

Breast Imaging



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Locations:

500 Red Creek Drive, Suite 130
Rochester, NY 14623

1000 South Avenue
Rochester, NY 14620

2212 Penfield Road, Suite 500
Penfield, NY 14526

82 Holland Street, Room 101E
Rochester, NY 14605

601 Elmwood Avenue
Rochester, NY 14642

156 West Avenue
Brockport, NY 14420

195 Parrish Street, Suite 103
Canandaigua, NY 14424
585.487.3300

Authorization for Release of X-Ray Films

I, _____ authorize
(Patient Name - Please Print)

Facility Name: _____

Street Address: _____

City, State, ZIP: _____

____ To permanently transfer all original mammography films and reports according to the interim and final MQSA guidelines.

____ To temporarily transfer all original mammography films and reports according to the interim and final MSQA guidelines.

To: UR Medicine Breast Imaging
500 Red Creek Dr
Suite 130
Rochester, NY 14623

Patient's date of birth: ____/____/____

Daytime Phone: (____)_____

I release UR Medicine Breast Imaging from all legal liability that may arise from release of the information requested.

Signature of Patient (or Guardian): _____

Relationship (if not patient): _____

Date of Request: ____/____/____

CMC Radiology/MR #: _____

MQSA states on page 27 of the small entity compliance guide 900-12©(4) that "upon the request by, or on behalf of the patient, facilities must permanently or temporarily transfer the original mammograms and copies of the patient's reports to a medical institution, the patient's healthcare provider, or the patient directly."

If you are unable to honor this request, please call the film department at UR Medicine Breast Imaging (585) 487-3307.

Thank You