

Name: Kathleen Nusp [REDACTED]

# XR DEXA BONE DENSITY - Details 9/10/20 RECENT

## Study Result

### Narrative

X-ray DEXA Bone Density

Dear [REDACTED]

Your patient Kathleen Nusp completed a BMD test on 09/10/2020 at UPMC PINNACLE WEST SHORE. The following summarizes the results of our evaluation.

### Patient Biographical Information:

Gender: Female

[REDACTED]  
Ethnicity: White

Treatments: Calcium, Prolia/Monoclonal antibody, Vitamin D

Fractures: None

Indications: Caucasian, Osteoporosis, Postmenopausal, Secondary Osteoporosis, Tobacco User

### Densitometry Results:

Site Region Date BMD T-score Z-score

Classification

AP Spine L1-L4 09/10/2020 0.744 g/cm<sup>2</sup> -3.6 -1.9

Osteoporosis

AP Spine L1-L3 09/04/2018 0.689 g/cm<sup>2</sup> -4.0 -2.3

Osteoporosis

Left Femur Neck 09/10/2020 0.617 g/cm<sup>2</sup> -3.0 -1.1

Osteoporosis

Left Femur Neck 09/04/2018 0.583 g/cm<sup>2</sup> -3.3 -1.4

Osteoporosis

Left Femur Total 09/10/2020 0.657 g/cm<sup>2</sup> -2.8 -1.1

Osteoporosis

Left Femur Total 09/04/2018 0.623 g/cm<sup>2</sup> -3.1 -1.4

Osteoporosis

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Left Forearm Radius 33% 09/10/2020 0.550 g/cm<sup>2</sup> -3.7 -1.5

Osteoporosis

Left Forearm Radius 33% 09/04/2018 0.575 g/cm<sup>2</sup> -3.4 -1.4

Osteoporosis

World Health Organization (WHO) criteria for post-menopausal, Caucasian Women:

Normal T-score at or above -1 SD

Low Bone Mass T-score between -1 and -2.5 SD

Osteoporosis T-score at or below -2.5 SD

FRAX Results:

FRAXdata not provided due to osteoporosis.

Impression:

Osteoporosis based on the lowest bone mineral density. The fracture risk is high. Patient is on treatment.

Recommendations:

According to the National Osteoporosis Foundation (NOF) Clinician's Guide, at least 1200 mg elemental calcium, 800-1000 IU Vitamin D, regular weight-bearing exercise, and smoking cessation with limited alcohol intake is recommended for all postmenopausal women and men 50 years of age and older.

Health care providers should also consider FDA-approved medical therapies including bisphosphonates, calcitonin, estrogens, estrogen agonist/antagonist and/or parathyroid hormone for the treatment of osteoporosis, hip or vertebral fracture, or low bone mass with 10-year probability of hip fracture  $\geq 3\%$  and/or a 10-year probability of a major osteoporosis-related fracture  $\geq 20\%$  based on the US-adapted FRAX algorithm.

Clinical thresholds presented are intended as guidelines only. Clinicians should tailor their recommendations and, in consultation with their patients, devise individualized plans for osteoporosis prevention and treatment.

Follow-up:

People diagnosed with osteoporosis or low bone mass should be re-evaluated with bone densitometry every 2 years. More frequent evaluation at 1 year may be appropriate following initiation of treatment or changing therapy.

Testing frequency may be altered from these guidelines according to clinical judgment.

## Result Notes

Notes recorded by [REDACTED] on 9/11/2020 at 1:16 PM EDT

Known condition. Follows with specialist

## Images

Scan on 9/10/2020 12:36 PM

## Component Results

There is no component information for this result.

## General Information

Ordered by [REDACTED] \*

Collected on 09/10/2020 8:31 AM

Resulted on 09/10/2020 12:34 PM

Result Status: Final result

This test result has been released by an automatic process.

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