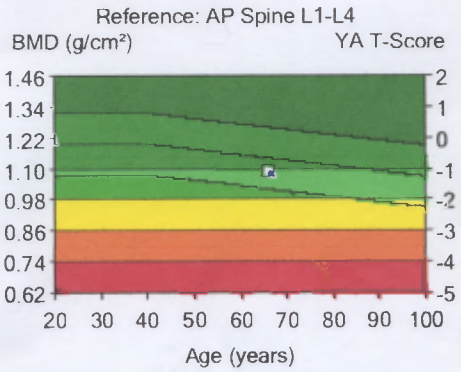
Allison Women's Imaging

4214 Andrews Hwy.

Midland, TX 79707 Ph. 432-522-3040

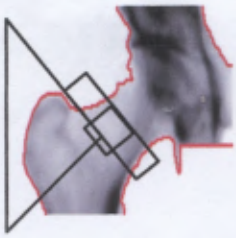
Patient:	PENNY, larry L	**Attendant:**			
Birth Date:	8/5/1938 66.0 years	**Physician:**	Dr. Best		
Height / Weight:	72.0 in. 158.0 lbs.	**Measured:**	7/29/2004	10:43:13 AM	(7.52)
Sex / Ethnic:	Male White	**Analyzed:**	7/29/2004	10:51:20 AM	(7.52)

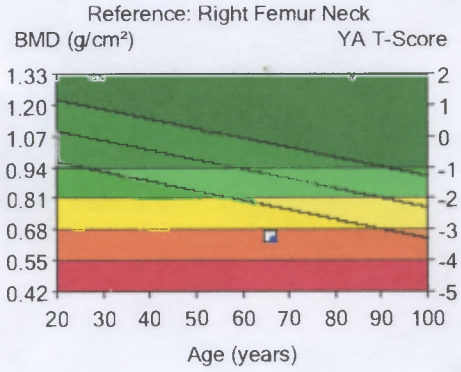


Region	BMD (g/cm²)	Young-Adult (%)	Young-Adult T-Score	Age-Matched (%)	Age-Matched Z-Score
L1	0.874	75	-2.4	81	-1.7
L2	1.173	95	-0.6	101	0.1
L3	1.183	95	-0.5	102	0.2
L4	1.113	90	-1.1	96	-0.4
L1-L4	1.088	89	-1.1	95	-0.4
L2-L4	1.155	93	-0.7	100	0.0

Matched for Age, Weight (males 25-100 kg), Ethnic
NHANES/USA, AP Spine Reference Population, Ages 20-40
Statistically 68% of repeat scans fall within 1SD (± 0.010 g/cm² for AP Spine L1-L4)

Image not for diagnosis

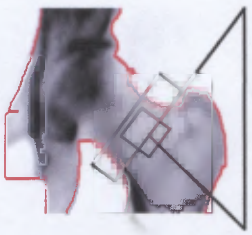


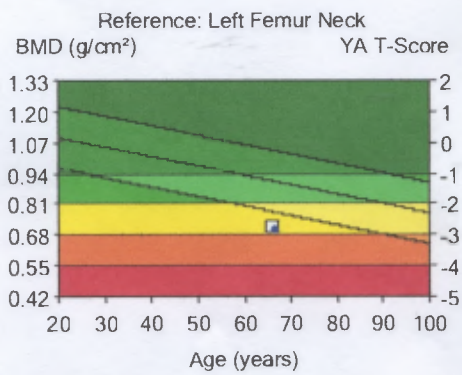


Region	BMD (g/cm²)	Young-Adult (%)	Young-Adult T-Score	Age-Matched (%)	Age-Matched Z-Score
Neck	0.652	61	-3.2	72	-2.0
Wards	0.499	52	-3.5	69	-1.7
Troch	0.686	74	-2.2	80	-1.6

Matched for Age, Weight (males 25-100 kg), Ethnic
NHANES/USA, Femur Reference Population, Ages 20-40
Statistically 68% of repeat scans fall within 1SD (± 0.014 g/cm² for Right Femur Neck)

Image not for diagnosis





Region	BMD (g/cm²)	Young-Adult (%)	Young-Adult T-Score	Age-Matched (%)	Age-Matched Z-Score
Neck	0.712	67	-2.8	79	-1.5
Wards	0.559	58	-3.1	77	-1.3
Troch	0.764	82	-1.5	89	-0.8

Matched for Age, Weight (males 25-100 kg), Ethnic
NHANES/USA, Femur Reference Population, Ages 20-40
Statistically 68% of repeat scans fall within 1SD (± 0.014 g/cm² for Left Femur Neck)

Image not for diagnosis

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DEXA Bone Densitometry Report: Wednesday, March 02, 2005

Dear Dr. Best.

Your patient larry PENNY completed a BMD test at our facility. The following summarizes the results of our evaluation.

Patient:

Name:	larry PENNY	**Height:**	72.0 in.
Patient ID:	849	**Weight:**	158.0 lbs.
Date of Birth:	8/5/1938	**Exam Date:**	7/29/2004
Gender:	Male	**BMD Device:**	GE Medical Systems Prodigy

Indications:	None
Fractures:	None
Treatments:	None

Densitometry Results:

Scan Type	Region	Measured	Age	BMD	T-Score	Z-Score
AP Spine	L1-L4	7/29/2004	65.9	1.088 g/cm²	**-1.1**	-0.4
DualFemur	Neck Mean	7/29/2004	65.9	0.682 g/cm²	**-3.0**	-1.7

Morphometry Results:

Scan Type	Region	Deformity	Measured	Age	Average Height (cm)	Average Height Z-Score	A/P Ratio (%)	A/P Ratio Z-Score
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Assessment:

World Health Organization - Definition of Osteoporosis and Osteopenia for Caucasian Women*:

Normal:	*T-Score at or above -1 SD*
Osteopenia:	*T-Score between -1 and -2.5 SD*
Osteoporosis:	*T-Score at or below -2.5 SD*
Established Osteoporosis:	*T-Score at or below -2.5 SD plus fragility fracture*

**WHO definitions only apply when a young healthy Caucasian Women reference database is used to determine T-Scores.*

- **BMD as determined from Femur Neck Mean is 0.682g/cm² with a T-Score of -3.0 is markedly low. Fracture risk is high. Treatment, if not already being done, should be started. A follow up DEXA is recommended in one year to monitor response to therapy.**
- **BMD as determined from AP Spine L1-L4 is 1.088g/cm² with a T-Score of -1.1 is considered moderately low. Fracture risk is moderate. Treatment is advised if there are other risk factors.**

Recommendations:

National Osteoporosis Foundation (NOF) guidelines recommend initiating therapy to reduce fracture risk in women with BMD:

T-Score below -2 SD

T-Score below -1.5 SD with other risk factors present

- **Mild to aggressive therapies are available in the form of Hormone replacement therapy (HRT), Bisphosphonates, Calcitonin, and SERMs. Additionally, all patients should ensure an adequate intake of dietary calcium (1200mg/d) and vitamin D (400-800 IU daily).**
- **People with diagnosed cases of osteoporosis or osteopenia should be regularly tested for bone mineral density. For patients eligible for Medicare, routine testing is allowed once every 2 years. Testing frequency can be increased for patients who have rapidly progressing disease, or for those who are receiving medical therapy to restore bone mass.**