



Further investigations following your recent fracture

The Fracture Liaison Service/Osteoporosis team would like to refer you for further investigations following your recent fracture. The information below explains why we wish to do this and what this entails.

Why are you referring me for further assessment?

The National Institute for Clinical Excellence (NICE) recommends that patient's sustaining a lower impact/fragility* fracture over the age of 50 should be referred for further investigations to screen for a condition called osteoporosis.

Osteoporosis is a condition in which bones become less dense inside making a person more likely to break a bone. Osteoporosis is almost always symptomless and breaking a bone is often the first sign of this condition, so as a precaution we would like to carry out some tests.

There are many conditions and lifestyle choices that can increase our risk of osteoporosis but family history / genetic factors can also play a big part. Unfortunately, some patients can have osteoporosis without having any known risk factors or a family history.

Osteoporosis is a common cause of hip / spinal fractures later in life, and by identifying the condition earlier, we can help to prevent these fractures in the long term. Although osteoporosis is often thought of as an 'older person's disease', it can affect patients much earlier. Early diagnosis can significantly improve patient outcomes and is a highly treatable condition. By identifying patients with osteoporosis in its early stages, we can reduce the risk of fractures (particularly hip and spine) as we mature.

**Lower impact or fragility is what we call fractures caused by falling from the height of 3 standard stairs and below.*

Which investigations will I need and why?

In most patients age 50-74 and some above this age, we refer patients for a blood test and a bone density (DEXA) scan.

1. **Blood test:** This looks for conditions that could be affecting the way your body makes new bone (including your kidneys, liver and thyroid). The blood test also checks the levels of some of the important nutrients your body needs for healthy bone formation such as calcium and Vitamin D.

Sometimes these blood results highlight something you may not already be aware of. If this is the case, please be assured that we will inform you and your GP and help to make a plan going forward.

2. **A bone density or DEXA scan:** A bone density scan (DEXA) is a simple painless low-dose X-ray test that checks the density of the inside of your bones to calculate their strength and longer-term fracture risk.

DEXA machines usually scan bones in the lower spine and hip. These are the most reliable sites to check, even if they are not the location of your recent fracture. A DEXA scan will take between 10 and 20 minutes and **does not involve being enclosed in a mechanical tunnel**. Generally you do not have to remove clothing but clothes with metal should be avoided (metal belts are not advised but underwired bras are okay). You have to be able to get onto the table but no other physical activity is required for the scan.

The scan compares your bones to a reference range of young healthy adults with average bone density, and to other people your own age. The difference between this average and your bone density is calculated and you are given a score. This score will tell us if your bone density falls into 1 of 3 categories: normal bone, osteopenia (reduced density but not osteoporosis), or osteoporosis.

If you contact us to consent to the bone density scan, the Berkshire Independent Hospital will be in touch with an appointment in due course.

Berkshire Independent Hospital, Swallows Croft, Wensley Road, Coley Park,
Reading RG1 6UZ Tel: 0118 902 8000 <https://www.berkshireindependenthospital.co.uk/>

Your results

When we have the results of your blood tests and DEXA scan, we will be in touch with you and your GP. If we recommend any further investigations or treatment, we will let you know at this point. It is of course your decision whether to start any form of treatment or not if this is advised.

If you receive the results and still have questions or wish to discuss your options further, you can contact us via telephone or email. Our contact details will be at the top of the page in all of our correspondence. We may contact you with your results by telephone call or letter. If you have a preference as to how we get in touch, please let us know when getting in touch to provide consent for the scan and every attempt will be made to accommodate your request.

Sometimes we may contact you after you have had your blood test but are still awaiting the DEXA scan. If we come across anything in your blood test that requires further intervention, we will be in contact to discuss these findings.

Who should not have a DEXA scan?

Due to the layout and shape of the scanner, we cannot hoist patients on to the scanner. You need to be able to get on to the relatively low table. The scanning machine also has capacity up to 200kg. If we have invited you and you think you may weigh more than this, please let us know. It may be that we can still do the DEXA but will need to scan different body parts.

You can attend the scan with a cast, brace, splint or external metalwork in situ as long as you feel physically able to attend and transfer.

It is important that we only scan patients when clinically necessary. If you have had a DEXA scan within the last 2 years then please let us know as this should not be repeated within this time frame.

Further information

The Royal Osteoporosis Society website has lots of useful information and advice, visit <https://theros.org.uk/information-and-support/fact-sheets-and-leaflets/>

Contacting us

Fracture Liaison Service / Bone Health Team:

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To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Fracture Liaison Service/Bone Health Team (Rheumatology), December 2025

Next review due: December 2027