

***Solutions to Address Individual Risk***



## **Cardiometabolic Risk Report**

Prepared for  
**Leonard Glassner**

Report Date  
**02/26/2024**

Ordering Healthcare Provider  
**William Cromwell MD**  
**Precision Health Reports**

### **Car•di•o•meta•bol•ic** / *adjective*

Concerning both heart disease and metabolic disorders such as diabetes.

This report provides you with information about your cardiometabolic health based on your recent test results and personal information provided. There may be other factors not part of this report that could affect your risk. Talk to your healthcare provider about these results, questions you may have, and actions you can take to improve your cardiometabolic health. The information we provide is not a substitute for shared decision making with your healthcare provider.

Dear Leonard,

This report shows **your individual risk** for **heart attack, stroke, and type 2 diabetes.**

**Cardiometabolic risk** refers to the comprehensive group of factors that together impact your risk for heart attack, stroke, and type 2 diabetes.

Assessing your cardiometabolic risk is like putting together a jigsaw puzzle with 40+ interlocking pieces that together determine your risk for developing these costly and deadly conditions.



Some pieces represent common major risk factors such as high blood pressure, high cholesterol, smoking, elevated blood sugar, and family history of early heart attack, stroke, or diabetes.

Other pieces are part of insulin resistance, the metabolic disorder that begins and accelerates the process of vascular disease and diabetes.

Finally, some pieces are risk enhancing factors. These are specific conditions that measurably increase your risk beyond conventional risk factors.

Your cardiometabolic risk is more than simply counting major risk factors or calculating your risk from equations based on large populations. While these are a good starting point, **multiple expert guidelines** advise including **more than 30 additional “risk-enhancing” factors** to determine your personal cardiometabolic risk.

**Precision Health Reports combines your unique clinical information, appropriate test results, and multiple guidelines to produce a report that identifies your personal risk.**

Regardless of where you start, **you can reduce your risk of heart attack, stroke, and diabetes.** Success depends on implementing the diet, exercise, and medication (if needed) appropriate for your personal risk and following your response using tests most reflective of decreased cardiometabolic risk.

Armed with your Precision Health Report, your healthcare team will be able to offer more personalized counseling and treatment recommendations to address your personal risk, as well as track your improvement over time.

We appreciate the opportunity to be a part of your health journey. Let's get started!



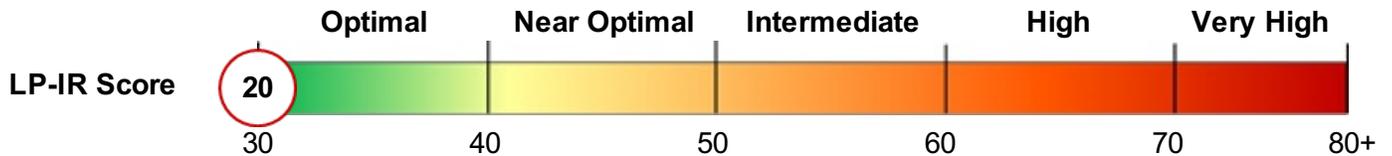
Dr. William Cromwell, MD, FAHA, FNLA  
Chief Medical Officer – Precision Health Reports

# Your Cardiometabolic Risk Summary

(Details for each section are in the following pages)

## Your Insulin Resistance—The Common Link

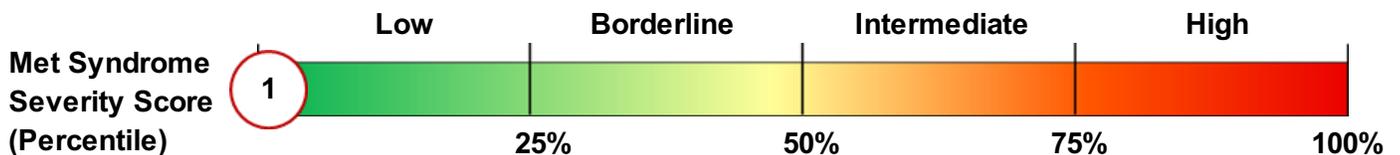
Your Lipoprotein Insulin Resistance Score (LP-IR) shows your gender-specific insulin resistance—the common factor linking metabolic syndrome, type 2 diabetes, and cardiovascular disease. A low value mean you are insulin sensitive (that’s ideal), while high scores mean insulin resistant.



Learn more about insulin resistance and its impact on you: <https://precisionhealthreports.com/ir-cmr>

## Your Metabolic Syndrome Risk

Your Metabolic Syndrome Severity Score is a detailed calculation that accounts for your gender, ethnicity, and clinical factors related to insulin resistance (aka “metabolic syndrome”). This score gives you a comprehensive picture of the severity of your metabolic syndrome related risk.



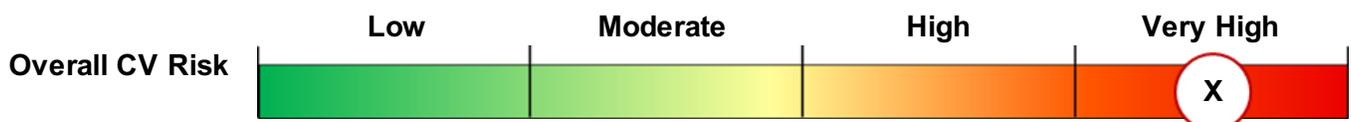
## Your Type 2 Diabetes Risk

Your gender-specific risk for developing type 2 diabetes is based on both your fasting glucose and your (LP-IR) score.

**Estimated 8-Year Diabetes Risk cannot be calculated if you have been diagnosed with diabetes and/or are on blood sugar medication**

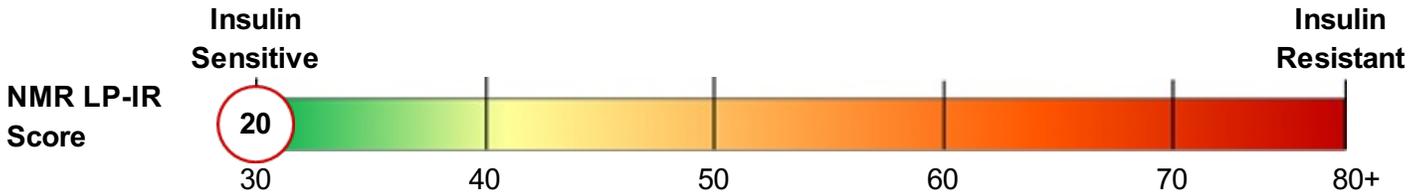
## Your Overall Cardiovascular Risk (Heart Attack, Stroke)

Your individual risk for a cardiovascular event (heart attack or stroke) is a combination of your calculated risk and any of 30+ guideline defined Risk Enhancing Factors.



## Your Metabolic Risk Details

### Insulin Resistance Status



The LP-IR Score is derived from several lipoprotein markers of insulin resistance.<sup>1</sup> The higher your LP-IR score, and the greater your insulin resistance,<sup>2</sup> the higher risk for type 2 diabetes.<sup>3-6</sup>

### Insulin Resistance Syndrome (“Metabolic Syndrome”)

Several insulin resistance factors cluster together to increase your risk for type 2 diabetes, heart attack, and stroke.<sup>7</sup> This cluster of factors is termed the **Insulin Resistance Syndrome** or Metabolic Syndrome.<sup>8</sup>

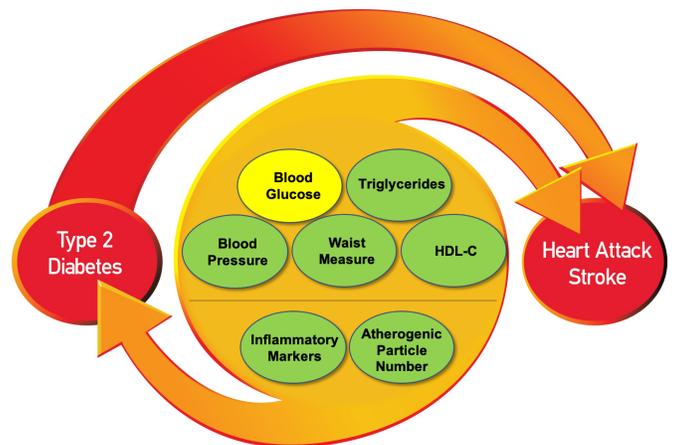
Metabolic syndrome is present if you have 3 or more Metabolic Syndrome criteria (shaded yellow) below.

Additional syndrome factors, elevated inflammation (GlycA) and high atherogenic particle number (Apo B), further increase your risk and are shaded red if they meet the high-risk criteria listed below.

Metabolic Syndrome Factors for Your Gender & Ethnicity	Criteria	Your Value
1. Waist Measurement (inches)	> 40	31
2. Blood Pressure (mmHg)*		
Systolic Pressure <i>or</i>	≥ 130	108
Diastolic Pressure	≥ 85	62
3. Fasting Glucose (mg/dL)*	≥ 100	87
4. Triglycerides (mg/dL)*	≥ 150	57
5. HDL Cholesterol (mg/dL)*	< 40	94

\* or on drug treatment for these factors

You have 1 of 5 Metabolic Syndrome Criteria

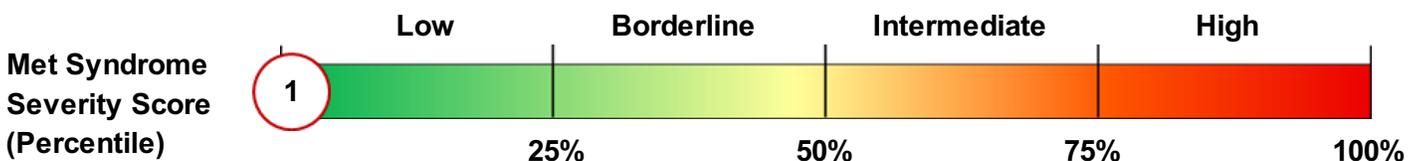


Additional High-Risk Syndrome Factors		
Inflammation GlycA (umol/L)	> 400	346 <a href="https://bit.ly/Glyc_A">https://bit.ly/Glyc_A</a>
Atherogenic Particle Number		
Apo B (mg/dL)	> 110	59 <a href="https://bit.ly/LDL-P">https://bit.ly/LDL-P</a>

Insulin Resistance Syndrome

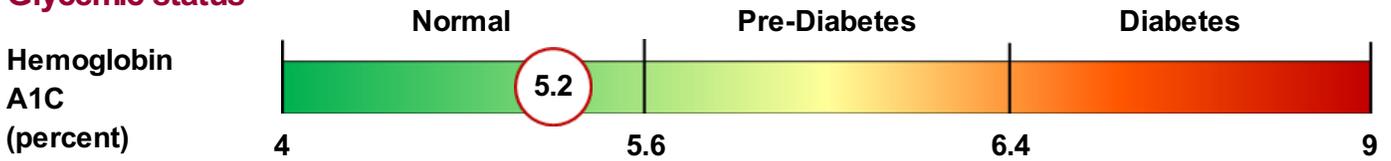
### Metabolic Syndrome Severity Score <https://bit.ly/MetSynSS>

The Metabolic Syndrome Severity Score assesses the clinical impact of your metabolic syndrome factors.<sup>9,10</sup> The higher the score, the greater your metabolic syndrome-related risk for type 2 diabetes,<sup>11-13</sup> heart attack, and stroke.<sup>13-16</sup> **This score can be significantly improved with diet and exercise.**

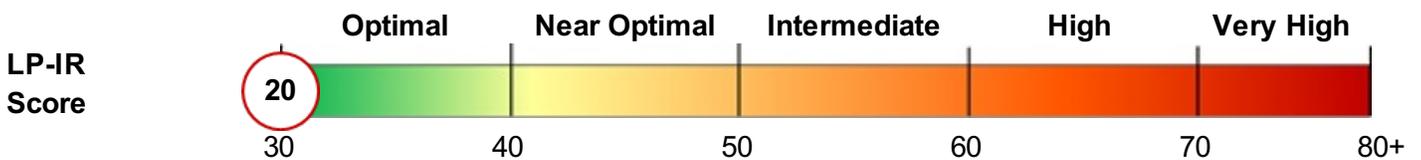


## Your Diabetes Risk Details

### Glycemic status

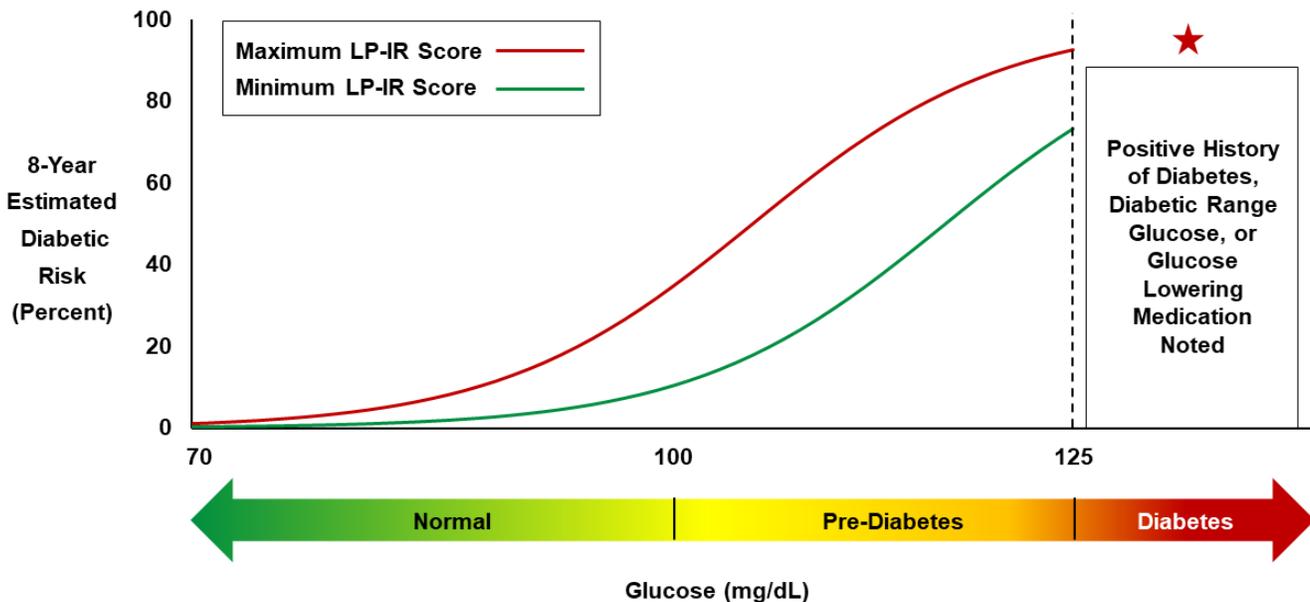


### NMR Lipoprotein Insulin Resistance Score (LP-IR)



### Your Diabetes Status\*

While elevated glucose and elevated LP-IR score are both associated with risk of type 2 diabetes, your probability of developing diabetes depends on both your LP-IR Score and fasting glucose level.<sup>3,4,6</sup>



### Your Diabetes Risk Is Modifiable

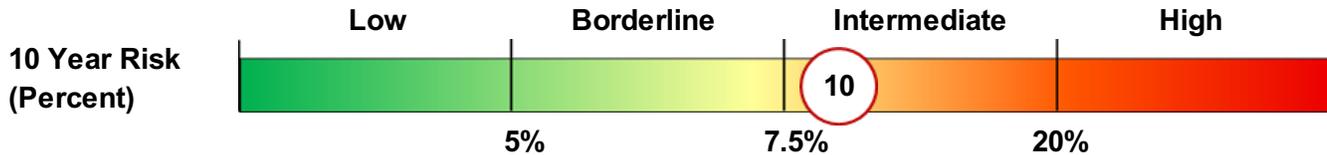
Diet and lifestyle modification can significantly improve your diabetes risk. The most important modifiable factor in preventing development of diabetes is insulin resistance. **As you lower your LP-IR score, diabetic risk decreases at any glucose level.**

\* Based on data from the Multi-Ethnic Study of Atherosclerosis

## Your Cardiovascular Risk Details

### Guideline Calculated Cardiovascular Risk

The American College of Cardiology (ACC) Pooled Cohort Equation is based on age, gender, race, total cholesterol, HDL cholesterol, diabetes, blood pressure, smoking status, and medications (high blood pressure, statins, aspirin) in individuals with no history of cardiovascular events.<sup>17</sup> <https://mayoclinic.org/3b7wk5T>



### Clinical Factors That Further Enhance Your Cardiovascular Risk

Coronary Artery Plaque

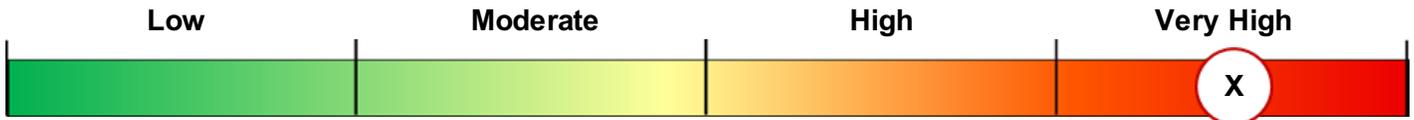
Age > 65 years

Very High Lp(a) (≥ 125 nmol/L)

Carotid Artery Plaque

Chronic Kidney Disease

### Your Cardiovascular Risk (Cardiovascular Risk Plus Risk Enhancing Factors)



Your individual risk for a cardiovascular event (Heart Attack or Stroke) is a combination of your calculated risk and the presence of clinical factors that enhance your risk.<sup>17</sup>

### Your Personalized Lipoprotein Management Goals to Improve Your Risk Scores

Atherogenic Cholesterol Test	Your Baseline Values	Your Current Values	Threshold Goal (Value to stay below to reduce your CV risk - the lower, the better)
LDL-C (mg/dL)	Unknown	49	< 55 **
Non HDL-C (mg/dL)	Unknown	61	< 85
Atherogenic Particle Number Test *	Your Baseline Values	Your Current Values	Threshold Goal (Value to stay below to reduce your CV risk - the lower, the better)
ApoB mg/dL	Unknown	59	< 65 **

\* The greatest reduction in cardiovascular risk occurs with reduction of particle number.<sup>20-22</sup> The lower the particle number attained, and the longer low particle number is maintained, the greater the reduction in cardiovascular risk.<sup>21,22</sup>

\*\* For your risk category, the threshold goal is the lower of two guideline-recommended numbers – the recommended percent reduction from baseline, OR the recommended absolute value.<sup>18,29-30</sup>

## Additional Topics for Discussion with Your Provider

### Learn More about Reading Your Cardiometabolic Risk Assessment Report

<https://precisionhealthreports.com/understanding-your-cardiometabolic-risk-report>

### Your Atherogenic Lipoprotein Values are High

Lipoprotein particles carry cholesterol in the blood. Atherogenic (“Bad”) particles cause blockage in your arteries responsible for heart attack and stroke. The higher the atherogenic particle number (ApoB), the greater the formation of blockage (“plaques”) in your arteries over time. Elevated values may be related to abnormal thyroid, kidney, liver, or glucose metabolism, as well as other issues.

#### - Your Lipoprotein(a) Biomarker is Very High (Lp(a) $\geq$ 125 nmol/L)

Lipoprotein(a) is a type of LDL particle that carries a unique protein on the surface that can cause greater cardiovascular risk than other LDL particles. Learn more about Lp(a) and your potential next steps at:

<https://precisionhealthreports.com/high-lpa>

### Noninvasive Imaging May be a Prudent Next Step for You

Noninvasive imaging identifies plaques (blockages) in your arteries. Artery blockage can be treated to stop plaques from growing, prevent new plaques from developing, and reduce your risk for heart attack and stroke. Learn more about noninvasive imaging at: <https://precisionhealthreports.com/noninvasive-imaging>

### References cited throughout this report may be found at:

<https://precisionhealthreports.com/cmr-references>

# Your Comprehensive Tracking Charts & Additional Information

**NOTE:** Several topics marked with [\(link\)](#) will take you to additional useful information about the topic.

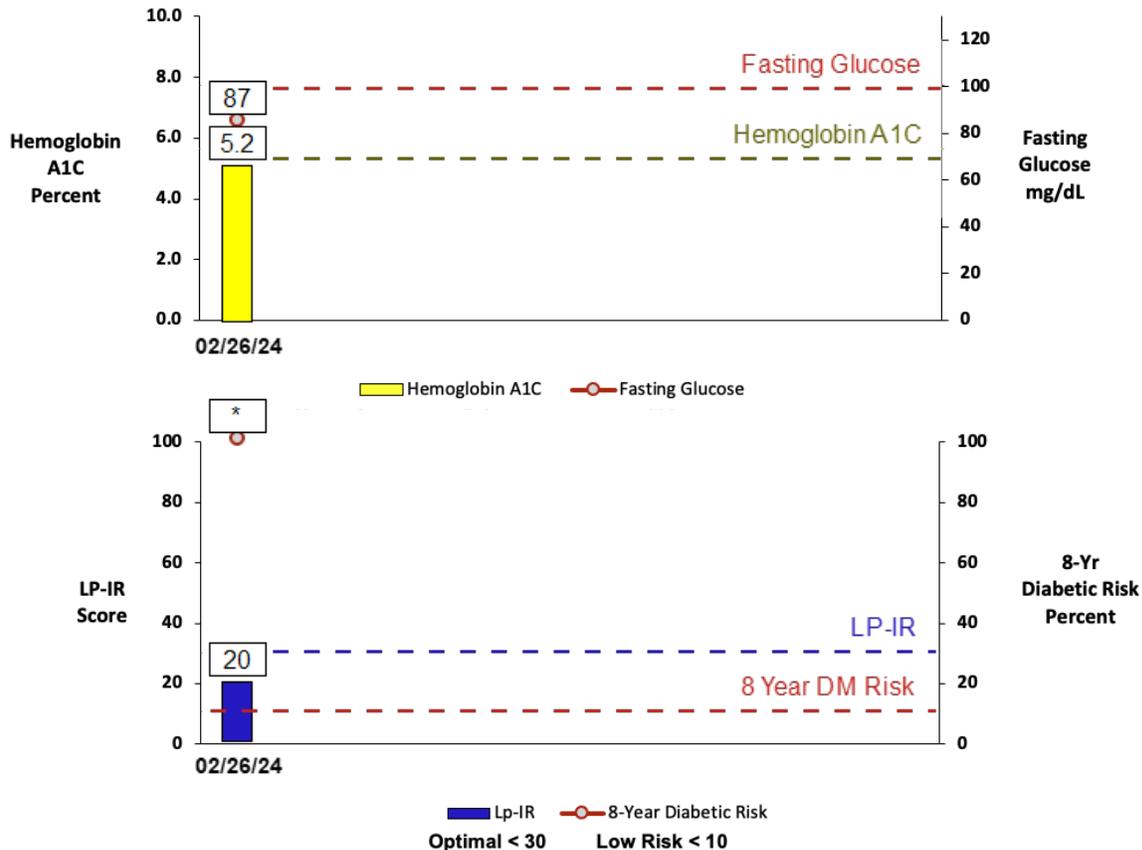
For off line use, this QR code will take you to a reference page with all topics covered in this report.





## Diabetes Risk Tracking

Test	Date	Hemoglobin A1C (Percent)	Fasting Glucose (mg/dL)	LP-IR Score	Estimated 8 Year Diabetic Risk (Percent)	Risk
1	02/26/2024	5.2	87	20	--	VERY HIGH

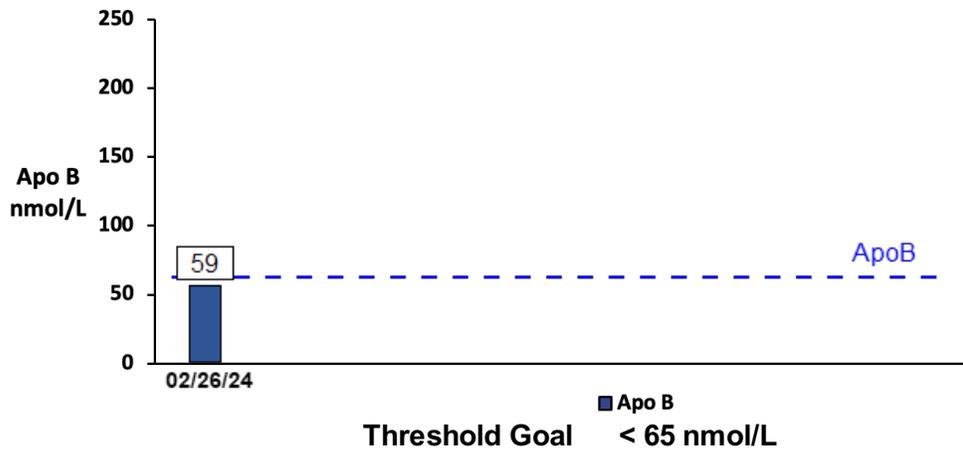
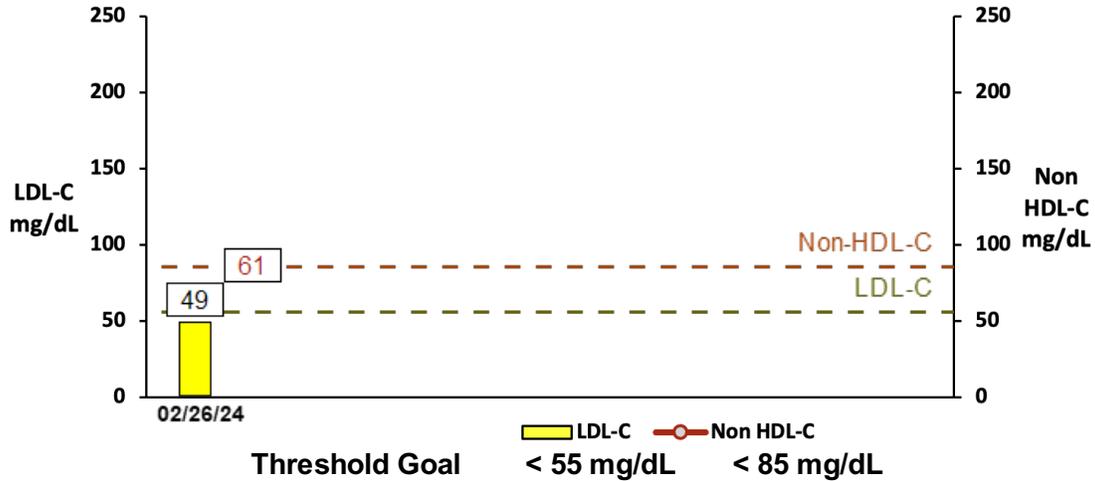


Your risk of developing diabetes depends on your LP-IR score and glucose levels.<sup>4,6</sup>

Lifestyle interventions producing weight loss and increased insulin sensitivity have been shown to significantly lower LP-IR scores, improve insulin sensitivity, lower glucose, and are associated with preventing or delaying the onset of type 2 diabetes.<sup>23-28</sup>

## Atherogenic Lipoprotein Tracking

Test	Date	LDL-C (mg/dL)		Non HDL-C (mg/dL)		ApoB (mg/dL)	
		Value	Goal	Value	Goal	Value	Goal
1	02/26/2024	49	55	61	85	59	65



The greatest reduction in cardiovascular risk occurs with reduction of ApoB<sup>20-22</sup>

The lower the particle number attained, and the longer low particle number is maintained, the greater the reduction in cardiovascular risk.<sup>21,22</sup>





### Reported Lipid / Lipoprotein History:

Highest LDL Cholesterol: less than 160 mg/dL

Have You Been Diagnosed with Familial Hypercholesterolemia (FH): No

Have You Had a Positive DNA Test for FH: No

Possible FH Physical Findings:

Achilles Tendon Thickening: **Unknown**

Tendon Xanthomas: **Unknown**

Corneal Arcus Before Age 45: **Unknown**

Relative Diagnosed with FH: No

Family History – FH Characteristics:

Adult (> 18 years) LDL-C > 190 mg/dL: **Unknown**

Child (< 18 years) LDL-C > 160 mg/dL: **Unknown**

Achilles Tendon Thickening: **Unknown**

Tendon Xanthomas: **Unknown**

Corneal Arcus Before Age 45: **Unknown**

Current Lipid Medications Taken

LDL Lowering Medicine: **Yes**

Statin: **Yes**

HDL Raising Medicine: No

Triglyceride Lowering Medicine: No

### Reported Additional Risk Enhancing Factor History:

Do You Have a History of ANY of The Following Conditions?

Metabolic Syndrome: No

Chronic Kidney Disease (stage 3 or 4): **Yes**

Congestive Heart Failure: No

Atrial Fibrillation: No

Non-alcoholic Fatty Liver Disease: No

Aortic Aneurysm: No

Left Ventricular Hypertrophy: No

Obstructive Sleep Apnea: No

Psoriasis: No

Rheumatoid Arthritis: No

Ankylosing Spondylitis: No

HIV / AIDS: No

Systemic Lupus Erythematosus: No

History of Preeclampsia or Eclampsia During Pregnancy: No

History of Menopause Before Age 40: No

Erectile Dysfunction: No

Have You Ever Had a Positive Diagnosis for COVID19: No

Date Collected: 02/22/2024      Date Received: 02/22/2024      Date Reported: 02/25/2024      Fasting: Yes

Ordered Items: Lipid Panel+ApoB+IR; Hemoglobin A1c; Lipoprotein (a); GlycA; Glucose; Venipuncture

Date Collected: 02/22/2024

**Lipid Panel+ApoB+IR**

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Cholesterol, Total <sup>A,01</sup>	155		mg/dL	100-199
Triglycerides <sup>A,01</sup>	57		mg/dL	0-149
HDL-C <sup>A,01</sup>	94		mg/dL	>39
Non-HDL Cholesterol <sup>01</sup>	61		mg/dL	0-129
LDL-C (NIH Calc) <sup>01</sup>	49		mg/dL	0-99
		Optimal	< 100	
		Above optimal	100 - 129	
		Borderline	130 - 159	
		High	160 - 189	
		Very high	> 189	

Apolipoprotein B <sup>01</sup>	59		mg/dL	<90
		Desirable	< 90	
		Borderline High	90 - 99	
		High	100 - 130	
		Very High	>130	

ASCVD RISK CATEGORY	THERAPEUTIC TARGET APO B (mg/dL)
Very High Risk	<80 (if extreme risk <70)
High Risk	<90
Moderate Risk	<90

Insulin Resistance/Diab. Risk <sup>01</sup>				
Large VLDL-P <sup>A,01</sup>	<0.8		nmol/L	<=2.7
Small LDL-P <sup>A,01</sup>	<90		nmol/L	<=527
Large HDL-P <sup>A,01</sup>	15.9		umol/L	>=4.8
<b>▲ VLDL Size<sup>A,01</sup></b>	<b>50.7</b>	<b>High</b>	nm	<=46.6
LDL Size <sup>A,01</sup>	21.1		nm	>=20.8
HDL Size <sup>A,01</sup>	10.6		nm	>=9.2
Insulin Resistance Score <sup>01</sup>				
LP-IR Score <sup>A,01</sup>	<25			<=45

INSULIN RESISTANCE / DIABETES RISK MARKERS					
	---Insulin Sensitive		Insulin Resistant---		
	Percentile in Reference Population				
Large VLDL-P	Low	25th	50th	75th	High
	<0.9	0.9	2.7	6.9	>6.9
Small LDL-P	Low	25th	50th	75th	High
	<117	117	527	839	>839
Large HDL-P	High	75th	50th	25th	Low
	>7.3	7.3	4.8	3.1	<3.1
VLDL Size	Small	25th	50th	75th	Large
	<42.4	42.4	46.6	52.5	>52.5
LDL Size	Large	75th	50th	25th	Small
	>21.2	21.2	20.8	20.4	<20.4
HDL Size	Large	75th	50th	25th	Small

## Lipid Panel+ApoB+IR (Cont.)

	>9.6	9.6	9.2	8.9	<8.9
Insulin Resistance Score					
LP-IR SCORE	Low	25th	50th	75th	High
	<27	27	45	63	>63

Comment:<sup>01</sup>

LP-IR Score is inaccurate if patient is non-fasting. The LP-IR score is a laboratory developed index that has been associated with insulin resistance and diabetes risk and should be used as one component of a physician's clinical assessment.

## Hemoglobin A1c

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Hemoglobin A1c <sup>02</sup>	5.2		%	4.8-5.6

Please Note:<sup>02</sup>

Prediabetes: 5.7 - 6.4  
Diabetes: >6.4  
Glycemic control for adults with diabetes: <7.0

## Lipoprotein (a)

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
▲ Lipoprotein (a) <sup>01</sup>	156.4 High		nmol/L	<75.0

Note: Values greater than or equal to 75.0 nmol/L may indicate an independent risk factor for CHD, but must be evaluated with caution when applied to non-Caucasian populations due to the influence of genetic factors on Lp(a) across ethnicities.

## GlycA

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
GlycA <sup>A,01</sup>	346		umol/L	<400

GlycA Medical Decision Limit:  
Low Risk <400  
High Risk >or=400

## Glucose

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Glucose <sup>02</sup>	87		mg/dL	70-99

## Disclaimer

The Previous Result is listed for the most recent test performed by Labcorp in the past 5 years where there is sufficient patient demographic data to match the result to the patient. Results from certain tests are excluded from the Previous Result display.

## Icon Legend

▲ Out of Reference Range ■ Critical or Alert

## Comments

A: This test was developed and its performance characteristics determined by Labcorp. It has not been cleared or approved by the Food and Drug

**Glassner, Leonard**

Patient ID:  
Specimen ID: **053-544-7580-0**

DOB: **09/09/1952**

Age: **71**  
Sex: **Male**

**Patient Report**

Account Number: **32049540**  
Ordering Physician: **W CROMWELL**

**Comments (Cont.)**

Administration.

**Performing Labs**

01: BN - Labcorp Burlington, 1447 York Court, Burlington, NC 27215-3361 Dir: Sanjai Nagendra, MD  
02: SO - Labcorp San Diego, 13112 Evening Creek Dr So Ste 200, San Diego, CA 92128-4108 Dir: Earle Collum, Jr, MD  
For Inquiries, the physician may contact Branch: 800-762-4344 Lab: 858-668-3700

## Patient Details

**Glassner, Leonard**  
**, La Jolla, CA, 92037**

Phone:  
Date of Birth: **09/09/1952**  
Age: **71**  
Sex: **Male**  
Patient ID:  
Alternate Patient ID:

## Physician Details

**W CROMWELL**  
**Precision Health Reports Inc**  
**8300 Health Park Dr Ste 316, Raleigh, NC,**  
**27615**

Phone: **919-569-5971**  
Account Number: **32049540**  
Physician ID:  
NPI: **1699777565**

## Specimen Details

Specimen ID: **053-544-7580-0**  
Control ID: **L2401290034**  
Alternate Control Number: **L2401290034**  
Date Collected: **02/22/2024 0929 Local**  
Date Received: **02/22/2024 0000 ET**  
Date Entered: **02/22/2024 1150 ET**  
Date Reported: **02/25/2024 2235 ET**