

# VALLEY BREAST CENTER

4033 Talbot Rd. S. Suite 470 - Renton, WA 98055  
Phone: 425-656-5588 Fax: 425-656-5563  
www.valleymed.org

Appt. Date: \_\_\_\_\_  
Arrival time: \_\_\_\_\_  
Patient will call to schedule

Patient name: \_\_\_\_\_ Today's date: \_\_\_\_\_

DOB: \_\_\_\_\_  Male  Female Phone: \_\_\_\_\_

Reason for exam: (ICD - 9 code): \_\_\_\_\_

Implants?  Yes  No Pregnant?  Yes  No Breast feeding?  Yes  No

Prior Breast Cancer?  Yes  No Date: \_\_\_\_\_

Relevant prior breast surgery/radiation?  Yes  No Date: \_\_\_\_\_

Previous breast imaging?  Yes  No Location: \_\_\_\_\_

**SCREENING MAMMOGRAM** (Additional imaging if indicated)

- No signs, symptoms, or personal history of breast cancer

**DIAGNOSTIC MAMMOGRAM** (Ultrasound if indicated)

- Bilateral
- Unilateral:  Right  Left
- Personal history of breast cancer
- Focal pain, nipple retraction, skin dimpling, mastitis, nipple discharge
- All male patients
- Unilateral exams and all short term follow-ups

**BREAST ULTRASOUND** (Diagnostic mammogram if indicated)

- Bilateral
- Unilateral:  Right  Left

**SPECIAL PROCEDURES**

- Stereotactic or US guided needle biopsy:  Right  Left
- Cyst aspiration:  Right  Left
- Galactogram:  Right  Left
- Wire localization:  Right  Left

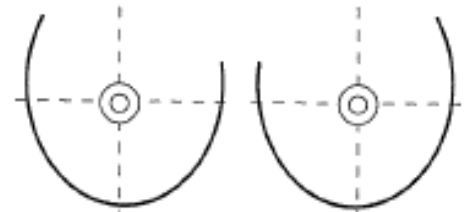
**BONE DENSITY (DEXASCAN)**

**INSTANT VERTEBRAL ASSESSMENT**

Reason for exam: (ICD - 9 code): \_\_\_\_\_

**Breast MRI is available at:  
425-656-5550**

**PLEASE MARK ANATOMICAL  
AREA OF CONCERN:**



Right

Left


Estimated size of abnormality:

\_\_\_\_\_

Ordering Physician: \_\_\_\_\_

Signature Required

Please print Physician name: \_\_\_\_\_

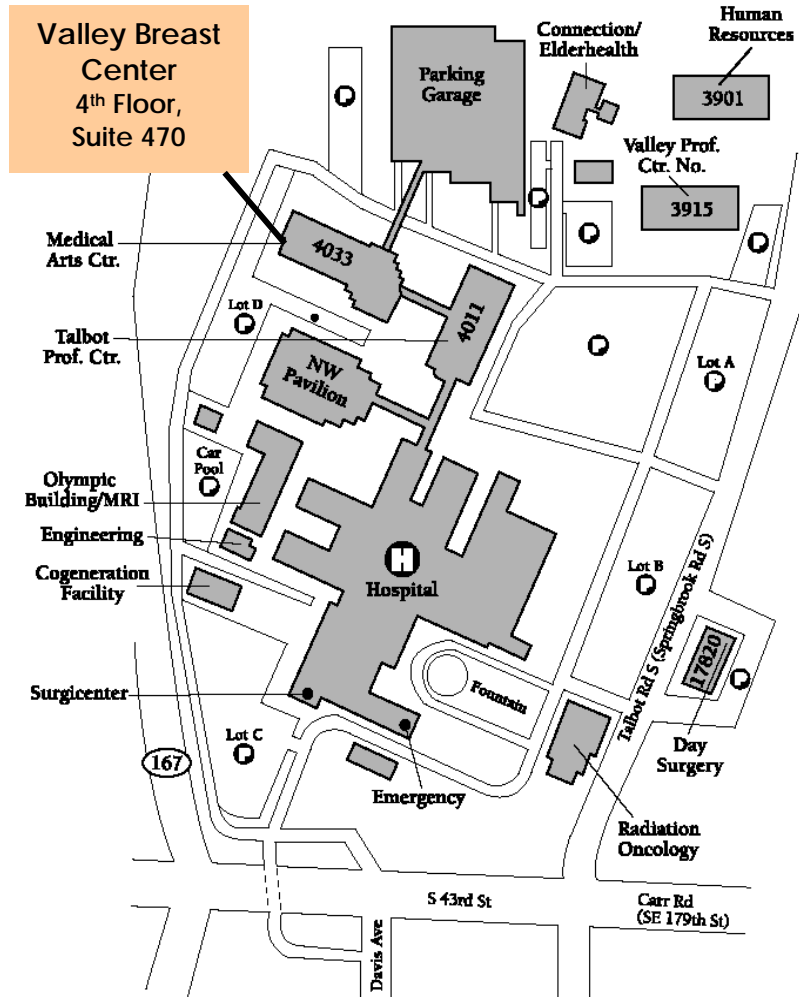
 Valley Medical Center  
**VALLEY BREAST CENTER  
PHYSICIAN ORDER FORM**

**\*878121\***

-Name Label-

## Valley Breast Center - 4033 Talbot Road South, Suite 470 - Renton, WA 98055

- If your last mammogram was done at another facility, please bring your films with you or have them sent to us before your appointment. If your films are not here at the time of your appointment, we may ask you to reschedule your exam.
- For Mammograms please do not wear any deodorant, body powders, or lotions on the breast tissue or armpit area.
- For Bone density (Dexascan) no metal on clothing suggested.
- Valley Breast Center is proud to offer a comfort pad to help relieve the discomfort of compression. There is a fee for the pad payable at time of service. Cash or check only.
- If you have any questions or need additional information, please call 425-656-5588 or visit our website at [www.valleymed.org](http://www.valleymed.org) and click on our link.



### DIRECTIONS:

Take I-405 to highway 167 South. From Highway 167, take the first exit (180<sup>th</sup> St.). Turn left at the light at the end of the off-ramp. Turn left at the next light onto 43<sup>rd</sup>/180<sup>th</sup> St. Proceed straight to the top of the hill and turn left at the light onto Talbot Rd. S. Valley Medical Center's campus is on the left. Once inside the Medical Arts Building, go to the fourth floor. Straight across from the elevator is the Valley Breast Center, Suite 470.



**VALLEY**  
**RADIOLOGISTS**

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Diagnostic Imaging Services

**253-661-1700**