

Cornerstone Chiropractic Center  
1917 Laskin Road, Suite 108 ♦ Virginia Beach, VA 23454  
757-491-4600

<http://www.cornerstonechiropracticcenter.com>

## Osteoporosis Screening Questionnaire

Answer these simple questions to determine if you are at risk for osteoporosis.

**YES**   **NO**

- Y**   **N**   Do you have a small, thin frame?
- Y**   **N**   Are you Caucasian or Asian?
- Y**   **N**   Do you have a family history of osteoporosis?
- Y**   **N**   Are you a postmenopausal woman?
- Y**   **N**   Have you had an early or surgically induced menopause?
- Y**   **N**   Is your diet low in dairy products or other sources of calcium?
- Y**   **N**   Are you physically inactive?
- Y**   **N**   Do you smoke cigarettes or drink alcohol?
- Y**   **N**   Are you taken or have you taken drugs like cortisone, steroids, or anticonvulsants over a prolonged period?
- Y**   **N**   Do you have a thyroid or parathyroid disorder?
- Y**   **N**   Do you have a high caffeine intake?
- Y**   **N**   Do you have a high protein intake?
- Y**   **N**   Do you have a high sodium intake?
- Y**   **N**   Do you drink carbonated beverages?
- Y**   **N**   Do you have low calcium intake (lifelong)?

If you answered “**YES**” more than 2 or 3 times, you are at increased risk for developing osteoporosis and should have a bone mineral density test performed today. The cost for this quick, painless procedure is \$ 50.00.

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_