

Vasogram Patient Test Results

Facility Name:

Patient Name:

Gender:

Patient ID:

DOB:

Test Date:

Age:

RISK FACTORS:

RECOMENDATIONS

Diabetes CVD/CHD History Atrial Fibrillation Therapy

Hypertensive Therapy Left Ventricular Hyperlipidemia

Cigarettes per Day:

0 1-5 5-10 11-20 20+

Brachial BP

Cholesterol

HDL

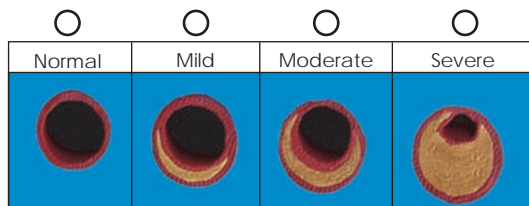
Actual Age

Equivalent Arterial Age

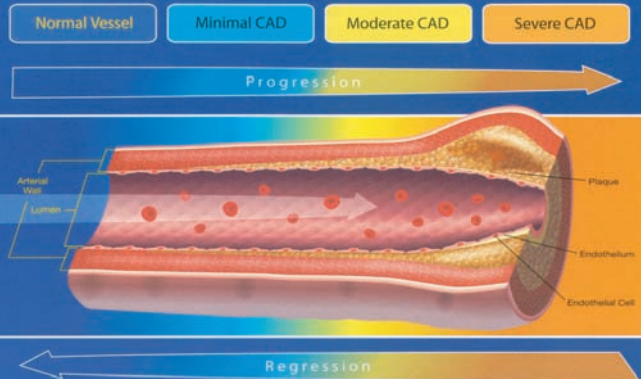
BMI

Comparative Arterial Elasticity

Atherosclerotic Burden:



Legend: Cross Section of Artery with Atherosclerosis



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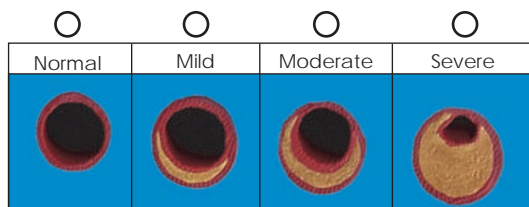
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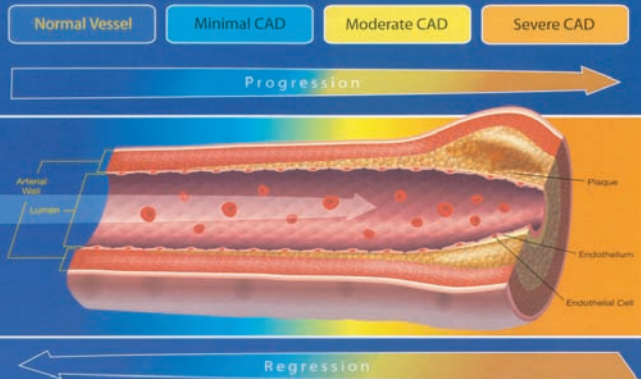
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National Cholesterol Education Program (NCEP)

LDL Cholesterol Goals and Cutpoints for Therapeutic Lifestyle Changes (TLC) and Drug Therapy in Different Risk Categories and Proposed Modifications Based on Recent Clinical Trial Evidence¹

RISK CATEGORY	INITIATE THERAPEUTIC LIFESTYLE CHANGES (TLC)	CONSIDER DRUG THERAPY**	LDL- GOAL
High risk; CHD* or CHD Risk Equivalents (10-year risk >20%)	≥ 100 mg/dL [#]	≥ 100 mg/dL [§] (<100 mg/dL; consider drug options)**	<100 mg/dL optional goal; <70 mg/dL [¶]
Moderately high risk; 2+ risk factors (10-year risk 10% to 20%)	≥ 130 mg/dL [#]	≥ 130 mg/dL (100-129 mg/dL; consider drug options) ^{§§}	<130 mg/dL (optional goal; <100 mg/dL)
Moderate risk; 2+ risk factors (10-year risk <10%)	≥ 130 mg/dL	≥ 160 mg/dL	<130 mg/dL
Lower risk; 0-1 risk factor	≥ 160 mg/dL	≥ 190 mg/dL (160-189 mg/dL; LDL-lowering drug optional)	<160 mg/dL

CHD risk equivalents²

Diabetes
2+ risk factors with 10-year risk for CHD > 20%
Other forms of atherosclerotic disease (peripheral arterial disease, abdominal aortic aneurysm, and carotid artery disease)

Major risk factors²

Hypertension
Low HDL cholesterol (<40 mg/dL)
Family history of premature CHD^{||}
Cigarette smoking
Age (men >45 years; women >55 years)

Therapeutic lifestyle changes (TLC)²

The essential features of TLC are

- reduced intake of saturated fats and cholesterol
- plant stanols/stenols and soluble fiber to help lower LDL-C
- weight reduction
- increased physical activity

My 10-year Framingham Risk: _____ My Current LDL: _____ My Current HDL: _____ My LDL Goal _____

*CDH includes history of myocardial infarction, unstable angina coronary artery procedures (angioplasty or bypass surgery), or evidence of clinically significant myocardial ischemia

**When LDL-lowering drug therapy is employed, it is advised that intensity of therapy be sufficient to achieve at least a 30% to 40% reduction in LDL-C levels.

Any person at high or moderately high risk who has lifestyle-related risk factors (eg, obesity, physical inactivity, elevated triglyceride, low HDL-C, or metabolic syndrome) is a candidate for therapeutic lifestyle changes to modify these risk factors regardless of LDL-C level

§ If baseline LDL-C is <100 mg/dL, institution of an LDL-lowering drug is a therapeutic option on the basis of available clinical trial results.

§§ For moderately high-risk persons, when LDL-C level is 100 to 129 mg/dL, at baseline or on lifestyle therapy, institution of an LDL-lowering drug to achieve an LDL-C level <100 mg/dL is a therapeutic option on the basis of available clinical trial results.

¶ Very high risk favors the optional goal of <70 mg/dL, and in patients with high triglycerides, non-HDL-C <100 mg/dL.

|| CHD in father or brother <55 years of age; CHD in mother or sister <65 years of age.

1. Grundy SM, Cleeman JL, Merz CN, et al. Implications of recent clinical trials for the National Cholesterol Education Program Adult Treatment Panel III guidelines. *Circulation*. 2004;110: 227-239.

2. National Cholesterol Education Program (NCEP), NCEP Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults (Adult Treatment Panel III) final report. *Circulation*. 2002;106: 3143-3421.

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