

Patient Name	WEST, CAROL A	Accession	23354415Q1
Patient D.O.B.	09/08/1956	Description	BONE MINERAL DENSITOMETRY
Patient ID	QXR1292352	Study Date/Time	08/08/2025 11:14
Referring Physician	CHORLEY, HELEN	Modality	BD,SR

EXAMINATION:

BONE MINERAL DENSITOMETRY

HISTORY: Osteoporosis. Monitor BMD

68 year-old female. Height: 156.0 cm. Weight: 81.0 kg. BMI: 33.3.

Postmenopausal. Menopause age: 50 years.

No falls in last 12 months. No minimal trauma fractures.

Date of previous: 04/03/2022.

TECHNIQUE: Dual Energy X-Ray Absorptiometry (DEXA) of the lumbar spine and femoral neck were performed on the Hologic scanner. (Z scores have been calculated from Geelong Female data. T scores have been calculated from the Geelong data.) Fast array.

FINDINGS: The mean areal Bone Mineral Densitometry of the lumbar spine (L1-L4, AP projection) is 0.935 g/cm² which lies 0.2 standard deviations above the mean for age (Z score). The T score is -1.0 (Normal by WHO criteria). Change from prior study -0.020 (-2.1%).

The mean areal Bone Mineral Densitometry of the left femoral neck is 0.465 g/cm² which lies 2.1 standard deviations below the mean for age (Z score). The T score is -3.5 (Osteoporosis by WHO criteria). Change from prior study -0.003 (-0.6%).

The mean areal Bone Mineral Densitometry of the left total hip is 0.691 g/cm² which lies 1.2 standard deviations below the mean for age. The T score is -2.1 (Osteopenia by WHO criteria). Change from prior study -0.008 (-1.1%).

CONCLUSION:

The patient is at increased risk for fracture.

The BMD in the lumbar spine is at the lower limits of the normal range. The L1 and L4 vertebrae are in the osteopenic range with T-score -1.2 and 1.3 respectively. The BMD in the femoral neck is in the osteoporotic range

In comparison with the previous studies, the BMD has reduced in the lumbar spine and is essentially stable in the femoral neck.

There is a FRAX 10 year risk of major osteoporotic fracture of 11 % and hip fracture of 5.4%.

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A follow up study at 2 years may be of benefit.

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