Prep for your Mammogram

Get the answers to these questions ready before you go for your mammogram. Ask for help if you do not know the answers.

1.	Who is your primary care doctor?
	Name:
	Address:
	Phone:
2.	Do you smoke cigarettes? Yes No
3.	What is your ethnicity? Black/African America Hispanic/Latino White/Caucasian Asian/Pacific Islander Native American/Alaskan Native Multiracial/Biracial Ashkenazi Jew Other
4.	What is your height? What is your weight?
	ftinlbs
5.	How old were you when your period started? years old
	When was your last period?/
	Have you stopped having periods? Yes No
6.	Have you had a hysterectomy (surgery to take out your uterus)? Yes No
	Have you had a surgery to take out your ovaries?
	Yes No I don't know

7.	Are you pregnant now?			0				
	Yes	No		(1)				
	Have you ever been pregnant?			4				
	Yes	No		Ш				
	How old were you when you ha	ad your f	irst child?	ye	ars old			
	Did you ever breastfeed?							
	Yes	No						
8.	Do you take any hormone medicines (birth control pills, menopause or hot flash medicine)?							
	Yes	No	\Box					
	Did you ever?							
	Yes	No	Ь					
9.	Has anyone in your family had	breast ca	ancer?					
	Yes	No				Benet		
	If yes, how were they related to	o vou?				owner .		
	,,	, ,						
10	Do you have any breasts problems like pain, a lump or skin change?							
10.	Yes	No	pairi, a iairi	o or skin c	nange:			
	If yes, which one?							
11.	Have you had a mammogram b							
	Yes	No						
	Where was that test done?							
12.	Do you have breast implants?							
	Yes	No						
13.	Have you had surgery or biopsy	of your	breasts?		\bigcirc			
	Yes	No		/				
	Which breast had surgery or bio	psy?		/**/	·/			
	Right Left		Both					
	What were your biopsy results?	•						
	Normal	Abnorm	nal					