

# Osteoporosis Care Plan

Patient Information	
Name:	
Date of Birth:	Gender:
Medical History:	
Current Medications:	
Treatment Goals	
1.	
2.	
3.	
Care Plan Components	
A. Lifestyle Recommendations	
1.	
2.	
3.	

**B. Medication Management**

1.

2.

**C. Bone Density and Fall Care Strategies**

1.

2.

**Documentation and Communication**

1.

2.

**Patient Education and Engagement**

1.

2.