## FOR DEXA (BONE DENSITY) REQUESTS all questions on this form must be answered U. S. Preventative Care Guidelines for Osteoporosis/bone density screening

U. S. Preventative Care Guidelines for Osteoporosis/bone density screening Every 2 years for females at age 60 for women at high risk; routinely every 2 years for women age 65 and older. The FRAX and QFrax are the tools used to access the fracture risk. They can be accessed at the the following links <u>http://www.shef.ac.uk/FRAX/tool.jsp</u> <u>http://www.qfracture.org/index.php</u>

Member name:	Member ID#:
Date of Birth:	Age:
HeightWe	eightSex: 🗌 Female 🗌 Male Ethnicity
or from minor traum	ious fracture of the wrist, spine, hip or shoulder in adult life that occurred spontaneously, ha?
2) Did either parent have	a fractured hip? YES NO
3) Does patient currently	smoke? YES NO
	eroids or have been they been on oral steroids more than 3 months? 5, what drug, dose, and for how long?
5) Does the patient have a	a laboratory confirmed diagnosis of Rheumatoid arthritis or SLE? [YES ] NO
6) Does patient have insu	lin dependent diabetes? YES NO
7) Does patient have oste	ogenesis imperfecta? YES NO
8) Does patient have untr	reated long-standing hyperthyroidism? YES NO
9) Does patient have hype	ogonadism? YES NO
10) Did patient experienc	ce premature menopause (<45 years)? <b>YES NO</b> If yes, what age?
11) Is patient taking estr	ogen only HRT? 🗌 YES 🗌 NO If yes, what drug
12) Does patient have a c	diagnosis of chronic malnutrition? 🗌 YES 🔤 NO If yes, explain
	diagnosis of malabsorption (i. e Crohn's disease, ulcerative colitis, celiac disease, steatorrhea rome? YES NO If yes, explain
14) Does patient have a d	liagnosis of chronic liver disease? YES NO If yes, explain
15) Does patient drink alo	cohol 3 or more ounces per day? YES NO
16) Previous bone minera	al density? <b>YES NO</b> (T-score) of femoral neckDate
	aking bisphosphonates? YES NO and when was drug started

Please include the following:

-results of last DEXA

-records to support all YES answers

-records to support any of the diagnoses listed below

HIV/Aids Sarcoidosis Acromegaly Adrenal atrophy and Addison's disease Postablative testicular hypofunction (testicular hypofunction; iatrogenic, postirradiation, postsurgical); other testicular hypofunction Ectopic hormone secretion, not elsewhere classified Osteomalacia, unspecified Hemochromatosis Hypophosphatasia Congenital porphyria Pernicious anemia Thalassemia Hemophilia Multiple sclerosis Primary biliary cirrhosis Mastocytosis To report an individual who is receiving ongoing drug therapy for osteoporosis and is being monitored for effectiveness Amyloidosis Gonadotropin-releasing hormone agonists Nutritional disorders Parenteral nutrition Tumor secretion of parathyroid-hormone-related peptide