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 Walter J. Steele, M.D.
 Terry W. Wallace, M.D.
 Joel A. Wissing, M.D.

Appointment Date _____
 Appointment Time _____ : AM PM
 Appointment Location _____

Referral For Diagnostic Mammography Procedures.

Diagnostic Mammography, Breast Ultrasound, Breast MRI, Fine Needle Aspiration, Galactography, Pneumocystography, Pre-Operative Needle Localization, Stereotactic Biopsy, Ultrasound Guided Biopsy, MRI Localization & Biopsy

To schedule: fax form to 704.332.2910

(Complete all information below and an appointment will be faxed back to you)

or call 704.367.2232 or 1.877.362.2232

Clinical Information

- Diagnostic Mammogram (includes ultrasound and/or biopsy if indicated from mammographic work-up)
- Breast MRI – Patient should be scheduled 7-10 days from the start of menstrual cycle; if sedation is needed, patient must wait until she arrives to take medication and bring a driver.

Auth # _____ First day of last menstrual period _____ Allergies _____

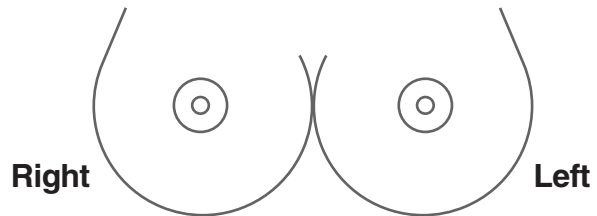
OTHER _____

Ordering Physician Signature _____

Ordering Physician Name (please print) _____

Diagram: please indicate site of abnormality.

Notes:



Patient Information - PLEASE COMPLETE IN FULL

Doctor Contact _____ Doctor Fax _____

Patient's Name _____ Email Address (optional) _____

Date of Birth _____ Home Phone _____ Work Phone _____ Cell Phone _____

Location of prior mammogram/biopsy films _____ Insurance _____

Best day of week _____ Best time of day _____

Choose a Location

- First Available**
- Pineville**
10620 Park Rd.
Building 400, Suite 208
Charlotte, NC 28210
704.540.9299
- CMC – Morrocroft**
4525 Cameron Valley Parkway
Suite 1000
Charlotte, NC 28211
704.365.0343
- CMC – Northcross**
16455 Statesville Rd.
Suite 110
Huntersville, NC 28078
704.895.3445
- CMC – Union Medical Plaza**
1550 Faulk Street
Suite 1200
Monroe, NC 28112
704.292.2272
- University Medical Park**
101 W.T. Harris Blvd.
Suite 2122-A
Charlotte, NC 28262
704.863.6148
- Medical Center Plaza**
1001 Blythe Blvd.
Suite 103
Charlotte, NC 28203
704.355.6200
- Morehead Medical Plaza**
1025 Morehead Medical Dr.
Suite 150
Charlotte, NC 28204
704.831.4200

Fax Referral to 704.332.2910

