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EXAM DATE: July 9, 2019

NAME: VAN HAVERBEKE, JANICE

Accession(s): [REDACTED]
Procedure(s): BMD HIGH RISK

CLINICAL HISTORY: Follow up
No history of prolonged corticosteroid use, fragility fracture, or bone building medication.

[REDACTED] Gender: Female
Limitations of Study: NONE

LUMBAR SPINE (L1-L4)
BMD g/cm²: 0.952, T-score: -1.9

FEMORAL NECK
BMD g/cm²: 0.743, T-score: -2.1

TOTAL HIP
BMD g/cm²: 0.752, T-score: -2.0

Comparison with most recent BMD study: 2017
L1-L4 - 0.085, Significant yes Total Hip - 0.046, Significant yes

DIAGNOSTIC CATEGORY: Low bone mass
TEN YEAR FRACTURE RISK: Moderate, 10-20%
FOLLOW-UP RECOMMENDATIONS: 1 year follow-up. There has been statistically significant improvement in the spine and total hip since 2017.

>= 50 years of age
Osteoporosis: T-score <= -2.5
Low Bone mass: T-score < -1.0 and > -2.5
Normal: T-score >= -1.0
< 50 years of age
Below expected range for age: Z-score <= -2.0
Within expected range for age: Z-score > -2.0
Assessment of Basal 10 year fracture risk is based upon the 2013 CAROC
(Canadian Association of Radiologists and Osteoporosis Canada) System.
LSC for LXA L1-L4 0.042 g/cm² Total Femur 0.024 g/cm² Femur Neck 0.042 g/cm²

Edited by: TR