Impression

Bone Mineral Density Classification (WHO): Osteopenia (lowest T score is between -1.0 and -2.5).

FRAX 10-year risk of major fracture: 6.5 %

FRAX 10-year risk of hip fracture: 1.9 %

OVERALL BONE DENSITY CALCULATED FOR THIS PATIENT IS COMPATIBLE WITH OSTEOPENIA.

The WHO Fracture Risk Assessment (FRAX) algorithm is based on self-reported clinical risk factors and the measured femoral neck BMD, and is not validated for patients who have been medically treated for osteoporosis. Some risk factors (e.g., falls, recent decline in bone density, number and type of prior fractures) are not captured in the FRAX model, which may result in an under- or over-estimation of fracture risk.

BONE DENSITOMETRY-- Narrative

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** HISTORY **:
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77 years old, evaluate bone mineral density.

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** TECHNIQUE **:
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Bone mineral density (BMD) measurements performed on a Hologic dual-energy X-ray absorptiometry (DXA) scanner.

COMPARISON: DEXA BONE DENSITY AXIAL. 3/16/2021

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** FINDINGS **:
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LUMBAR SPINE BMD $= 0.976 \text{ g/cm}^2$

LUMBAR SPINE T-score = -1

LUMBAR SPINE Z-score = 0.1

LUMBAR VERTEBRAL BODIES INCLUDED: L1, L2, L3, L4

TOTAL LEFT HIP BMD = 0.845 g/cm^2

TOTAL HIP T-score = -1.2

TOTAL HIP Z-score = -0.3

LEFT FEMORAL NECK BMD = 0.761 g/cm²

FEMORAL NECK T-score = -1.2

FEMORAL NECK Z-score = 0.2

When compared to the prior study, the BMD change in the lumbar spine is 15.8% (statistically significant) and the BMD change in the total hip is 12.6% (statistically significant).

Data used for FRAX calculation (demographics and clinical risk factors): 77 years, Male, US (Caucasian), Neck BMD=0.761, BMI=24.8