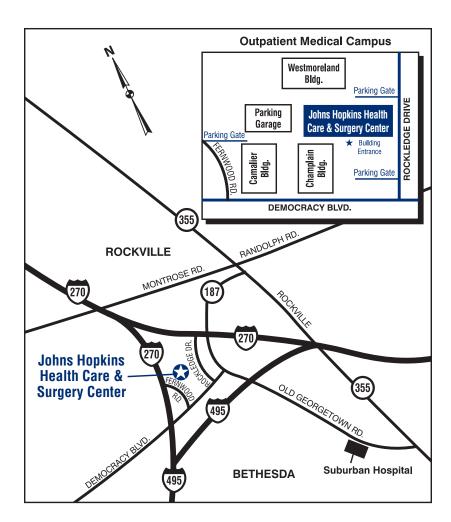
Johns Hopkins Medical Imaging

Patients should call 443-997-7237 to schedule their appointment Fax this order to 443-451-6986 or email to JHHRadAccess@jhmi.edu



ATTENTION: You must present this form at time of exam. \square ASAP ☐ STAT (critical need) PATIENT'S NAME (LAST, FIRST) (PRINTED) DOB (required for valid order) DATE Referring physician's cell phone number (required for STAT orders) SEND CD WITH PATIENT REFERRING PHYSICIAN'S NAME (PRINTED) REFERRING PHYSICIAN'S SIGNATURE (required for valid order) CC Report to: If additional imaging, ultrasound and procedure, are needed, treat and evaluate. \square Yes Indicate Any Physical Findings on Diagram Below: Screening Mammography **■** Bilateral ☐ Right ☐ Left (Check All That Apply) ☐ Asymptomatic Fibrocystic Change, Generalized Lumpiness, Nonfocal Pain Post Mastectomy, For Unaffected Side Prior Remote History of Lumpectomy For Breast Cancer (After 3 Years) Pelvic Sonogram Screening Breast Ultrasound Sonohysterogram Diagnostic Mammogram and/or Breast See instructions on reverse side Sonogram ☐ Bone Densitometry (DEXA Scan) Bilateral ☐ Right ☐ Left (Check All That Apply) Osteoporosis ☐ Long Term (Current) Use of Steroids (please mark new or enlarging palpable area on diagram) ☐ Drug Induced Osteoporosis, Specify Drug ☐ Nipple Discharge Menopausal Personal History of Lumpectomy for Breast Cancer Post Menopausal (Within 3 Years) ☐ Hyperparathyroidism ☐ Follow Up Probably Benign ☐ Hypothyroidism ☐ Follow Up Benign Core Biopsy ☐ Amenorrhea Evaluation for Residual Calcifications Post Lumpectomy Osteopenia ☐ Gynecomastia ☐ Other (Please Specify) Abnormal finding on recent Breast Imaging Other (Please Specify)_ **Procedures** ☐ MRI Guided Core Needle Biopsy ☐ Breast MRI ☐ Right ☐ Left silicone implant rupture only ☐ Stereotactic Guided Core Needle Biopsy all other indications ☐ Right ☐ Left ☐ Ultrasound Guided Core Needle Biopsy Pertinent History_ ☐ Right ☐ Left ☐ Axilla ☐ Ultrasound Guided FNA Biopsy ☐ Right ☐ Left Axilla ☐ Cyst Aspiration Right ☐ Left ☐ Ductogram ☐ Right ☐ Left Other Examinations Requested Clinical Dx / Relevant Clinical Findings



Johns Hopkins Medical Imaging **Bethesda**

6420 Rockledge Drive, Suite 3100 Bethesda, Maryland 20817

Office Phone: 301-897-5656

Scheduling Phone: 443-997-7237

Find us on **f**



Exam Preparations:

MAMMOGRAMS AND DIGITAL MAMMOGRAPHY

If you've previously had mammograms at different imaging centers outside of Johns Hopkins, we can help transfer your prior records and images over to ensure smooth and integrated health care, call 410-538-2705 to find out more. Do not use perfume, deodorant, powder or lotions on the breasts or underarm area. Two piece outfits are recommended.

Please bring previous mammograms or other breast studies if they were done at another institution or arrange to have them sent to our office

DEXA SCAN

- Do not take any calcium supplements or any items that contain calcium, such as multi-vitamins, certain antacids products, such as Tums for 24 hours prior to your examination.
- If you have had any contrast studies within 7 days prior to your appointment, please call 443-997-7237 to reschedule the appointment.
- If you wear any type of continuous blood glucose monitor and/or an insulin/medication pump you may be asked to remove it prior to entering the imaging room. Please contact your provider or device manufacturer for additional questions and information.

PELVIC, GYN OR OBSTETRICAL ULTRASOUND

• Must Drink 24 ounces of liquid 1 hour prior to appointment time. Do NOT empty your bladder.

Please arrive at the office 20 minutes prior to your appointment Please bring this form with you on the date of your exam.



Services include

- Digital Mammography & 3D Tomosynthesis capability
 - Screening and Diagnostic Mammography
 - Breast MRI
 - DEXA
 - MRI Guided Biopsy
 - Stereotactic Biopsy
 - US Guided Biopsy