Chart - Test Details	4/7/25, 12:50
Name: Ann Lalonde	PCP: Legal Name: Ann Lalonde
DEXA, BONE DENSITY STU	IDY
Results New	
Study Details	
Narrative & Impression Report generated by voice recognition sof 43 on 4/7/2025 12:24 PM.	ftware by Sandhu, MD at workstation RMT-DI-DIAG-
EXAMINATION: MA DEXA, BONE DENS	SITY STUDY
EXAM DATE: 4/7/2025 8:05 AM	
CLINICAL HISTORY: Diagnosis Info: Ost	eopenia of neck of left femur
ADDITIONAL CLINICAL HISTORY: None	<u>ک</u> ـ
COMPARISON: 04/18/2023 MA DEXA, B	ONE DENSITY STUDY
	absorptiometry, bone density measurements were obtained in the density measurement(s) are substituted when clinically
FINDINGS:	
RIGHT FEMORAL NECK:	
T-Score: -1.7	
Z-Score: -0.4	
RIGHT TOTAL HIP:	
T-Score: -1.4	
Z-Score: -0.4	
LEFT FEMORAL NECK:	
T-Score: -1.8	
Z-Score: -0.4	
LEFT TOTAL HIP:	

T-Score: -1.7 Z-Score: -0.7

TOTAL LUMBAR SPINE: T-Score: -1.2 Z-Score: 0.3

RIGHT HIP FRAX SCORE: Major Fracture: 15% Hip Fracture: 1.7%

LEFT HIP FRAX SCORE: Major Fracture: 15% Hip Fracture: 1.7%

Comparison to the previous measurements: Decrease in bone mineral density by 5.5% compared to prior study.

IMPRESSION:

1. Osteopenia based on the T-score of the left hip.

2. Please reference the included Bone Health and Osteoporosis Foundation guidelines regarding the initiation of pharmacologic treatment for primary and secondary fracture prevention.

T-scores: Bone mineral density above or below mean compared to young adult. >= -1.0: Normal > -2.5: Osteopenia

<= -2.5: Osteoporosis

Z-scores: Fracture risk assessment related to others same age.

> +1.0: Very low risk
+0.5 to +1.0: Below average risk
-0.5 to 0.5: Average risk
-0.5 to -1.0: Above average risk
-1.0 to -2.0: Very high risk
< -2.0: Extremely high risk

FRAX Version 3.00. Fracture probability is calculated for an untreated patient. Fracture probability may be lower if the patient has received treatment.

The Bone Health & Osteoporosis Foundation recommends considering pharmacologic treatment for primary fracture prevention in postmenopausal women and men greater than or equal to 50 years old who have the following:

* T-score <= -2.5 at the femoral neck, total hip, lumbar spine, or 33% radius measurements by DEXA. (33% radius: some uncertainty with existing data)

* Osteopenia WITH a 10 year hip fracture risk >= 3% OR 10 year major osteoporosis-related fracture risk >= 20% based on the US-adapted FRAX model (Please reference the patient's documented FRAX scores)

The Bone Health & Osteoporosis Foundation recommends considering pharmacologic treatment for secondary fracture prevention in postmenopausal women and men greater than or equal to 50 years old who have the following:

- * Fracture of the hip or vertebra regardless of BMD
- * Fracture of the proximal humerus, pelvis or distal forearm in patients with osteopenia

Signing Physician Signing Date/Time

Sandhu 04/07/2025 12:44 PM

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