







Schedule Online

Fax Number www.SolisMammo.com/Schedule 866.366.5798

PATIENT INFORMATION		
Patient Name	DOB	Patient Phone Number
Physician	Date	
Physician Phone	Physician Fax	Physician NPI
BREAST EXAMINATION REQUEST	ı	
 Screening Mammogram w/ additional views Ultrasound if necessary for inconclusive Mam 3D (Tomosynthesis) — may be added to any imaging order by request of the patient or by both the patient and physician. Diagnostic Mammogram SELECT REASON FOR PROCEDURE	mammography	gram w/ Ultrasound if necessary on/Fine Needle Aspiration sound Guided/Stereotactic)
) Breast Pain) Personal History of Breast Cancer	O Breast Cyst O Abnormal Mammogram
FOR CLINICAL USE ONLY	ı	
Indicate Area of Concern	Right Left	
BONE DENSITOMETRY		
O DEXA Bone Densitometry	DEXA with Vertebral Fracture Assessment	O Body Composition
SELECT REASON FOR PROCEDURE		
 — Post-Menopausal, Natural Status — Post-Menopausal, using HRT — Age-related osteoporosis without current pathological fracture — Fracture/suspected fracture 	 Monitoring to assess an FDA-approved osteoporosis drug therapy Long-term use of inhaled steroids list med(s) Long-term use of systemic steroids 	O Osteopenia Disorder of the bone density and structure, multiple sites, or list site(s): O Sudden marked change in height or suspected vertebral fracture
(specify body part here) Hyperparathyroidism	list med(s)	O Other





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PATIENT INSTRUCTIONS

Please arrive 15 minutes before your scheduled appointment time to prepare for your exam.

Bring this form, your insurance cards and your driver's license. Please do not bring unattended children to your appointment.

MAMMOGRAM INSTRUCTIONS

Since you will be gowning, we recommend that you wear a blouse with slacks or skirt. Please avoid the use of powder and deodorant the day of your exam. Please do not schedule your appointment one week before or during your menstrual period. To avoid a delay in interpretation, please bring any prior mammograms to your appointment.

BONE DENSITOMETRY INSTRUCTIONS

Please wear loose fitting clothing with no metal zippers or belt buckles below the waist. Please do not take any calcium supplements the day before and the day of your exam. Please note that the weight requirement for this procedure cannot exceed 300 pounds.

Greensboro Services and Location

Our Services:

- 3D Mammography[™] + Al Integration
- SmartCurve[™] Comfort
- Screening Mammography
- Diagnostic Mammography
- Breast Ultrasound
- Breast Biopsy (Ultrasound Guided or Stereotactic)
- Bone Densitometry





Greensboro

Solis Mammography Greensboro

1126 N. Church St., Suite 200, Greensboro, NC 27401 *Providing all services*