

Atherotech provides specialized tests as well as general follow-up tests uniquely suited for those patients at intermediate to high risk for heart disease.

Let Atherotech create a custom profile that meets your needs for all your at-risk patients. An example of routine profiles commonly ordered are:

Advanced CVD Risk Profile

- VAP and Triglycerides
- C-Reactive Protein-*hs*
- Homocysteine
- Insulin
- Apo E genotype
- Vitamin D
- Lp-PLA₂
- Glucose

Follow-up CVD Risk Profile

- VAP and Triglycerides
- C-Reactive Protein-*hs*
- Homocysteine
- Insulin
- Lp-PLA₂
- Glucose

Your Own Custom Profile

- VAP and Triglycerides
- Apo E genotype
- Creatinine
- Creatine Kinase (CK)
- HbA1c
- C-Reactive Protein-*hs*
- Homocysteine
- Insulin
- NT-proBNP
- TSH
- ALT
- AST
- Urea Nitrogen (BUN)
- Vitamin D
- Lp-PLA₂
- Glucose
- Cystatin C

Physicians should only order tests that are medically necessary and reasonable for the diagnosis or treatment of a Medicare or Medicaid patient for which reimbursement is claimed.



Personal Information	Sex: M	Date Drawn: 12/30/2007
Patient name: John Doe	Age: 43	Date Tested: 12/31/2007
Account: Internal Medicine	DOB: 06/04/1964	Accession: 12345678
Physician: James Doe	Client No: 38176	Patient ID: 30819

Additional CVD Risk Factors	Actual	Alert	Reference Ranges
C-Reactive Protein- <i>hs</i>	0.5 mg/L	Normal	Normal: < 1.0 mg/L Moderate: 1.0-3.0 mg/L Elevated: > 3.0 mg/L
Homocysteine	10.3 µmol/L	Normal	Male: < 11.4 µmol/L Female: < 10.4 µmol/L
NT-proBNP	215 pg/mL	High	< 125 pg/mL — < 75 yrs old < 450 pg/mL — > 75 yrs old
Lp-PLA ₂	190	Normal	<235 ng/mL
Vitamin D	5	Low	Deficiency: < 10 ng/mL Insufficiency: 10-29 ng/mL Sufficiency: 30-100 ng/mL Toxicity: >100 ng/mL

Genotype Results	Actual	Alert
Apo E genotype	E3/E3	E2/E2, E2/E3 E3/E4, E4/E4

- Apo E3/E3 is the most common genotype (62% of population) and is not associated with coronary heart disease (CHD). Apo E4 (genotypes E4/E4 and E3/E4) is found in 25% of population and is known to be associated with CHD. Patients with E4/E4 and E3/E4 have elevated LDL cholesterol and triglycerides when their diets are high in saturated fat. Apo E2 has the least affinity to receptors and causes slow conversion of IDL to LDL, resulting in significantly lower LDL cholesterol, elevated cholesterol-rich B-VLDL and triglycerides (type III hyperlipidemia) in E2/E2 genotype. E2/E2 genotype is present in about 1% of the population and type III hyperlipidemia is expressed in only about 1% of patients with E2/E2 genotype. Type III hyperlipidemia is strongly associated with premature CHD. A patient with a single allele of E2 (E2/E3 and E2/E4) may be at moderate risk.

- Physicians may recommend that patients consider genetic counseling on their Apo E genotype results.

- The performance characteristics of this test were validated by Atherotech. This test has not been cleared or approved by the U.S. Food and Drug Administration (FDA). The FDA has determined that such clearance or approval is not necessary. This test may be used for clinical diagnosis in conjunction with other relevant diagnostic information and hence should not be regarded as investigational or for research. Atherotech is certified under CLIA-88 as a laboratory qualified to perform high complexity testing.

Other Lab Test Results	Actual	Alert	Reference Ranges
Glucose	210	High	70-105 mg/dL — Adult 80-115 mg/dL — > 60 yrs old 83-110 mg/dL — > 70 yrs old
HbA1c	5.8%	Normal	< 6%
Insulin	20.4 µU/mL	Normal	2.6 — 24.9 µU/mL (fasting)
TSH	1.4 µIU/mL	Normal	0.49 — 4.67 µIU/mL
ALT	62 U/L	High	0 — 55 U/L
AST	3 U/L	Low	5 — 34 U/L
CK	120 U/L	Normal	Male: 30 — 200 U/L Female: 29 — 168 U/L
BUN	9.2 mg/dL	Normal	Male: 8.9 — 20.6 mg/dL Female: 7.0 — 18.7 mg/dL
Creatinine	2.4 mg/dL	High	Male: 0.7 — 1.3 mg/dL Female: 0.6 — 1.1 mg/dL
Cystatin C	2.92	High	0.5-1.03 mg/L

Note: Atherotech does not attempt to mandate or advise treatment for individual patients. Final recommendations lie with the clinician.