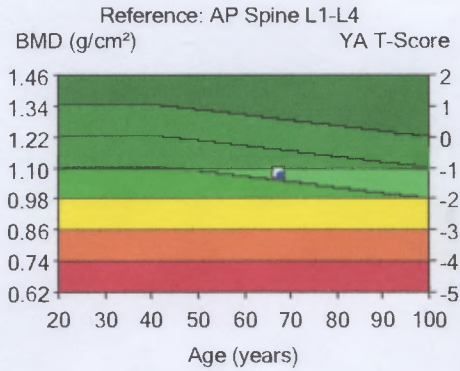
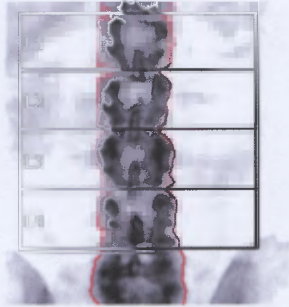


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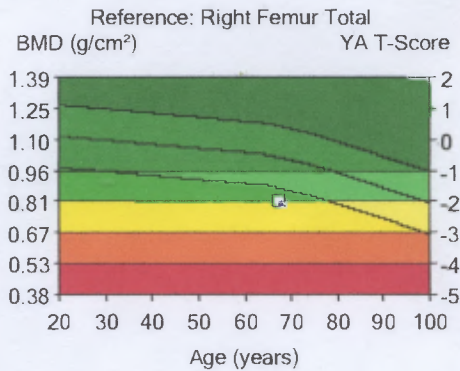
Patient:	Penny, Larry	Attendant:	Kim Sheldon
Birth Date:	8/5/1938 67.1 years	Physician:	Dr. Best, Paul
Height / Weight:	70.0 in. 176.0 lbs.	Measured:	9/7/2005 10:35:10 AM (7.52)
Sex / Ethnic:	Male White	Analyzed:	9/7/2005 10:37:32 AM (7.52)



Region	BMD (g/cm ²)	Young-Adult (%)	T-Score	Age-Matched (%)	Z-Score
L1	0.983	85	-1.5	89	-1.1
L2	1.031	83	-1.7	87	-1.3
L3	1.168	94	-0.6	98	-0.2
L4	1.130	91	-0.9	95	-0.5
L1-L4	1.081	89	-1.2	92	-0.7
L2-L4	1.112	90	-1.1	93	-0.7

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)

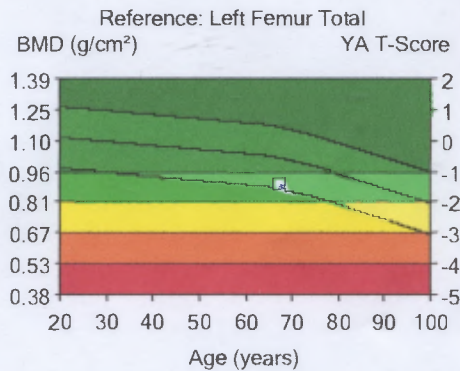
Image not for diagnosis



Region	BMD (g/cm ²)	Young-Adult (%)	T-Score	Age-Matched (%)	Z-Score
Neck	0.713	67	-2.7	77	-1.6
Wards	0.516	54	-3.4	69	-1.7
Troch	0.646	69	-2.6	73	-2.1
Shaft	1.027	-	-	-	-
Total	0.821	75	-1.9	81	-1.4

Standardized BMD for Total is 773 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	0.789	74	-2.2	85	-1.1
Wards	0.586	61	-2.9	79	-1.2
Troch	0.761	82	-1.5	87	-1.1
Shaft	1.080	-	-	-	-
Total	0.900	82	-1.4	88	-0.8

Standardized BMD for Total is 850 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: Wednesday, September 07, 2005

Dear Dr. Best, Paul,

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

Patient:

Name:	Larry Penny	Height:	70.0 in.
Patient ID:	849	Weight:	176.0 lbs.
Date of Birth:	8/5/1938	Exam Date:	9/7/2005
Gender:	Male	BMD Device:	GE Medical Systems Prodigy

Indications: Caucasian Race
Fractures: None
Treatments: Calcium

Results:

Scan Type	Region	Measured	Age	BMD	T-Score	Z-Score
AP Spine	L1-L4	9/7/2005	67.0	1.081 g/cm ²	-1.2	-0.7
DualFemur	Total Mean	9/7/2005	67.0	0.861 g/cm ²	-1.7	-1.1

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 Total Mean is 0.861g/cm² with a T-Score of -1.7 is considered moderately low. Fracture risk is moderate. Treatment is advised if there are other risk factors.
- BMD as determined from AP Spine L1-L4 is 1.081g/cm² with a T-Score of -1.2 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.