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- * Major osteoporotic fracture risk without prior fracture is 9.9%
- * Major osteoporotic fracture risk with prior fracture is 16%
- * Hip fracture risk without prior fracture is 1.4%
- * Hip fracture risk with prior fracture is 2.2%

The National Osteoporosis Foundation recommends that FDA approved medical therapies be considered in postmenopausal women and men age greater than or equal to 50 years with the following:

1. Hip or vertebral fracture;
2. T score of less than or equal to -2.5 at the spine or hip;
3. Osteopenia and 10 year fracture probability by FRAX of greater than or equal to 20% for major osteoporotic fracture or equal to 3% for hip fracture.

Comment:

All treatment decisions, including pharmacologic treatment, require clinical judgment and consideration of individual patient factors, including patient preferences, comorbidities, previous drug use and risk factors not captured in the FRAX model, e.g. fragility, falls, vitamin D deficiency, increased bone turnover, and interval significant decline in bone mineral density.

Workstation: [REDACTED]

Imaging

DXA BONE DENSITY SCAN STANDARD 2 SITES (Order: [REDACTED]) - 3/20/2026

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Seen by patient Sharon Palmertree on
3/24/2026 8:06 PM

Study Result

Narrative & Impression

PROCEDURE: DXA bone mineral density examination was performed with a Hologic scanner.

CLINICAL HISTORY: Postmenopausal [Z78.0 (ICD-10-CM)]

COMPARISON STUDY: 03/19/2024

* Lumbar Spine

L1-L4

Bone Mineral Density (BMD): 0.852 g/cm²

T-score: -1.8

Lumbar Spine Peak Reference (PR): 81.0 %

Lumbar Spine BMD Change vs. Previous: 11.2%*

* Left Hip

Region: Femoral neck and total hip

Femoral Neck BMD: 0.678 g/cm²

Femoral Neck T-score: -1.5

Femoral Neck Peak Reference (PR): 80.0 %

Femoral Neck BMD Change vs. Previous: 3.8%

Total Hip BMD: 0.828 g/cm²

Total Hip T-score: -0.9

Total Hip Peak Reference (PR): 88.0 %

Total Hip BMD Change vs. Previous: 7.0%*

IMPRESSION:

Impression:

1. The lumbar spine and femoral neck have bone mineral density of osteopenia with measurements that show increased risk for fracture.
2. The hip total has bone mineral density that is in the normal range.

WHO Fracture Risk Assessment Tool (FRAX) estimates 10 year fracture risk as follows:

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Results

Status: Final result**(Exam End: 3/19/2024 1:09 PM)**

Study Result

Narrative & Impression

A DXA bone mineral density examination was performed with a Hologic scanner. The patient is a 67 y.o. female with a history of post-menopause.

Previous Study Comparison: 12/7/21

The lumbar spine was examined from L1 - L4. In total, the bone mineral density is 2.6 standard deviations below the predicted peak bone mass and is 73% of normal. The lumbar spine measurement is 0.766 g/cm².

The left hip was examined in several regions. In total, the bone mineral density is 1.4 standard deviations below the predicted peak bone mass and is 82% of normal. The total hip measurement is 0.774 g/cm².

The femoral neck measurement is 1.8 standard deviations below the predicted peak bone mass and is 77% of normal. The femoral neck measurement is 0.653 g/cm².

FRAX not reported because bone mineral density of osteoporosis.

IMPRESSION:

Impression: The left hip as bone mineral density of osteopenia with increased risk for fractures. The lumbar spine has bone mineral density of osteoporosis with high risk for fractures. There is a statistically significant decrease in bone mineral density of the lumbar spine by 5.9% when compared to the prior study.