

PHYSICIAN REFERRAL

The Rose SOUTHEAST
12700 N. Featherwood
Suite 260
Houston TX 77034
281.484.5626 *Fax*

The Rose GALLERIA
5420 West Loop South
Suite 3300
Bellaire, TX 77401
713.668.3173 *Fax*

Make your APPOINTMENT TODAY!
281.484.4708 *Main number*
TheRose.org *Online*



Every Woman Deserves

The Rose

Quality Breast Health Care

Date: _____

Patient Name: _____

Phone: _____ Birthdate: _____

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

Diagnosis (Dx): _____

Breastfeeding? Yes No

Pregnant? Yes No

Breast Implant(s)? Yes No

Saline

Silicone

SCREENING 3D

- No Symptoms
Annual screening
Patients with NO symptoms or lumps
NO recent breast imaging abnormality

- HIGH RISK
Strong family history
Positive genetic markers

BONE DENSITY

Bone density test: Hip and Spine

Indications: _____

DIAGNOSTIC BREAST IMAGING

Mammography and/or ultrasound
when clinically indicated 3D

Indications

- Abnormal mammogram report
- Lump or mass palpated by clinician:
_____ please indicate location
- Lump or mass palpated by patient
- Nipple Discharge: _____
please indicate color
- Personal history of breast cancer
(within 5 years of diagnosis)
- Other: _____

PLEASE PRINT

Referring Physician Name (Please Print):

Facility _____

Phone _____

Fax _____

NPI Number _____

Referring Physician Signature (Required):

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

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 (_____).
 - Films/CDs from the two most recent mammograms and/or ultrasounds and the reports 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 old films to arrive. **Films/CDs 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

Don't see your insurance listed?
Call our Business Office at 281.481.3208

Accountable Health Plans
ACA – Affordable Care Act:

- Aetna
- Allied
- BCBS-HMO/PPO
- Cigna
- Community Health Choice
- Molina Healthcare
- Pan American
- United Healthcare Compass, Balanced, and Plus

Admar/Med Network
Aetna – all plans except Memorial Hermann, HCA (can be seen with authorization), Kelsey-Seybold
Aetna Medicare Advantage
Affiliated Healthcare/PHN
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
Care Improvement PPO
CCN
Champ VA
Cigna – all plans except Renaissance or Kelsey Seybold
Community Health Choice

Coventry Healthcare – GEHA only
Evercare of Texas
Fiesta
First Health
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 - **Not HMOx or MMP**
Indemnity - Non-contracted
Medcorp Southwest
Medicaid includes * HTW Healthy Texas
Women's Program
Medicaid HMO Plans:
Amerigroup/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
Medical Control - HHPO
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 Complete, Texan Value
Texas HealthSpring: Advantage, Metro Advantage Plus, True Choice
United Healthcare:
Well Care
Medicare Railroad
MetLife
Molina all plans Multiplan
NAPP
National Preferred Provider Network (NPPN)
Pacificare
PHCS
Point Comfort

PPC – Patient Physician Cooperative
PPONext - HHPO
Preferred Plan of Texas
Premier/HAS
Pronet
Prudential
Secure Horizons
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 Not in network with MMP
United Health One
USA Managed Care
Van Lang IPA
Veterans Affairs
WellCare

Updated 06/21/2017

TWO CONVENIENT LOCATIONS FREE PARKING

