

PHYSICIAN ORDER FORM

The Rose | Southeast
12700 N. Featherwood
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Houston TX 77034
281-484-4708 **Main**
281-484-5626 **Fax**

The Rose | Galleria
6575 West Loop South
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Bellaire, TX 77401
281-484-4708 **Main**
713-668-3173 **Fax**

Make your appointment today
281-484-4708 **Main number**

For online scheduling
www.therose.org/appointments



PATIENT INFORMATION

Patient Name: _____ Date: _____

Phone: _____ Birthdate: _____

Previous Mammogram(s) Year(s): _____ Location(s): _____

Diagnosis (Dx): _____

- Breastfeeding
- Pregnant
- Breast Implants
 - Saline
 - Silicone

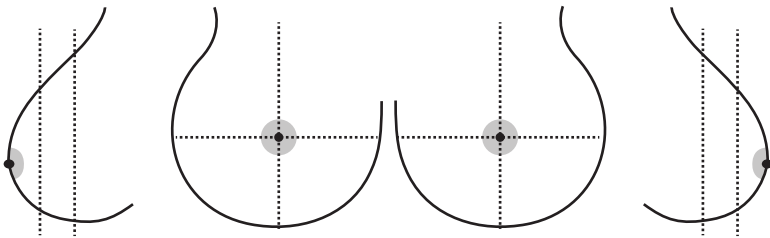
BREAST EXAMINATION REQUEST

- Screening Mammogram with additional views and/or Ultrasound if necessary for inclusive Mammogram
- Diagnostic Mammogram with Ultrasound if necessary
- Breast Ultrasound
- Breast Ultrasound for Dense Breast
- Breast Biopsy with post procedure Mammogram if needed

Select Reason for Procedure

- Breast Mass
- Breast Cyst
- Abnormal Mammogram
- Family History of Breast Cancer
- Breast Pain
- Nipple Discharge:
Side R or L or B
- Personal History of Breast Cancer
(within 5 years of diagnosis)
- Other

MARK SITES OF CONCERN



- Intervention**
Procedures may include the following as clinically indicated by diagnostic studies:
 - Cyst aspiration
 - Fine needle aspiration biopsy
 - Ultrasound-guided core biopsy
 - Stereo-guided core biopsy
 - Wire localization for surgical biopsy
 - Ductogram

BONE DENSITY REQUEST

- Bone density test: Hip and Spine.

Select Reason for Procedure

- Osteopenia M85.89
- Long-term, current hormonal contraceptives Z79.3
- Other
- Osteoporosis M81.0
- Unspecified menopausal or premenopausal N95.9
- Asymptomatic menopausal site Z78.0
- Other specified menopausal or premenopausal N95.8

REFERRING PHYSICIAN

Referring Physician Name: *(please print)* _____

Facility: _____ NPI Number: _____

Phone: _____ Fax: _____

Referring Physician Signature: *(required)* _____

**Physician authorization may also be required.*

PATIENT INSTRUCTIONS

Please allow one (1) hour
for your mammogram appointment

1. Do not wear lotions, powders or deodorants on the day of your appointment.
2. Please wear two-piece clothing for convenience and comfort.
3. For a biopsy, please do not take any aspirin or Advil for at least seven (7) days before your appointment.
4. For bone density testing, please do not wear any metal, i.e. zippers or buttons.
5. Please do not bring a child who requires supervision while you are being examined.
6. Please bring the following with you to your appointment:
 - This referral form from your physician.
 - The dates of your last menstrual period, or year of hysterectomy (_____).
 - Prior images and reports from the two most recent mammograms and/or ultrasounds for comparison purposes, or the address and phone number of the facility where they can be obtained. (This will allow The Rose to quickly compare to your new digital images). Your results may be delayed if we must wait for your prior images and reports to arrive. **Prior images and reports are mandatory for diagnostic appointments.**
 - Any prior bone density test results, or the address and phone number of the facility, or physician, where they can be obtained.

INSURANCE ACCEPTED

Physician referral/authorization may be required based on your plan.

Accountable Health Plans

ACA – Affordable Care Act:

- Aetna
- Allied
- Ambetter *Value/Virtual with Referral
- BCBS-HMO/PPO
- Cigna
- Community Health Choice
- Molina Healthcare
- Pan American
- United Healthcare Compass, Balanced, and Plus

Insurances Accepted:

- Admar/Med Network
- Administrative Concepts
- Aetna – all plans except Memorial Hermann,
 - Aetna Memorial Hermann Accountable Care only
 - HCA (can be seen with authorization)
 - Kelsey-Seybold
- Aetna Medicare Advantage
- Affiliated Healthcare/PHN
- Alieria
- Allied
- Allwell
- Amerigroup this includes Children's Medicaid
- Anthem
- Beechstreet A Multiplan Network
- Blue Choice
- Blue Cross & Blue Shield with Medicare
 - Advantage HMO
- Blue Essentials
- Blue Premier
- Boon Chapman
- Bright Healthcare
- Care Improvement PPO
- CCN
- Champ VA
- Cigna – all plans except Kelsey Seybold
- Community Health Choice
- Coventry Healthcare – GEHA only
- Devoted Health
- Evercare of Texas
- Fiesta
- First Health
- Friday

- Friendswood ISD
- Galaxy Network
- GPA – Group and Pensions Administrators
- Great West part of Cigna
- Healthnet Pro
- Healthmedpro
- HealthSmart ACCEL, Preferred and Payers Organization (HPO)
- HHPO - PPO Next
- HMO Blue (with referral)
- Humana - PPO, HMO & MMP - **Not HMOx**
- Indemnity - Non-contracted
- Integranet IPA
- Medcorp Southwest
- Medicaid includes * HTW Healthy
 - Texas Women's Program
- Medicaid HMO Plans:
 - Amerigroup/Americaid/Amerihealth Star+Plus
 - Community Health Choice Star program
 - CHIP
 - Evercare Star / Star+Plus
 - Molina Healthcare MCD/CHIP
 - Texas Health Network / PCCM
 - United Healthcare Community Health Plan
 - Star & StarPlus
 - Superior Medicaid
- Medical Control - HHPO
- Medicare HMO Plans:
 - Superior Medicare
- Medicare Traditional
- Medicare Advantage Plans:
 - Advantra Freedom PPO **Not HMO**
 - Aetna PPO/HMO
 - Amerigroup-Amerivantage HMO
 - AARP-Medicare Complete
 - BC/BS of Texas: Blue Medicare PPO/HMO
 - Care Improvement Plus
 - Community Health Choice, Bronze, Silver, Gold
 - Evercare of Texas, LLC : Plan MH
 - Health Med Pearl
 - Health Net Pro
 - Humana Ins Co: Humana Gold Choice,
 - Humana Choice PPO
 - Molina
 - Secure Horizons Medicare Replacement
 - SelectCare of Texas, LLC: Texan Plus, Texan

Don't see your insurance listed?

Call our Business Office at 281-481-3208.

- Complete, Texan Value
 - Texas HealthSpring: Advantage, Metro
 - Advantage Plus, True Choice
- United Healthcare:
 - Well Care
- Medicare Railroad
- MetLife
- Molina
- Multiplan
- MyBlue Health
- NAPP
- National Preferred Provider Network (NPPN)
- Pacificare
- PHCS
- Point Comfort
- PPC – Patient Physician Cooperative
- PPONext - HHPO
- Preferred Plan of Texas
- Premier/HAS
- Pronet
- Prudential
- Randalls
- Renaissance - Texas Health Spring
- Secure Horizons
- Select Care - Texans Plus
- TX Annual Conf. of United Methodist Churches
- Texas True Choice - Beechstreet
- Texas Municipal League (TML)
- TriCare Standard
- TriCare Prime **with Authorization only**
- *TriWest for VA patients
- TRS Care – Aetna **Not in network TRS Active Care group 866344**
- UMR – United Medical Resources
- Unicare - Performance, Classic, PPO, HMO
- United Healthcare
- United Healthcare Compass, Balanced, and Plus
 - (Marketplace/ACA)
- United Healthcare Community Plan Star & Star Plus, MMP
- United Health One
- USA Managed Care
- Van Lang IPA
- WellCare
- WellMED AARP