

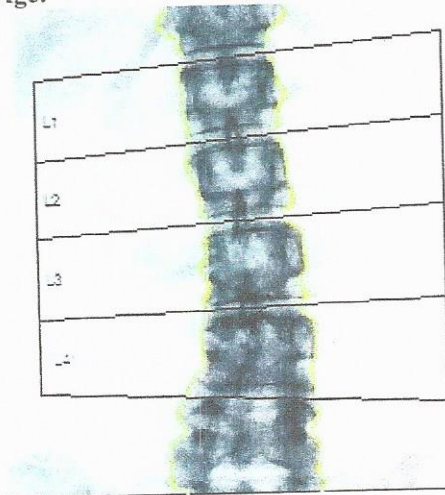
St. Luke's Medical Center
Department of Nuclear Medicine, 279 E. Rodriguez Ave., Q.C.
DXA Bone Densitometry Report

Dear Dr. Sue-Ann R. Lochen ,

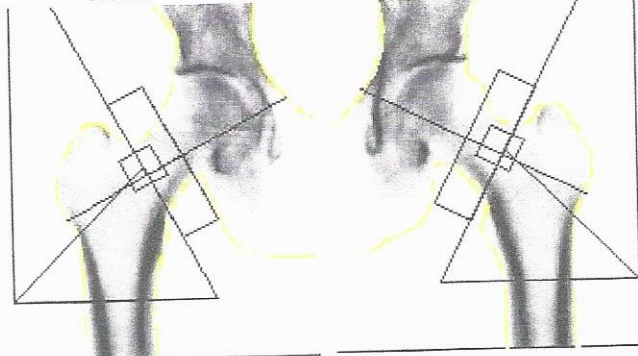
Your patient **Alma Socorro L. ABELA** completed a BMD test on 6/12/2015 using the **Lunar iDXA** manufactured by **GE Healthcare**. The following are her risk factors for osteoporosis: Asian race, post-menopausal state.

PATIENT BIOGRAPHICAL:

Name:	ABELA, Alma Socorro L.	Birth Date:	8/10/1955	Height:	156.0 cm
Patient ID:	1202164078	Exam Date:	6/12/2015	Weight:	60.0 kg
Gender:	Female	Ethnicity:	Asian	Phone:	(not specified)
Age:	59.8				

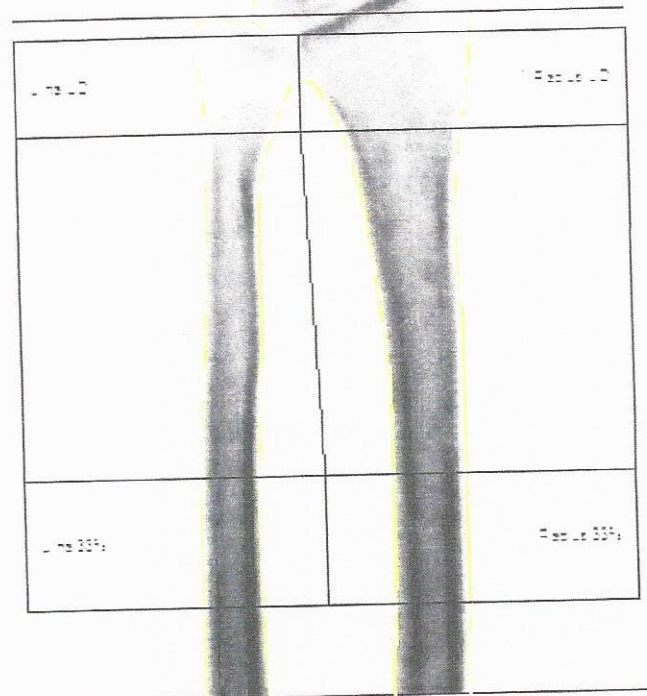


AP Spine



Right Femur

Left Femur



Scan Site	Region	BMD	T-Score	Percentage	Z-Score	Percentage
AP Spine	L1-L3	0.974 g/cm ²	-1.7	83 %	-0.4	96 %
DualFemur	Neck Right	1.019 g/cm ²	-0.1	98 %	1.2	119 %
DualFemur	Neck Left	0.953 g/cm ²	-0.6	92 %	0.7	112 %
Left Forearm	Radius 33%	0.774 g/cm ²	-1.2	88 %	-0.3	97 %

ASSESSMENT:

Using the ISCD/WHO guidelines, your patient has **low bone mineral density (osteopenia)**. The L4 vertebra was excluded from the analysis because of more than 1.0 difference in T-scores from the adjacent vertebra. Based on the WHO Fracture Risk Assessment (FRAX) Tool, your patient's 10-year probabilities of developing a major osteoporotic fracture and a hip fracture are 1.8% and 0.1%, respectively.

RECOMMENDATIONS:


Regular weight-bearing exercises, fall prevention measures, and adequate daily intake of calcium and vitamin D are recommended.


FOLLOW-UP:

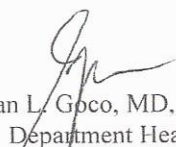
Based on these results a follow-up exam is recommended after one year.

Scan interpretation criteria and values obtained are based on the recommended guidelines of the ISCD/WHO. Should you need data beyond what is recommended, please do not hesitate to call us, as these data are stored in our database.

Sincerely,


Emeline Gail C. Caverte, MD
Resident


Irene S. Bandong, MD, FPSNM, FPCR
Consultant


Gerard Fabian L. Goco, MD, FPSNM, CCD
Department Head

This nuclear medicine report is part of the overall assessment of a patient's condition and is best explained by the attending physician to the patient since correlation with clinical, laboratory, and other ancillary parameters may be necessary for a comprehensive analysis.