

Location: SAMPLE SUMMARY REPORT

Screening Date: 01/23/2008

Total Participants: 182

Opt Out BP:	1
Opt Out BMI:	2
Opt Out Finger Stick:	6
No Birthdate Given:	5
No Body Weight:	2
Fasting:	0
Pregnant:	0
Age < 20 or > 79:	1

Average Age: 46 **Uses BP Meds:** 42 **Diabetics:** 20

Avg Weight: 175 **Uses Chol Meds:** 23 **Smokers:** 13

Males: 35 **Females:** 147 **Family Hx**

Avg Age: 47 **Avg Age:** 46 **Heart Disease:** 39

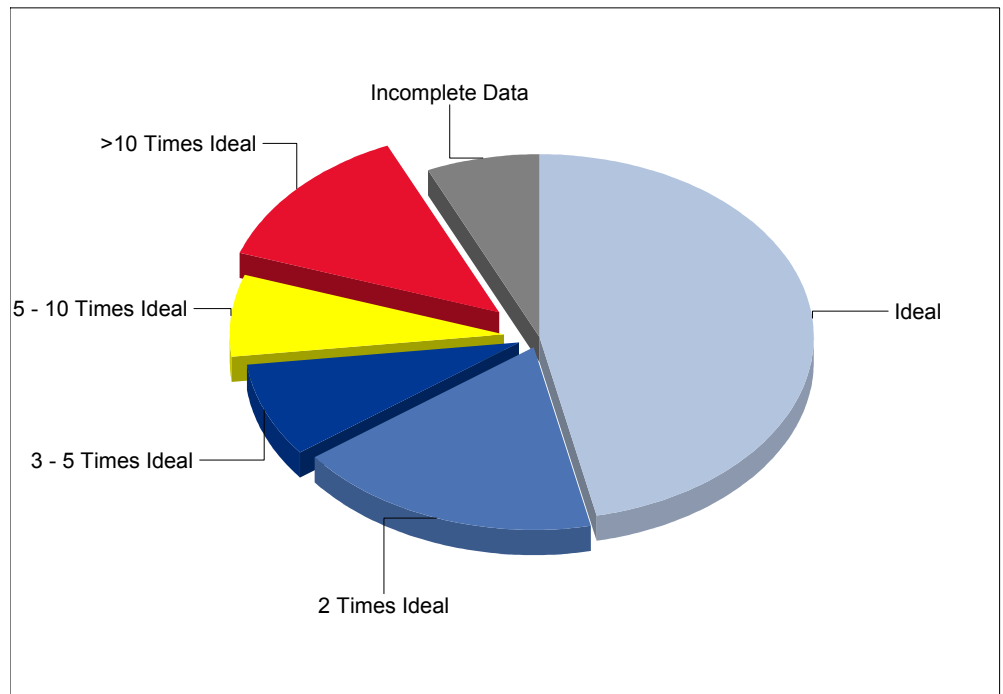
Avg Weight: 190 **Avg Weight:** 172

Insurance Status	Commercial: 111	Medicaid: 1	No Data: 38
	Medicare: 6	Not Insured: 26	

ATP III / Framingham Risk Assessment

10 Year Probability of Major Cardiac Event

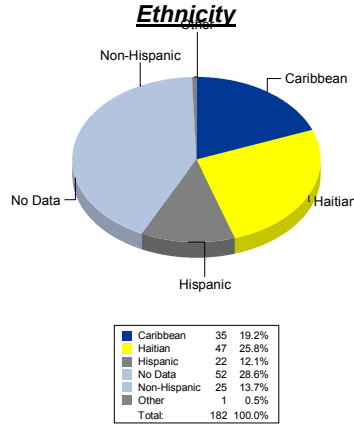
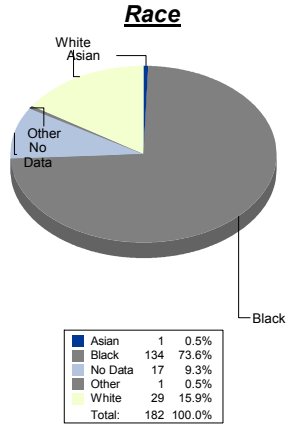
Ideal Risk <i>(adjusted for age)</i> >= 0 and < 0.67 %	85	47 %
2 Times Ideal >= 0.67 and < 1.12 %	33	18 %
3 to 5 Times Ideal >= 1.12 and < 2.24 %	15	8 %
5 to 10 Times Ideal >= 2.24 and < 4.47 %	13	7 %
> 10 Times Ideal > 4.47 %	24	13 %
Incomplete Data	12	7 %



Average:	1.94 %
Ideal Average:	0.45 %

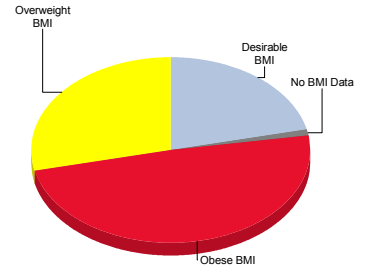
The Framingham Risk scoring has been developed by researchers of the Framingham Heart Study. This study is a joint project of the National Heart Lung and Blood Institute of the National Institutes of Health (NIH) and Boston University. It started in 1948. It was designed to identify the common factors that contribute to cardiovascular disease by following its development over a long period of time in a very large group of participants who had not yet developed overt symptoms of cardiovascular disease or stroke.

ATPIII (Adult Treatment panel III) risk assessment tool derives from the Framingham score. It was developed by the National Cholesterol Education Program (NCEP) expert panel to adjust the intensity of cholesterol lowering therapy to the individual absolute risk for coronary heart disease. NCEP is a program sponsored by NIH.



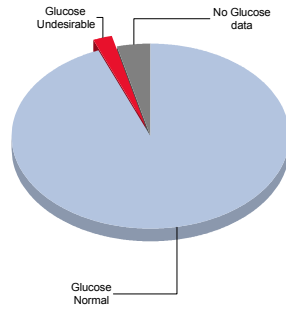
Body Mass Index (BMI)

Desirable: (< 25)	39	21 %
Overweight: (>= 25 & <=29)	52	29 %
Obese: (> 29)	89	49 %
No Data:	2	1 %



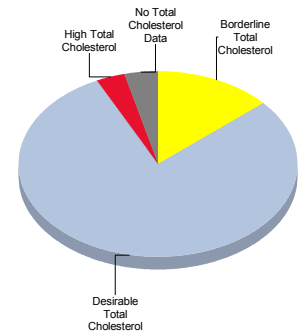
Glucose (GLU)

Normal: (< 200 or > 74 & < 106 Fasting)	171	94 %
Undesirable: (>= 200 or < 75, > 105 Fasting)	4	2 %
No Data:	7	4 %



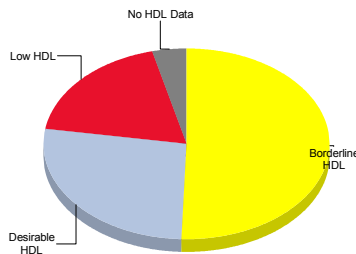
Total Cholesterol (TC)

Desirable: (< 200)	144	79 %
Borderline: (>= 200 & <= 239)	25	14 %
High: (> 239)	6	3 %
No Data:	7	4 %



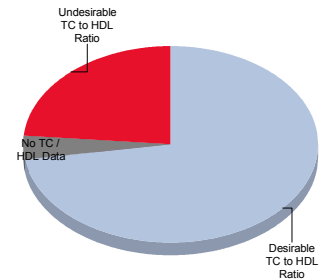
High Density Lipids (HDL)

Desirable: (> 59)	49	27 %
Borderline: (>= 40 & <= 59)	92	51 %
Low: (< 40)	34	19 %
No Data:	7	4 %



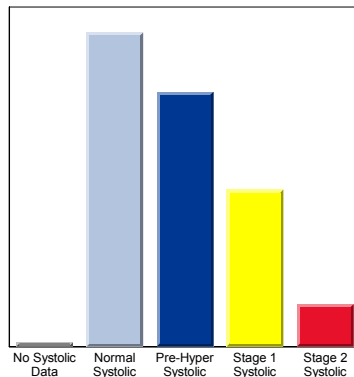
TC to HDL Ratio

Desirable: (< 4.1)	132	73 %
Undesirable: (> 4)	43	24 %
No Data:	7	4 %



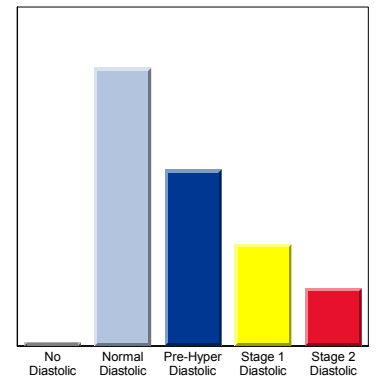
Systolic B.P.

Normal: (< 120)	74	41 %
Pre Hyper: (>= 120 & <= 139)	60	33 %
Stage 1: (>= 140 & <= 159)	37	20 %
Stage 2: (> 159)	10	5 %
No Data:	1	1 %

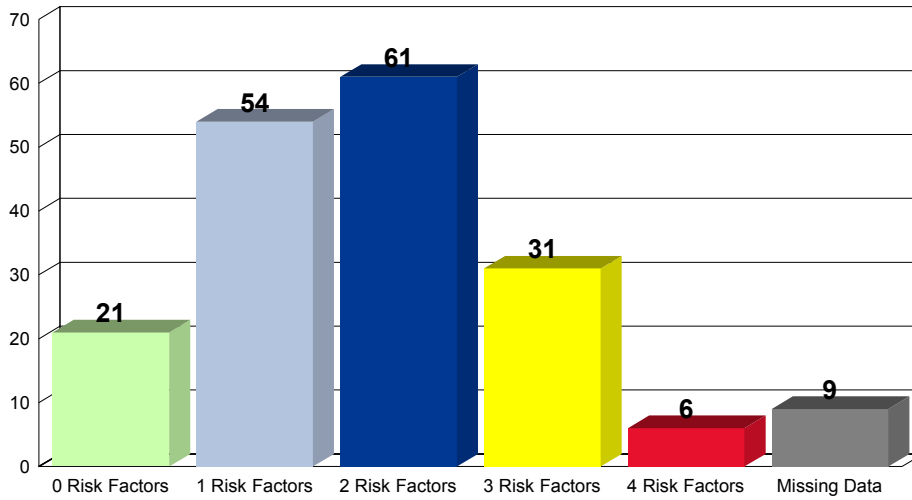


Diastolic B.P.

Normal: (< 80)	82	45 %
Pre Hyper: (>= 80 & <= 89)	52	29 %
Stage 1: (>= 90 & <= 99)	30	16 %
Stage 2: (> 99)	17	9 %
No Data:	1	1 %



Modifiable Risk Factors Summary



This chart reflects the number of modifiable risk factors for the population screened. A person can have zero to five modifiable risk factors. These risk factors include:

1. Smoker
2. Diabetic or Non-fasting Glucose ≥ 200
3. Overweight / Obese BMI ≥ 25
4. Total Cholesterol to HDL Ratio > 4.0
5. Taking Anti-Hypertensive meds or Systolic B.P. ≥ 140 or Diastolic B.P. ≥ 90

As additional risk factors are added, overall risk increases exponentially.

Number of Screening Participants Referred for Medical Follow-up: 88 48 %

(BP ≥ 140 systolic, ≥ 90 diastolic, TC > 240 , TC / HDL ratio > 4.0 , glucose > 200)

Breakdown by Test Type:	<u>Results out of Normal Limits</u>		<u>1st Time Learning about Condition</u>	
	Count	Percentage	Count	Percentage
Blood Pressure	94	52 %	10	5 %
Total Cholesterol	6	3 %	0	0 %
TC / HDL Ratio	43	24 %	1	1 %
Glucose	4	2 %	0	0 %