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Fax Cover Sheet

To: Dr. Toronto LMC Endocrinology
Phone: (866) 701-3636
Fax: 1 (877) 562-2778

Date: Oct 24, 2025

From: Dr. Netta Khayutin
Phone: (416) 350-5900
Fax: (416) 350-5981

Number of pages including cover: 4

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Re: Lucie Laplante



Oct 24, 2025

150 York Street, Suite 1500 | P: (416) 350-5900
Toronto, ON M5H 3S5 | F: (416) 350-5981

Dr. LMC Endocrinology
LMC Endocrinology - Toronto 1929 Bayview Avenue Suite 107
Toronto, ON M4G 3E8

Patient: Mrs. Lucie Laplante
PHN: 6567 024 929WY
Birthdate: Dec 03, 1957
Mailing Address: 948 Birchcliff DriveDouro-DummerONK0L 2H0
Phone: **H:** (705) 875-8834 **W:** (____) ____-____ **C:** (705) 875-8834
Email: lucie_laplante@hotmail.com

Referring Provider:

Dr. Netta Khayutin
150 York Street, Suite 1500
Toronto, ON
M5H 3S5
Telephone: (416) 350-5900
Fax: (416) 350-5981
Billing #: 033864

Appointment Date: Please send appointment details by Fax (416-350-5981)

Referral Type: Non-Urgent

Consultation: Osteoporosis Metabolic Clinic

Reason For Referral:

67F Re: Osteoporosis, moderate fracture risk. Please see for further management

Problem History: None Recorded

Medical History: Basal Cell Carcinoma [ICD9: 17391], Hearing loss [ICD9: 837] - R side, cyst on acoustic nerve, Hypothyroidism [ICD9: 244], Retinal Detachment [ICD9: 3619], Hematuria [ICD9: 5997] - cystoscopy N, Osteoporosis [ICD9: 73300]

Active Medications: ciprofloxacin HCL 500 mg Oral Tablet [1 Tablet(s) Two times daily X 5 Day(s)] , BLEXTEN 20 MG TABLET [take 1 tab daily], SYNTHROID 88 MCG TABLET [1 Tablet(s) Once daily X 3 Mth30] [1 po od

Adjustment: dispense x 30 tabs], RYALTRIS 665-25MCG/SPRAY NASAL [2 sprays into each nostril bid], SYNTHROID 88 MCG TABLET [1 Tablet(s) Once daily X 90 Day(s)]

External Medications: None Recorded

Known Allergies: ? sulfas (Non-Drug Allergy)

As per the 2019 CPSO Transitions in Care Policy, please inform us within 14 days of receipt of this request, whether or not you are able to accept this referral. Please directly book the appointment date and time with the patient, and notify us or copy us on the notification for our records.

Please send the result and/or report to Medcan via fax to 416-350-5981.

Sincerely,

A handwritten signature in black ink, appearing to be 'Netta Khayutin', with a large, stylized loop at the end.

Netta Khayutin, MD

Electronically Reviewed to Expedite Delivery

Enclosures

Oct 10, 2025 - X-Ray Bone Density

Jun 06, 2023 - X-Ray Bone Density

Patient	Laplante, Lucie	Home Phone		Work Phone	
Health #	6567024929WY	Sex	F	Patient ID	223860
Age	67 years				
DOB	Dec 03, 1957				

Ordered By: Khayutin Netta Reported By: MEDCAN

Collection Date: Oct 10, 2025 Reviewed: Oct 14, 2025 by NettaK

Updated On: Oct 14, 2025 1:36 PM

X-Ray Bone Density
BONE MINERAL DENSITOMETRY

The Lumbar Spine(L1-L4) BMD measures 0.851 g/cm2 with a T-score of -2.7

The Left Femoral Neck BMD measures 0.837 g/cm2 with a T-score of -1.4

The Left Total Hip BMD measures 0.862 g/cm2 with a T-score of -1.2

IMPRESSION

Osteoporosis. Fracture risk is moderate. Compared to prior study from 2023, there has been a statistically significant decrease in the bone density. Nutritional and lifestyle modifications are recommended. A follow-up exam is recommended in 1 years? time.

Interpretation is based on the current guidelines of the CAR and Osteoporosis Canada.

LSC: The least significant change for this clinic has been calculated to be 0.033 g/cm2 from L2-L4, 0.027 g/cm2 for femoral neck and 0.024 g/cm2 for the total hip. Interval BMD changes must exceed these values to be considered statistically significant.

Electronically signed by: James Haroun (Oct 10, 2025 19:49:56)

Ordered By: Bone Density Reported By: MEDCAN

Collection Date: Jun 06, 2023 Reviewed: Jun 07, 2023 by DimitraT

Updated On: Oct 14, 2025 1:36 PM

X-Ray Bone Density
BONE MINERAL DENSITY

This is a 65-year-old woman with a lumbar BMD from L1-L4 of 0.922 g/cm2, corresponding to a T score of -2.1.

The femoral neck BMD is 0.838 g/cm2, corresponding to a T score of -1.4. The total femoral BMD is 0.893 g/cm2, corresponding to a T score of -0.9.

The patient has low bone mass. The 10-year absolute fracture risk is low (7%). The BMD measurements have decreased at both sites since 2015, and the changes at both sites are statistically significant. The patient is on vitamin D supplementation. Consider a 1-year BMD follow-up.

Interpretation is based on the current guidelines of the CAR and Osteoporosis Canada.

LSC: The least significant change for this clinic has been calculated to be 0.033 g/cm2 from L2-L4, 0.027 g/cm2 for femoral neck and 0.024 g/cm2 for the total hip. Interval BMD changes must exceed these values to be considered statistically significant.

Electronically signed by: Carl Bloom (Jun 06, 2023 15:31:32)