



Schedule by Phone
866-717-2551



Schedule Online
SolisMammo.com/Schedule



Fax Number
866-366-5798

PATIENT INFORMATION

Patient Name _____ DOB _____ Patient Phone Number _____

PHYSICIAN INFORMATION

Physician Name (printed) _____ Physician NPI _____ Date _____

Physician Phone _____ Physician Fax _____ Practice Name _____

**A DIAGNOSIS CODE MUST BE PROVIDED FOR THIS ORDER TO BE VALID.
PLEASE PROVIDE THE NECESSARY CODE FOR EACH STUDY ORDERED.**

BREAST EXAMINATION REQUEST

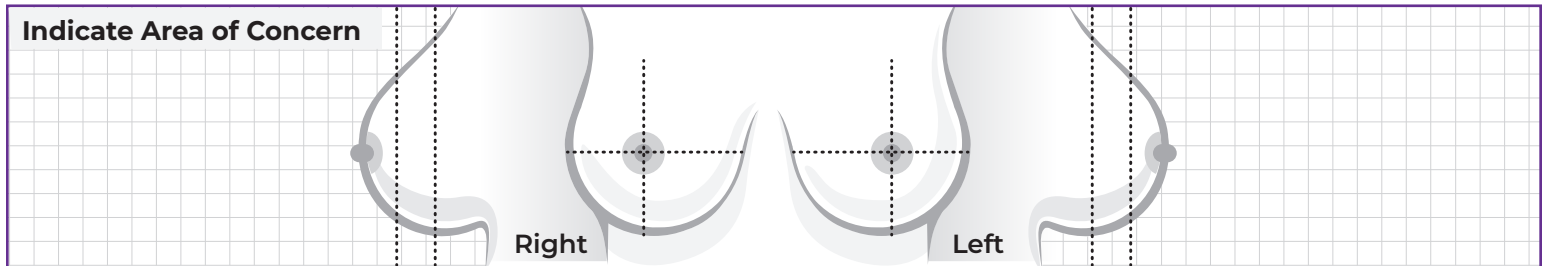
- Screening Mammogram w/ additional views and/or Ultrasound if necessary for inconclusive Mammogram
- Diagnostic Mammogram
- Diagnostic Mammogram w/ Ultrasound if necessary
- Diagnostic Breast Ultrasound w/ Diagnostic Mammogram if necessary
- Breast Ultrasound for Dense Breast

REASON FOR PROCEDURE

ICD-10 CODE R92.2 - inconclusive mammogram will be used for patient recall exams

ICD-10 CODE For each indicated exam

SELECT QUADRANT AND LATERALITY FOR DIAGNOSTIC EXAM



PHYSICIAN SIGNATURE

Stamped signatures are not allowed

Physician Signature _____ Date _____ Time _____



PATIENT INSTRUCTIONS

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

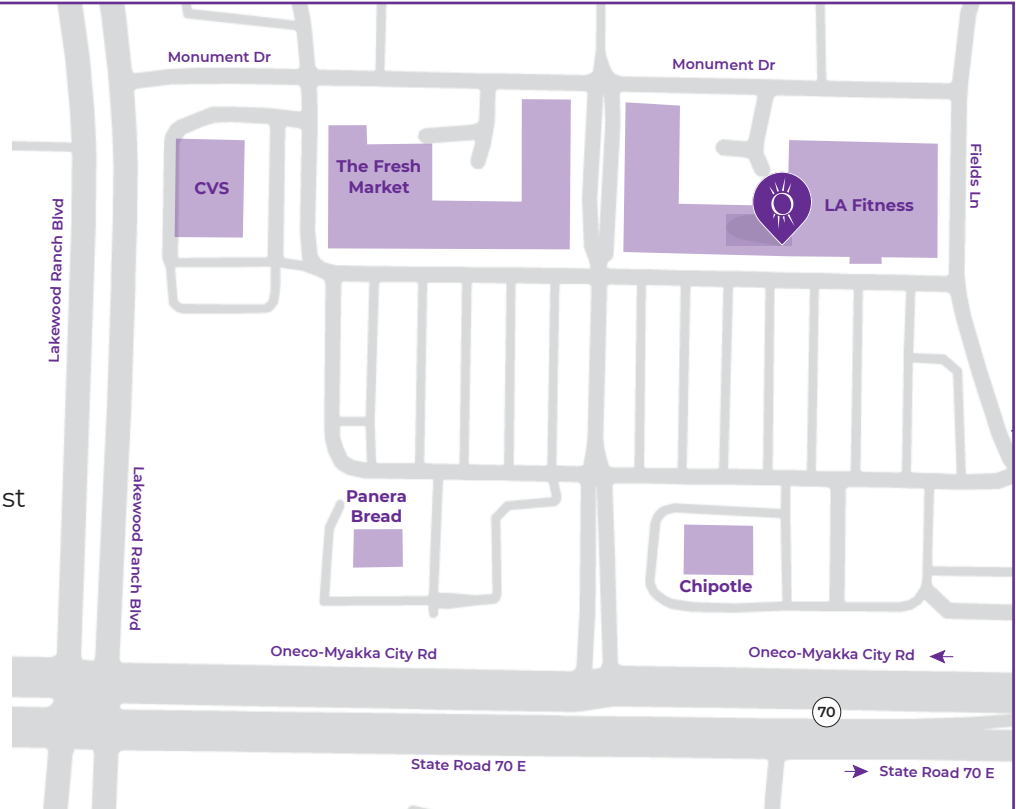
Bring this form, your insurance cards and your driver's license. Please do not bring unattended children to your appointment.

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.

Our Services:

- AI-integrated 3D Mammography
- Screening Mammography
- Diagnostic Mammography
- Diagnostic Breast Ultrasound
- Breast Ultrasound for Dense Breast



Solis Mammography Lakewood Ranch

11655 State Road 70 E, Lakewood Ranch, FL 34202

Providing all services



Scan to Schedule