

Wakulla Urgent Care & Diagnostic Center
2615 Crawfordville Hwy, #103, Crawfordville, FL 32327
David Keen, M.D.

DEXA Scan: Body Composition Testing

Test Background:

Dual Energy X-Ray Absorptiometry (DEXA) is a simple test that provides a very accurate measurement of bone density, lean tissue mass, and total and regional body fat (i.e. abdominal body fat). This test uses very low dose x-rays of different levels to distinguish between bone and soft tissue.

DEXA is a painless, non-invasive test. The scan takes about 5 minutes and is a very low dose of radiation (equivalent to approximately 1 day of natural background radiation). This dosage is 1000 times less than the limit for trivial exposure.

Preparation for the Test:

No Special Preparation is necessary. Pregnant women and individuals who have recently undergone a nuclear medicine scan or any barium tests/exams (within 72 hours) cannot have a DEXA scan. We ask that you do not wear anything metal (metal may affect bone density values). We will ask you to remove all jewelry that may interfere with the test.

Purpose and Time Commitment:

The purpose of the DEXA scan is to assess body composition by quantifying bone, muscle, and fat mass. This information helps to monitor changes in body composition over time. A properly trained and certified Radiology Technologist will be conducting the scan. The total time required to complete a total body scan is a maximum of 20 minutes, including the time required to be positioned on the table and change into a gown if needed.

Potential Benefits:

After participation in this DEXA scan you will find out information about your body composition; that is – details about your lean body mass, fat mass and/or bone mass.

Potential Risks:

The x-ray dose associated with a total body scan is very low and safe. With the exception of pregnant women, there are no known risks connected with a DEXA scan. The potential risks associated with radiation exposure to an unborn fetus are unknown, and therefore we will ask all women of child bearing age to undergo a pregnancy test if uncertainty may arise.

Stopping the Test:

You may ask the technologist to stop the test at anytime.

I, _____ consent to the dispensing of ionizing radiation upon myself by a licensed and certified Radiology Technologist.

Patient Signature Date: _____

David Keen, M.D. Date: _____

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Patient Intake Form

Date: _____

Demographics:

Patient Name: _____ D.O.B. _____

Address: _____

Home Phone: _____ Cell Phone _____ Work: _____

Primary Insurance: _____ Policy Number: _____

Secondary Insurance: _____ Policy Number: _____

Insurance Authorization Number: _____ Exp. Date _____

PCP is required to get all authorizations

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DX: \_\_\_\_\_ ICD-9 Code: \_\_\_\_\_ CPT Code: \_\_\_\_\_

**Procedure:**

Dexa Scan    X-Ray    PFT    Overnight Oximetry    Sleep Study

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of ordering physician

\_\_\_\_\_  
Date

X-Ray - Read by Radiology Associates of Tallahassee

Wakulla Urgent Care & Diagnostic Center - Contact Mandy at (850)926-3140