

Bone Density Test Results

Date: **[Insert Date]**

Patient Name: **[Insert Patient Name]**

Patient ID: **[Insert Patient ID]**

Dear [Patient Name],

We are writing to inform you about the results of your recent bone density test conducted on **[Insert Date of Test]**. This test is designed to measure the mineral density of your bones and assess your risk of osteoporosis and fractures.

Testing Process

The bone density test, also known as dual-energy X-ray absorptiometry (DXA), is a non-invasive procedure that involves the following steps:

- You will lie down on a padded table while a scanning arm passes over your body.
- The test typically takes about 10-30 minutes to complete.
- During the scan, you will be asked to remain still; you may be required to hold your breath briefly.
- The results are generated based on the amount of X-ray energy absorbed by your bones.

Your Results

Your bone density score is **[Insert Score]**. According to the World Health Organization (WHO) criteria:

- Normal: T-score above -1.0
- Low bone mass: T-score between -1.0 and -2.5
- Osteoporosis: T-score -2.5 or lower

Interpretation of your results is as follows:

[Insert Interpretation]

Next Steps

We recommend scheduling a follow-up appointment to discuss your results and determine any necessary actions or treatments. If you have any questions, please do not hesitate to contact our office.

Best regards,

[Insert Doctor's Name]

[Insert Clinic/Practice Name]

[Insert Contact Information]