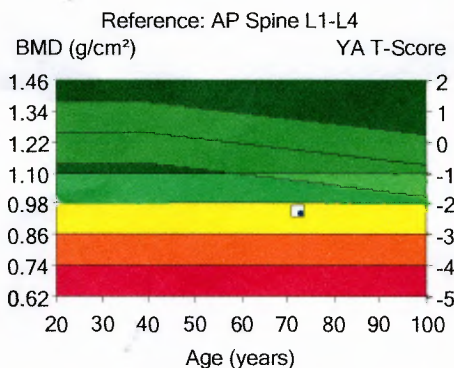
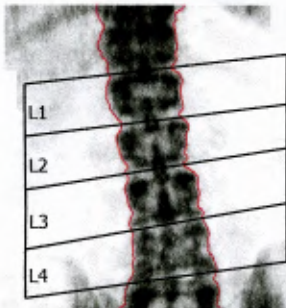


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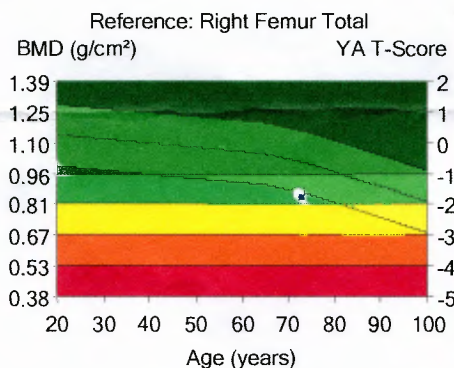
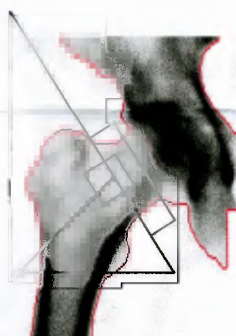
Patient:	HUFF, EDWARD L	Attendant:	Marianne Chadwick
Birth Date:	5/17/1937 72.2 years	Physician:	Dr. Best, Paul
Height / Weight:	68.0 in. 191.0 lbs.	Measured:	7/23/2009 1:35:22 PM (7.52)
Sex / Ethnic:	Male White	Analyzed:	7/23/2009 1:42:44 PM (7.52)



Region	BMD (g/cm ²)	Young-Adult (%)	T-Score	Age-Matched (%)	Z-Score
L1	0.935	81	-1.9	83	-1.6
L2	0.991	80	-2.1	82	-1.8
L3	0.999	81	-2.0	83	-1.7
L4	0.897	72	-2.9	74	-2.6
L1-L4	0.953	78	-2.2	80	-1.9
L2-L4	0.959	77	-2.3	79	-2.1

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)

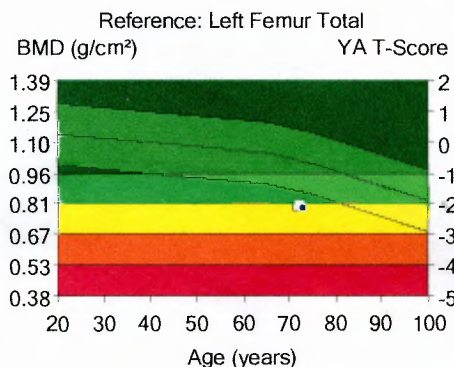
Image not for diagnosis



Region	BMD (g/cm ²)	Young-Adult (%)	T-Score	Age-Matched (%)	Z-Score
Neck	0.739	69	-2.5	80	-1.4
Wards	0.503	52	-3.5	69	-1.8
Troch	0.712	77	-2.0	80	-1.6
Shaft	1.058	-	-	-	-
Total	0.860	78	-1.7	85	-1.1

Standardized BMD for Total is 811 mg/cm².
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 (± 0.012 g/cm² for Right Femur Total)

Image not for diagnosis



Region	BMD (g/cm ²)	Young-Adult (%)	T-Score	Age-Matched (%)	Z-Score
Neck	0.674	63	-3.0	73	-1.9
Wards	0.438	46	-4.0	60	-2.3
Troch	0.656	71	-2.5	74	-2.1
Shaft	0.995	-	-	-	-
Total	0.811	74	-2.0	80	-1.4

Standardized BMD for Total is 763 mg/cm².
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 (± 0.012 g/cm² for Left Femur Total)

Image not for diagnosis

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DEXA Bone Densitometry Report: Thursday, July 23, 2009

Dear Dr. Best, Paul,

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

Patient:

Name:	EDWARD HUFF	Height:	68.0 in.
Patient ID:	059	Weight:	191.0 lbs.
Date of Birth:	5/17/1937	Exam Date:	7/23/2009
Gender:	Male	BMD Device:	GE Medical Systems Prodigy

Indications: Advanced Age, Caucasian Race.

Fractures:

Treatments: Calcium

SEE INDIVIDUAL LEVELS

Results:

Scan Type	Region	Measured	Age	BMD	T-Score	Z-Score
AP Spine	L1-L4	7/23/2009	72.1	0.953 g/cm ²	-2.2	-1.9
DualFemur	Total Mean	7/23/2009	72.1	0.836 g/cm ²	-1.8	-1.2

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 AP Spine L1-L4 is 0.953g/cm² with a T-Score of -2.2 is low. Fracture risk is high. A follow up DEXA is recommended in one year to monitor response to therapy.
- BMD as determined from Femur Total Mean is 0.836g/cm² with a T-Score of -1.8 is considered moderately low. Fracture risk is moderate. Treatment is advised if there are other risk factors.
- With a Z-Score of -1.9, this patient's BMD is low for someone of this age.
- With a Z-Score of -1.2, this patient's BMD is low for someone of this age.

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.