



CLINICAL STANDING ORDER
SCREENING MAMMOGRAMS –SELF REFERRED
Patients without an established PCP

A. EFFECTIVE DATE:	February 10, 2020
B. PURPOSE	To establish guidelines for ordering screening mammograms when patients without an established PCP or UConn Health based OB/GYN provider request screening mammography.
C. STANDING ORDER	All patients meeting the criteria below, may self-refer for screening mammography.
D. SCOPE	All UConn Health Radiology sites equipped to perform mammograms.
E. AUTHORIZED USERS	Radiology Schedulers, Radiology Technicians, Radiologists
F. CRITERIA	<ol style="list-style-type: none">1. Patient is female aged 40 years or older.2. Patient does not have an established relationship with a primary care provider or UConn Health based OB/GYN provider. Primary care providers include Internal Medicine and Family Medicine.3. Patient reports not having had a screening Mammogram at UConn Health or any other institution in the past 12 months.
G. MATERIALS NEEDED	None
H. PROCEDURE	<ol style="list-style-type: none">1. Radiology scheduler confirms the patient meets the standing order criteria.2. Radiology scheduler registers the patient in the UConn electronic medical record if not previously registered3. Initiate order to perform the screening mammogram using the diagnosis code Z12.31 and schedule the mammogram.4. Perform the screening exam per established procedures. Prior to the patient leaving the mammography clinic, the mammogram is read by the radiologist and a report filed. The patient is given a printed mammogram report and the mammography lay letter before leaving the clinic.5. The Radiologist will authenticate the standing order.6. If the screening results require further diagnostic imaging, the patient will be notified (by the radiologist or designee) and provided the opportunity to schedule an appointment with the UConn Breast Health/Surgical Oncology clinic, either on the same day or at nearest available date.
I. ATTACHMENTS	None
J. REFERENCES	None
K. SEARCH WORDS	standing orders, mammography
L. COMMITTEE APPROVALS	Clinical Council _____ November 19, 2019 _____ (Date) Medical Board _____ January 14, 2020 _____ (Date)
M. FINAL APPROVAL:	<ol style="list-style-type: none">1. <u>Leo Wolansky, MD (Signed)</u> _____ <u>2/24/2020</u> Leo Wolansky, MD Date Chairman, Department of Diagnostic Imaging and Therapeutics



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	2. <u>Anne D. Horbatuck, RN, BSN, MBA (Signed)</u> <u>2/7/2020</u> Anne D. Horbatuck, RN, BSN, MBA Clinical Policy Committee Co-Chair Date
	3. <u>Scott Allen, MD (Signed)</u> <u>2/20/2020</u> Scott Allen, MD Clinical Policy Committee Co-Chair Date
	4. <u>Andrew Agwunobi, MD, MBA (Signed)</u> <u>3/6/2020</u> Andrew Agwunobi , MD, MBA UConn Health Chief Executive Officer Date
1. REVISION HISTORY:	1. Approved: February 10, 2020

END OF STANDING ORDER