



**Women's Imaging Center**  
 20929 Hawthorne Boulevard  
 Torrance, CA 90503  
 (310) 303-7097 Direct Phone  
**(310) 303-7015 Fax**

Our goal is to meet the standard set forth by the Commission on Cancer and the American College of Surgeons time line for Breast Cancer Diagnosis to Treatment within 61 days. The Oncology Committee recommends that wait times for physician consultation should not exceed 3 weeks. If this is the case, your alternate MD will be selected. Thank you for allowing us to help in the care of your patients.

**Physician Preference Form for Nurse Navigation**

Physician Name	
Office Phone Number	
Fax Phone Number	
Office Contact Person or Office Stamp	

**Patient's Insurance In-Network Provider -or- Names of Preferred Providers**

Patient's Insurance In-Network Provider	Please select this choice if it is okay to schedule patient with any surgeon and/or oncologist approved by the patient's insurance.	Yes / No
Preferred Surgeon		
Alternate Surgeon		
Preferred Oncologist		
Alternate Oncologist		

If my Preferred and Alternate Physicians next available appointment or waitlist is <u>longer than two weeks</u> , it is okay to schedule with another available physician within the same medical group.	Yes / No
In the event my Preferred and Alternate Physicians do not accept patient's current insurance, it is okay to schedule with any in-network provider.	Yes / No
I approve Nurse Navigator to inform patient of biopsy results including positive or atypia results.	Yes / No
I approve Nurse Navigator to schedule Surgical and Oncology consults for my patients as recommended.	Yes / No
I approve Nurse Navigator to provide education materials and support for my patients.	Yes / No
I approve of referral for genetic testing and/or genetic counseling if patient meets the criteria.	Yes / No

<b>Physician Signature:</b>	<b>Date:</b>
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**\* PLEASE FAX COMPLETED FORM TO 310-303-7015 \***