Hamilton Health Sciences

BONE MINERAL DENSITY REFERRAL

Osteoporosis – Body Composition

Phone: 905-577-1484 Fax: 905-521-2358

Patient Information:	
Patient Name:	☐ Male ☐ Female
Street Address:	Birth Date: (yyyy/mm/dd) _____
City:	Health Card Number with Version Code:
Province:	
Postal Code:	Phone Number:

Patient Mobility: ☐ Ambulatory ☐ Mobility Aid ☐ Wheelchair ☐ Paraplegic ☐ Lift Required

Previous Exam Information: Prior BMD: ☐ Yes ☐ No

Date: (yyyy/mm/dd) _____ Location: _____

* Date and results of last BMD **MUST** be provided (Attach Report)

Is Patient on any medication for Osteoporosis?

☐ No ☐ Yes - Type _____

Initiation Date of Therapy: _____ (yyyy/mm/dd) End of Therapy Date: _____ (yyyy/mm/dd)

Exam Ordered: ***As per new 2026 OHIP Guidelines (*Ordering Guidelines on Reverse)***

- ☐ Baseline
- ☐ High Risk Follow-Up ➔ 3 years
- ☐ Follow-Up with Secondary Cause or Risk Factor for Rapid Bone Loss ➔ 1-2 years
- ☐ Low/Moderate Risk Follow-Up ➔ 5 years
- ☐ Body Composition - Whole Body

Patient Risk Factor Screening (Please check all applicable)

- ☐ Parental Hip Fracture
- ☐ Current Smoker
- ☐ Low Body Weight (<60 kg)
- ☐ Fragility Fracture
- ☐ Falls (>2 in the last year)
- ☐ Glucocorticoid Therapy
  Dose _____ Duration: _____
- ☐ High Alcohol Intake
- ☐ Body Mass Index <20 kg/m^2

☐ Other: _____

Referral Form *(EPIC document type)*

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Secondary Risk Factors:	See below	Required to have a repeat exam in 12 months

- ☐ New Fragility Fracture
- ☐ Drugs that have adverse effect on bone health: _____
- ☐ Rheumatologic Disorder: _____
- ☐ Cancer Therapy *(i.e. Aromatase Inhibitor, Stem Cell)*: _____
- ☐ Genetic Disorders *(i.e. Osteogenesis Imperfecta)*: _____
- ☐ Endocrine Disorders *(i.e. Hyperparathyroidism)*: _____
- ☐ Gastrointestinal & Nutritional *(i.e. IBD, Celiac)*: _____
- ☐ Other: _____

Physician Signature: _____ OHIP Billing Number_____

Printed Name: _____ Date: (yyyy/mm/dd) _____

Additional Report Copies To: _____

* Ordering Guidelines for Referrers:

Causes **of secondary osteoporosis or that have adverse effects on bone health**

Drugs	**Gastrointestinal & Nutritional Disorders**
• Glucocorticoid steroids • Aromatase Inhibitors • Anticonvulsants Cancer therapy Immunosuppressants	• Inflammatory bowel disease Celiac disease • Eating disorder Parenteral nutrition • Vitamin D and/or calcium deficiency
Endocrine Disorders	**Other Disorders**
• Hyperparathyroidism • Hyperthyroidism • Premature hypogonadism	• Organ transplantation • Other neuromuscular disorders Prolonged immobilization

Complete list of Causes of secondary osteoporosis or that have adverse effect on bone health" can be found in Table 5 of the below reference.

Morin SN, Feldman S, Funnell L, et al. Clinical practice guideline for management of osteoporosis and fracture prevention in Canada: 2023 update. CMAJ. October 10, 2023; 195(39): E1333-E1348. https://www.cmaj.ca/content/195/39/E1333

Locations:		**Contact Information:**	
Juravinski Hospital 711 Concession Street Hamilton, ON L8V 1C3	**McMaster Hospital** 1200 Main Street West Hamilton, ON L8N 3Z5	**Phone:** 905-577-1484	**Fax:** 905-521-2358

Referral Form *(EPIC document type)*