NORTH YORK GENERAL
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NAPBC NATIONAL ACCREDITATION PROGRAM FOR BREAST CENTERS ACCREDITED BREAST CENTER | A QUALITY PROGRAM OF THE AMERICAN COLLEGE OF SURGEONS

Breast Diagnostic Clinic (BDC) REFERRAL FORM

FORM SF0075 **Page 1 of 1** **Rev. 02/2019**

Patient LABEL / Identification Area

All reports MUST be attached to referral for appointment to be made, including:

- ✓ Diagnostic reports from the past 5 years (mammogram, US, MRI, pathology, etc.)
- ✓ Past Medical History/medication or CPP (cumulative patient profile)

NOTE: MISSING INFORMATION WILL RESULT IN RETURN OF REFERRAL AND DELAYED APPOINTMENT

FAX #: 416-756-5986

Patient Information

Name: _____ Health Card # _____

Date of Birth (M/D/Y)_____ Gender: ☐ M ☐ F Phone #:_____

Address: _____ City/Town: _____ Postal Code: _____

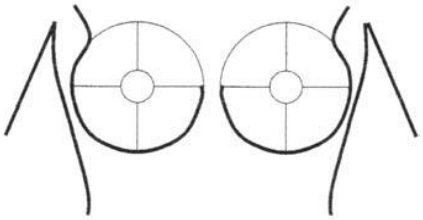
Reason for Referral

Clinical Abnormalities (check all that apply) :

☐ Suspicious mass (☐ palpable / ☐ non-palpable)
☐ Nipple discharge (☐ bloody / ☐ clear / ☐ unilateral / ☐ bilateral)
☐ Nipple inversion
☐ Skin changes
☐ Abnormal Imaging ☐ Abnormal Pathology
Other comments: _____
_____

Please mark area(s) of concern:

R L



☐ Right ☐ Left

Family or Personal History

☐ Family/Personal History of a BRCA1 or BRCA2 mutation
☐ Family History of breast and/or ovarian cancer: specify _____
☐ Personal History of breast and/or ovarian cancer: specify_____
☐ Radiation before age 30

Referring Physician Information (or stamp)

Name: _____

Address: _____

Phone: _____ Fax: _____

Billing #: _____

Primary Care Physician Information

☐ N/A: same as referring physician

Name: _____

Address: _____

Phone:_____Fax: _____

Billing #: _____

☐ Referral to BDC Surgeon: Dr: _____ or ☐ Earliest available appointment

By completing this referral, I the referring practitioner hereby consent to any additional breast imaging (e.g. mammography, ultrasound) and/or biopsies that may be required.
Referring Practitioner Signature: _____ Date: _____

Internal Use

Date Received **Referral to: BC ICC** ☐ **Medical Imaging** ☐

Approved By: Manager, BDC Approval Date: Jan/2019

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