



# “BONE BUILDERS” PRE-PRESENTATION SURVEY



Today’s Date \_\_\_\_\_

County \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Occupation \_\_\_\_\_ Female \_\_\_ Male \_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Race: White  Black  Asian/Pacific Islander  American Indian  Other

Hispanic: Yes  No

### Which of the following actions can help prevent osteoporosis, also known as brittle bone disease?

- Yes  No Eating foods high in calcium
- Yes  No Performing weight bearing exercise (walking, dancing)
- Yes  No Losing weight
- Yes  No Limiting alcohol intake
- Yes  No Avoiding tobacco products
- Yes  No Avoiding stress

### PLEASE ANSWER THE FOLLOWING QUESTIONS ABOUT YOURSELF:

1.  Yes  No Has a doctor, nurse or other health professional given you advice about the prevention or treatment of osteoporosis?
2.  Yes  No Do you have a family history of osteoporosis? (curved back, broken hip)
3.  Yes  No Do you weigh less than 127 pounds?
4.  Yes  No If you are 50 or older, have you had a bone fracture that was not caused by an accident.
5.  Yes  No Do you smoke?
6.  Yes  No Is your lifestyle inactive (less than 3 1/2 hours of exercise per week)?
7.  Yes  No Is your diet low in calcium (few or no dairy products)?
8.  Yes  No Are you taking by mouth, for longer than a month, steroid medications, like cortisone, prednisone, or medrol, for conditions such as asthma, arthritis, lupus, or Crohn's disease?
9.  Yes  No Do you have both osteoporosis and height loss greater than 1.5 inches?
10.  Yes  No Are you having weakness or pain that is causing difficulty in walking?
11.  Yes  No Have you fallen in the past 12 months?

### For women only:

12.  Yes  No Have you had both a hysterectomy and are 55 or older?
13.  Yes  No Have you not had a hysterectomy and your last menstrual period was more than 5 years ago?
14.  Yes  No Did you stop having periods before age 40, either naturally, through surgical removal of your ovaries, or through radiation or chemotherapy treatments?