

PATIENT OVERVIEW

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SEX
Female

DOB
29 Jan 2000

SCAN DATE
24 Dec 2025

METABOLIC RISK SCORE

1 - 8

4

MODERATE RISK

LOW HIGH

Moderate metabolic risk. DEXA score based on VAT area, total body fat %, android/gynoid ratio, and ALMI.

64.1 kg / 162.3 cm / 1415 kcal (RMR)

FAT

WHAT WE TRACK	WHY IT MATTERS	YOUR METRIC	HOW IT RATES
Body fat	Healthy levels support hormone production. Excess raises risk of cardiovascular disease and diabetes.	24.5%	You have lower body fat than most peers Optimal: <23% Suboptimal: >30%
Fat mass index	Fat mass relative to height. Lower values often align with better metabolic profile and healthy aging.	5.96	Low relative fat mass Optimal: 5 - 9 Suboptimal: >9
Visceral fat area	Deep abdominal fat marker. Excess is linked to type 2 diabetes, heart disease, and fatty liver.	71 cm ²	Normal abdominal risk zone Optimal: <70 Suboptimal: >90
Android/Gynoid	Compares abdominal and hip-thigh fat distribution. Lower is usually better for long-term health.	1.08	Distribution ratio

FAT MASS RECOMMENDATIONS

You are near the clinic target range, so the goal is to prevent slow regain.

- Hold weight steady or use a small calorie deficit until body fat and fat mass index move back toward target.
- Keep 2 to 3 resistance sessions per week so any fat loss does not come at the expense of lean mass.
- Your trend is moving up, so tighten meal structure, alcohol, and snack control now rather than waiting for the next scan.

VISCERAL FAT RECOMMENDATIONS

Central fat is the clearest near-term cardiometabolic target on this scan.

- Make waist reduction a priority with 150 to 300 minutes per week of aerobic activity and 2 to 3 strength sessions.
- Favor a Mediterranean-style eating pattern and be especially strict with sugary drinks, frequent alcohol, and late-night excess calories.
- Review blood pressure, fasting lipids, glucose or HbA1c, and liver enzymes with your clinician if they have not been checked recently.

MUSCLE

Lean mass index	Size-normalized amount of lean mass. Lets you compare muscle status across people of different heights.	18.5 lean mass: 48.4 kg	You have more lean mass than peers Suboptimal: <15 Optimal: >17
ALMI	Appendicular Lean Mass Index measures muscle in arms and legs adjusted for height.	11.27 ALM: 33.2 kg	You have strong limb muscle Suboptimal: <6 Optimal: >7 Legs: track L/R trend Arms: track L/R trend
Lean asymmetry	Difference in muscle between left and right sides; larger gaps can signal imbalance or injury risk.	4.7%	Low asymmetry (balanced) Optimal: <4% Suboptimal: >8% Legs: 3.2% L<R Arms: 6.2% L<R

LEAN MASS RECOMMENDATIONS

Lean mass is adequate but there is room to build reserve or improve balance.

- Keep resistance training progressive 2 to 4 days per week and avoid long phases of cardio without loading.
- Most adults do well with roughly 25 to 40 g of protein per meal distributed across the day.
- Retest strength or DEXA after your next training block to make sure lean mass is moving in the direction you want.

BONE

TOTAL BODY Z SCORE
(HEAD EXCLUDED)

Standardized whole-body bone mineral density score relative to peers of your age and sex.

-0.28

You have higher bone density than 39% of your peers

N/A



BONE HEALTH RECOMMENDATIONS

Bone density is not alarming, but it is a domain worth protecting early.

- Keep resistance and weight-bearing exercise in your routine year-round rather than only during fat-loss phases.
- Aim for about 1000 mg of calcium per day and 400 to 800 IU per day; food first is preferred, with supplements only as needed to close the gap.
- Do not smoke, keep alcohol modest, and review medications that can weaken bone if any apply to you.

Comparisons are benchmarked against age and sex matched NHANES cohorts for consistent longitudinal tracking.

THIS REPORT IS NOT A MEDICAL DIAGNOSIS