Mammography Patient History Questionnaire

[Confirmed patients name and DOB ☐ _______]

Name: __________________________________ Date: _______ DOB: _______

Number of pregnancies: ______________ Age at first pregnancy: _____ Referring Physician: ______________

Are you having any symptoms today, if so please explain? _____________

Have you ever had breast cancer? [ ] Yes [ ] No Have you ever had a breast procedure or surgery? [ ] Yes [ ] No

If yes, please complete the following:

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<tr>
<th>Procedure</th>
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<th>DATE:</th>
<th>DIAGNOSIS:</th>
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<td>MASTECTOMY</td>
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<td>CYST ASPIRATION</td>
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<td>LUMPECTOMY</td>
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FAMILY HISTORY OF BREAST CANCER: [please answer yes (y) or no (n)]

Mother ________ Daughter(s) ________ Father’s Mother ________ Mother’s Father ________
Aunt ________ Mother’s Mother ________ Father’s Aunt(s) ________ Father’s Father ________
Sister ________ Mother’s Aunt(s) ________ Father ________

MENSTRUAL HISTORY: Age at first period __________ Age at last period __________
Are you still menstruating? Y N Have you had a hysterectomy? Y N If YES-Age _______
Is there any possibility of pregnancy? No Yes Are you nursing? No Yes

Have you ever or are you now taking any of the following? Birth Control Pills ______________________
Hormone medication ________________________ Height _____ ft. _____ inches Weight _____ lbs

MAMMOGRAPHY FILM HISTORY: If YES, Where: Facility _____________________________
Location __________________________ Date __________

I agree that all information on this form is correct to the best of my knowledge. I agree to allow RIMI to obtain previous mammogram films from an outside facility.

Patient Signature __________________________ Date __________

REASON FOR TODAY’S EXAM: SCREENING: [ ] Initial or Baseline [ ] Annual Screening [ ] Other

Physician recommended DIAGNOSTIC follow-up: [ ] Pain [ ] Mass or Lump [ ] Discharge [ ] Bleeding
[ ] Calcification [ ] Dimpling

******************************************************************************

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PREVIOUS FILMS: NONE [ ] NOT AVAILABLE [ ] WITH TODAY’S FILMS [ ]

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