



Membership Application

MEDICAL FACILITY

National Consortium of Breast Centers, Inc.
PO Box 1334, Warsaw, IN 46581-1334

Please accept our invitation to become a member of NCBC. Complete this form and mail or fax with payment to the NCBC office. Payment may be made by check, money order, Visa, MasterCard, Discover or American Express. Upon receipt of this information, your membership certificate and membership materials will be sent to you.

The entity must be a direct provider of patient care. Membership materials, which include membership certificates and Internet listings, will be under the facility/institution/practice name. One individual is designated as the primary member who will receive the member rate to the Annual Interdisciplinary Breast Center Conference.

Contact Information

Name _____

First

M. I. (if used)

Last

Professional Initials (MD, RN, RT, PhD)

Title/Position _____

Specialty _____

Department _____

Facility Name _____

Facility Street Location Address _____

City, State, Zip _____

Facility Mailing Address if different from Street Address _____

Business Numbers for General Public/Clients:

Voice _____

Fax _____

Website _____

Direct Numbers of Applicant

Voice _____

Fax _____

Email _____

Patient Services - This information will appear on your Internet Listing

Mobile Mammography

- Provided
 Not provided
Number of units (sites) _____

Self-Referrals Accepted

___ yes ___ no

Diagnostics

- fine needle (FNA)
 core biopsy
 sonography
 ultrasound
 stereotactic
 galactography
 scintimammography
 osteoporosis testing
 MRI Guided Needle Biopsy

Rehabilitation

- Lymphedema program
 Physical Therapy
 Prosthesis Fitting

Other services for women offered on site

- Coordination of pre-natal services
 Coordination of ob/gyn services
 Coordination of osteoporosis services
 Coordination of preventative services
 Participate in clinical trials

Interdisciplinary Breast Team

- Hold Multidisciplinary Breast Conference
 Holds Weekly Prospective Breast Conference
 Has Certified Breast Patient Navigator On Site
 Has Certified Clinical Breast Examiner On Site

Certifications/Accreditations

- NQNBC
 NAPBC
 BICOE

Treatment

- Chemotherapy
 Radiation therapy

Patient Education

- High Risk counseling
 Patient Resource literature
 Patient Resource library/dedicated area
 Complementary and Alternative medicine
 Life Styles
 Nutrition counseling
 Psychosocial counseling
 Patient educator on staff
 Patient Advocacy and Survivorship Groups
 Coordinate Social Service options for patients

Surgical

- Reconstructive surgery
 Cosmetic Surgery
 Sentinel Lymph node mapping and biopsy
 Ductal Lavage for high risk women

Facility Description

Please provide a description of your facility (I.e., practice setting, ownership, services provided, staff). This information will appear on your Internet Listing in our Breast Center Directory. Please email description to ncbc@breastcare.org for your listing.

Facility or Staff Picture

You may provide a digital photo and send to ncbc@breastcare.org for your listing.

NQMBC

As a facility member, you have access to our quality program, NQMBC. Would you be interested in participating in this program?

- Yes, please send me information
 No, thank you

Payment Information**Dues Payment Schedule:**

- Membership is good for one year from date of payment.
- Annual dues are \$600 with the benefits listed below.
- Facility group rate discount -10% off registration to our annual conference with coupon code, limit up to five staff members.
 - Our 24 hour information exchange for all members to get questions answered.
 - Our #1 benefit, and probably most important, is our Breast Center of Excellence certification thru NQMBC, which also includes a National Quality data collection for the facility.
 - For your staff, we offer the most comprehensive NEXT level Certifications for Navigator, CBE, and BSE in the industry in regards to multidisciplinary care.
 - Have your job opening listed free on the NCBC website (\$400.00 value);
 - The highly acclaimed NCoBC Conference is a phenomenal experience for your whole team and now includes:
 1. An average of 80 world renowned speakers
 2. Close to 100 breast industry exhibitors with the most advanced technology and software to date.
 3. The Best Valued Education out there with up to 25 CEU's available per conference.
 - Finally, you will receive NCBC Membership Certificates to display in your office. One with your facility name only and the other with both your name and the name of your facility.

Payment Options:

- Fax: 574.267.8268 (credit card only)
 Mail to: NCBC, P.O. Box 1334, Warsaw, IN 46581

Card Number _____

Exp. Date _____

CVV2#: _____

Name as it appears on card _____

Charge amount authorized \$ _____

Signature _____

Date of Application _____