLINICAL HISTORY					
Notes:					
Physician's Name					
Phone Number					
NPI					
Physician's Signature					
Date and time					

Houston Methodist Breast Care Centers



*Most of our locations offer comprehensive breast care. Conroe, Pearland, Tomball and Towne Lake offer screening mammograms only.

1. Texas Medical Center

6550 Fannin St.
Smith Tower, 7TH Floor
Houston, TX 77030
713.441.PINK (7465)
Scheduling Fax: 713.791.5075
Clinic Fax: 713.793.7117

4. Kirby

2615 Southwest Fwy., Suite 110C
Houston, TX 77098
713.441.PINK (7465)
Scheduling Fax: 713.791.5075
Clinic Fax: 713.790.3119

7. The Woodlands

17183 Interstate 45 S.
Medical Office Building 1, Suite 310
The Woodlands, TX 77385
936.270.3600
Fax: 936.270.3601

10. Willowbrook

18220 State Hwy. 249, Suite 1280
Houston, TX 77070
281.737.PINK (7465)
Fax: 713.791.5050

13. Cypress

24510 Northwest Fwy., MOB 1, Suite 500
Cypress, TX 77429
346.618.3800
Fax: 346.618.3801

2. Baytown

1677 W. Baker Rd., 2nd Floor
Baytown, TX 77521
346.292.PINK (7465)
Fax: 832.556.6564

5. Pearland

8520 W. Broadway St. Suite 110
Pearland, TX 77584
712.363.8650
Fax: 281.485.4540
Screening mammograms only.

8. Towne Lake

18121 Tuckerton Rd., Suite 180
Cypress, TX 77433
713.363.8650
Fax: 281.485.4540
Screening mammograms only.

11. Conroe

4015 Interstate 45 N., Suite 120
Conroe, TX 77304
713.363.8650
Fax: 281.485.4540
Screening mammograms only.

3. Clear Lake

18100 Houston Methodist Dr.
Medical Office Building 2, Suite 125
Houston, TX 77058
281.333.8858
Fax: 281.333.8869

6. Sugar Land

16655 Southwest Fwy.
Sugar Land, TX 77479
281.242.PINK (7465)
Fax: 281.274.7101

9. West Houston-Katy

18300 Katy Fwy.
Medical Office Building 2, Suite 125
Houston, TX 77094
832.522.PINK (7465)
Fax: 832.522.0123

12. Tomball

14211 FM 2920, Suite 110
Tomball, TX 77377
713.363.8650
Fax: 281.485.4540
Screening mammograms only