

## Mammography

Name: \_\_\_\_\_ Appointment Date: \_\_\_\_\_

Check In Time: \_\_\_\_\_ Comments: \_\_\_\_\_

**University District**  
1200 Hilyard St. Suite 330  
Eugene, OR 97401




**Breast & MRI Center**  
3355 RiverBend Dr. #100  
Springfield, OR 97477

**If you have any questions regarding your exam, please feel free to call us:**

**General Scheduling:** (541) 334-7555 ♦ **TF:** (888) 968-7608

**Fax Orders:** (541) 334-7564

**Online:** [www.oregonimaging.com](http://www.oregonimaging.com)

Prior to your appointment	On the day of your exam
<p>To ensure the most thorough examination, it is important to have all previous mammography studies available for comparison</p> <p> If you have had prior mammograms at a facility other than Oregon Imaging Centers, please arrange to have your previous images sent.</p>	<p> Do not use deodorant, powder or body lotion as these items can compromise the quality of your exam.</p> <p> Wear a loose comfortable 2 piece outfit that is easy to remove.</p>