Lake Charles Memorial Health System
BREAST HEALTH

1701 Oak Park Boulevard, Lake Charles, LA 70601
Phone 337.494.4755 | Fax 337.494.4757
1900 Gauthier Road, Lake Charles, LA 70605
Phone 337.480.7444 | Fax 337.480.7445

Physician Exam Request Form

Patient Name:_____

DOB:_____Phone:_____

Appointment Date:_____Appt. Time:_____

☐ Implants ☐ Saline ☐ Silicone ☐ No Implants
☐ Bilateral ☐ Unilateral ☐ Left ☐ Right

☐ SCREENING MAMMOGRAM
- ☐ Routine - no problem (Z12.31)
- ☐ Routine - personal history of breast cancer (Z12.31)

☐ DIAGNOSTIC MAMMOGRAM
- ☐ Pain (N64.4)
- ☐ Breast cancer (C50.919)
- ☐ Cyst (N60.09)
- ☐ Fibrocystic breast (N60.19)
- ☐ Lump/nodule (N63)
- ☐ Discharge (N64.52)
- ☐ Calcifications (R92.1)

☐ Breast Ultrasound, if indicated
☐ Breast Biopsy, if indicated

☐ BONE DENSITY
- ☐ Osteoporosis (M81.0)
- ☐ Post menopause (M81.0)
- ☐ Other
- ☐ Osteopenia (M85.80)
- ☐ Hormone deficiency (E34.9)
- ☐ Screening (Z13.820)

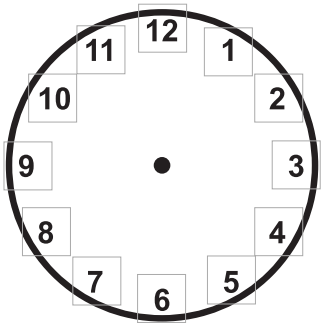
COMMENTS:

_____

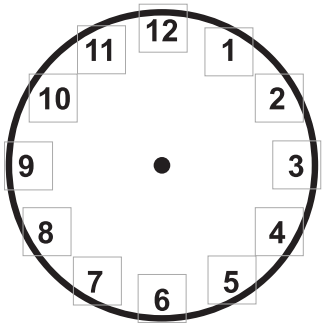
_____

_____

Indicate Area of Concern



RIGHT



LEFT

Date:_____Physician Signature:_____

cc results to:_____