On the RIS website, risimaging.com, hover your mouse over the "FOR PATIENTS" option and left click on "SCHEDULE APPOINTMENT"

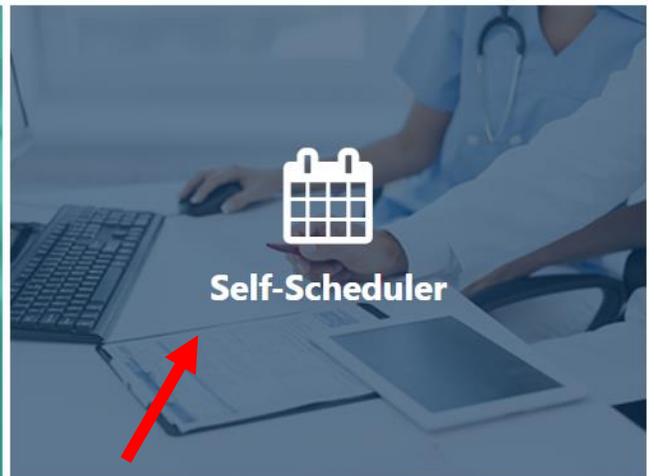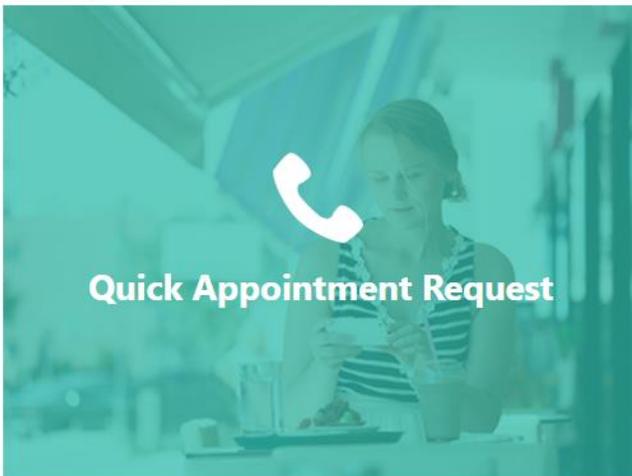**Left click on "BOOK YOUR MAMMOGRAM OR BONE DENSITY EXAM ONLINE HERE"**

This will bring you to the Web Scheduler website.

Welcome to Exam Scheduling

Quick Appointment Request   New patients and all exam requests.
                             Provide your contact information and we will call you.

Self-Scheduler   Existing Radiology and Imaging Specialists patients.
                  Schedule Screening Mammograms and Bone Density appointments entirely online.

Left click on the "Self-Scheduler" link to schedule a Bone density exam or a Screening Mammogram.

Select your exam- Left click on Mammography or Bone Density

Select your exam

Choose your exam, answer a few questions, and we'll help you find an appointment.

Mammography
Mammography
>

Bone Density
Bone Density
>

Go through answering the questions, yes or no, by left clicking on the appropriate answer, then left click on "Next".

Bone Density Questions

Do you have a physician's referral for a Bone Density? *
Yes   No

Is this exam going through your Health Insurance? *
Yes   No

Are you or could you be pregnant? *
Yes   No

Have you had barium in the last 7 days? *
Yes   No

Do you have any metal in your lower back or hips? *
Yes   No

* Required field

Back   Next

Mammography Questions

Do you have a physician's referral for a screening mammogram? *
Yes   No

Do you have any of the following symptoms? *
- Breast lump / thickening
- Discharge
- Nipple inversion
- Pinpoint pain

Yes   No

Is this a follow-up to a prior abnormal mammogram or is your order for a DIAGNOSTIC Mammogram? *
Yes   No

Do you have a personal history of breast cancer? *
Yes   No

Do you have breast implants? *
Yes   No

Have you had prior mammograms performed anywhere besides RIS Medical Imaging? *
Yes   No

* Required field

Back   Next

Left click on the exam you want to schedule. Then left click on "Next".

Select your exam

If you have an order or prescription from your physician, please select the exam ordered.
Once you have selected your exam, press 'Next' at the bottom of the page.

| MAMMO 3D SCREENING BIL |
| MAMMO 3D SCREENING LT |
| MAMMO 3D SCREENING RT |

Back   **Next**

Search for your referring physician. Enter the Last Name only, to give you a broader search. Or, enter more information to narrow it down. Then left click on "Search".

Select your physician

Let us know who your doctor is.
Fill in as much information as you can about your physician.
Then click search, most likely we already have your physician's name in our database.

| Physician's Last Name | Physician's First Name | City |
| test | physician | lakeland |

Search   **Clear**

Choose the appropriate physician, then left click on "Next", or "Continue without Physician".

Select your physician

Let us know who your doctor is.
Fill in as much information as you can about your physician.
Then click search, most likely we already have your physician's name in our database.

| Physician's Last Name | Physician's First Name | City |
| test | | |

Search   **Clear**

TEST, DOCTOR1 (DOCTOR TEST1)	614/457-4359X331		12342 DOCTOR PLACE	COLUMBUS
TEST, EMAIL	863/577-0272			
TEST, FAX	863/577-0277		2115 CRYSTAL GROVE DR	LAKELAND
TESTING, TEST	863/577-0272		1234 TEST DOCTO ST	COLUMBUS
TEST, MICONTACT	863/577-0272		999 GREEN ST	HAWTHORNE
TEST, NUANCE	863/577-0272		1305 LAKELAND HILLS BLVD	LAKELAND
TEST, NUANCE	863/577-0277		2115 CRYSTAL GROVE DR	LAKELAND

1 2

Back   **Next**   **Continue without Physician**

Enter your 10 digit phone number and choose "Send Text" or "Receive Phone Call" for verification purposes.

Fill out this form so that we may better assist you.

- Please use 'Receive Phone Call' button if you are using a land line.
- Please enter your name as it appears on your insurance card.

Phone ★

| 10 Digits Only |

Verify your phone *to protect your health information*

Send Text   Receive Phone Call

★ Required field

Back   Next

After you receive the verification code, you will enter it in this box and left click on "Verify Code".

Fill out this form so that we may better assist you.

- Please use 'Receive Phone Call' button if you are using a land line.
- Please enter your name as it appears on your insurance card.

Sent! Your verification code is on the way. Please enter code below.

Phone ★

Verify your phone *to protect your health information*

Send Text   Receive Phone Call

Verification Code

| 972576   ✕ | Verify Code   Resend Code

Enter your demographic information, then left click on "Next".

Fill out this form so that we may better assist you.

- Please use 'Receive Phone Call' button if you are using a land line.
- Please enter your name as it appears on your insurance card.

Phone ★

Verified

First Name ★   Middle Initial   Last Name ★

Date of Birth ★   Sex ★

Month ∨ Day ∨ Year   Male   Female

Address

City   State   Zip Code

∨   5 Digits Only

★ Required field

Back   Next

Thank you for scheduling an appointment. If you have any questions or need to change your appointment, please give us a call at 863-688-2334. Radiology Imaging Specialists participates with most major insurance plans, however it is the patient's responsibility to check with their plan administrator and confirm individual coverage for imaging services at RIS.

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If a matching patient is not found, we will call the number entered to schedule the appointment.

If a matching patient is found it will bring you to this screen.

You can enter your address and left click on "Search". That will calculate the distance to each of the facilities.

Enter the date you would like to be scheduled.

If you left click on each facility, it will tell you the availability at each location. Once you decide where you want to be scheduled, left click on that location.

2.7 miles	4.5 miles	12.9 miles
RIS PABLO CAMPUS 130 PABLO ST LAKELAND, FL 33803 ☎ 863-688-2334	**RIS WOMENS IMAGING CENTER** 2120 LAKELAND HILLS BLVD LAKELAND, FL 33805 ☎ 863-688-2334	**RIS PLANT CITY IMAGING** 206 W ALEXANDER ST PLANT CITY, FL 33563 ☎ 813-750-1724

	MON 2/14	TUES 2/15	WED 2/16	THU 2/17	FRI 2/18	SAT 2/19	SUN 2/20
07:00 AM				07:50 AM	07:50 AM		
08:00 AM				2 Available	2 Available		
09:00 AM			09:10 AM				
10:00 AM				10:50 AM			
11:00 AM			11:30 AM	11:10 AM			
12:00 PM	2 Available			12:50 PM	12:50 PM		
01:00 PM	2 Available		01:10 PM	01:10 PM			
02:00 PM	02:50 PM			2 Available	3 Available		
03:00 PM	2 Available		03:10 PM	3 Available	03:50 PM		
04:00 PM	2 Available		04:10 PM	2 Available	2 Available		

Notes

Please tell us the exam that your doctor has ordered.

[My Appointment History]   [Back] [Submit]

Choose the day and time that shows availability, and left click to select it and then left click on "Submit".

	MON 2/14	TUES 2/15	WED 2/16	THU 2/17	FRI 2/18	SAT 2/19	SUN 2/20
07:00 AM				07:50 AM	07:50 AM		
08:00 AM				2 Available	2 Available		
09:00 AM			09:10 AM				
10:00 AM				10:50 AM			
11:00 AM			11:30 AM	11:10 AM			
12:00 PM	✓ 12:30 PM ✕ / 12:50 PM			12:50 PM	12:50 PM		
01:00 PM	2 Available		01:10 PM	01:10 PM			
02:00 PM	02:50 PM			2 Available	3 Available		
03:00 PM	2 Available		03:10 PM	3 Available	03:50 PM		
04:00 PM	2 Available		04:10 PM	2 Available	2 Available		

Notes

Please tell us the exam that your doctor has ordered.

[My Appointment History]   [Back] [**Submit**]

This will book your appointment in the location, date, and time you chose.

Reason for Visit	Your Information	Time and Location	Summary
Mammography MAMMO 3D SCREENING BIL	TEST, FAX	RIS PABLO CAMPUS 130 PABLO ST, FL 2022-02-14 12:30 PM	Appointment Scheduled

Congratulations, your appointment is scheduled!

We look forward to seeing you on Monday, February 14, 2022, 12:30 PM.

Email Confirmation

Reason:	MAMMO 3D SCREENING BIL
Appointment:	Monday, February 14, 2022, 12:30 PM
Location:	RIS PABLO CAMPUS
	📍 130 PABLO ST, LAKELAND, FL 33803
Referred by:	TEST, FAX
Appointment Number:	90608601
Before procedure:	Please arrive 30 minutes prior to appointment. Wear a 2 piece outfit and no powder or deodorant in the underarm or breast area. If outside images are available, please bring to appointment and arrive one hour early.

🖶 Print   🕐 My Appointment History   **Schedule Another**

Be sure to read the confirmation and preparation for the exam.