

Arthritis and Osteoporosis Consultants of the Carolinas

Bone Density Report

Name: BOGGS, SUZANNE
Patient ID: [REDACTED]
Referring Provider: [REDACTED]

Sex: Female
Ethnicity: White
Date of Birth: [REDACTED]

Indication: [REDACTED] Caucasian postmenopausal female; screening for osteoporosis.

Accession number: [REDACTED]

Bone Density: Exam date 2/27/2020

Region	BMD (g/cm ²)	T-score	Z-score	Classification
AP Spine(L1-L4)	0.749	-2.7	-1.9	Osteoporosis
Femoral Neck(Left)	0.527	-2.9	-2.1	Osteoporosis
Total Hip(Left)	0.630	-2.6	-2.1	Osteoporosis
Femoral Neck(Right)	0.527	-2.9	-2.1	Osteoporosis
Total Hip(Right)	0.642	-2.5	-2.0	Osteoporosis
Total Hip Mean	0.636	-2.6	-2.1	Osteoporosis

World Health Organization criteria for BMD impression classify patients as Normal (T-score at or above -1.0), Osteopenia (T-score between -1.0 and -2.5), or Osteoporosis (T-score at or below -2.5).



FRAX® WHO Fracture Risk Assessment Tool

10-year Fracture Risk¹:

Major Osteoporotic Fracture	8.1%
Hip Fracture	2.3%

Reported Risk Factors:
US (Caucasian), Neck BMD=0.527, BMI=23.8

¹ FRAX® Version 3.08. Fracture probability calculated for an untreated patient. Fracture probability may be lower if the patient has received treatment.

Impression: This is a good quality study. The patient has osteoporosis, based on the Left Femoral Neck T-score.

Discussion: HIGH RISK OF FRACTURE. BONE DENSITY IS UNDESIRABLY LOW AT ONE OR MORE SKELETAL SITES, CONSISTENT WITH OSTEOPOROSIS. ALSO, BONE DENSITY IS LOWER THAN