

Dual-energy X-ray Absorptiometry (DEXA)

[Study Name/ID pre-filled]

Site Name: _____

Date Form Completed: ___/___/___ (mm/dd/yyyy)

Subject ID: _____

Visit: _____

DEXA Date Performed (MM/DD/YYYY)	Age of patient	Hip: T Score	Hip: Z Score	Lspine: T Score	Lspine: Z Score	Femur: T Score	Femur: Z Score
___/___/___	[derived field]						
___/___/___	[derived field]						
___/___/___	[derived field]						
___/___/___	[derived field]						
___/___/___	[derived field]						

Missing Value Codes:

- A = Lab or equipment failure
- M = Ran out of time
- N = No data
- X = Unknown
- E = Examiner error

- O = Obsolete CRF
- D = Not applicable
- P = Unable to test due to permanent disability
- T = Unable to test due to temporary condition
- S = Scheduling problem

GENERAL INSTRUCTIONS

This form contains data elements that are collected to measure bone mineral density. The items are typically used to diagnose and follow osteoporosis.

Responses to categories are obtained from health professionals performing the procedure.

SPECIFIC INSTRUCTIONS

Please see the Data Dictionary for definitions for each of the data elements included in this CRF Module.

- **DEXA Date Performed** – The preferred format for recording date is MM/DD/YYYY. 99/99/9999 can be used to indicate an unknown date.
- **Age of patient** – This is a derived field based on Date of Birth and Date performed.
- **Hip, Lspine and Femur T score** – *No additional instructions*
- **Hip, Lspine and Femur Z score** – *No additional instructions*
- **Missing Value Codes** – Please use these codes for all questions where a value is requested but no value is available. The purpose of these codes is to prevent any blanks on the CRF.