

CV Risk Assessment and Prevention Guidelines

Table 2. — Initial History and Cardiovascular Global Risk Assessment (cont)

Steps in evaluation and management of CVD risk:

Step 1 **Identify if this patient has CHD or CHD risk equivalent.**
Clinical CHD: Hx of MI, angina, CABG, PCI, ACS or evidence of ischemia
Carotid artery disease (TIA or CVA or >50% carotid obstruction)
Peripheral arterial disease (PAD)
Abdominal aortic aneurysm (AAA)
Diabetes
>20% 10-y Risk for CHD event (Framingham Risk Score)

If YES, proceed to secondary prevention guidelines on pp 24-25 and then return to step 5.

If NO, proceed to step 2.

Step 2 **Identify the major risk factors.**
Cigarette smoking
Hypertension (BP \geq 140/90) or on HTN medication
High cholesterol/High LDL
Low HDL-C (<40 mg/dL); HDL-C \geq 60 mg/dL, subtract 1 risk factor
Family history of premature CAD
 CHD in male first-degree relative <55 y old
 CHD in female first-degree relative <65 y old
Age: men \geq 45 y old; women \geq 55 y old

Step 3 **Evaluate the need for Framingham Risk Score.**
Single risk factor — go to step 4
Two or more risk factors (exclusive of LDL cholesterol):
• Calculate Framingham Risk Score
 See separate scoring for women on pp 15-16, men on pp 17-18.

Step 4 **Identify all CVD risk factors not at goal.**
Set appropriate goals depending on comorbidities
• See primary prevention guidelines on pp 19-20, then see individual treatment algorithms.

Step 5 **Action Plan**
1. Communicate results of risk assessment to patient.
2. Set goals and treatment plan for each risk factor, including lifestyle intervention.
3. Monitor progress toward treatment goals for each risk factor at return visits.