

Chronic Disease Risk Summary Report



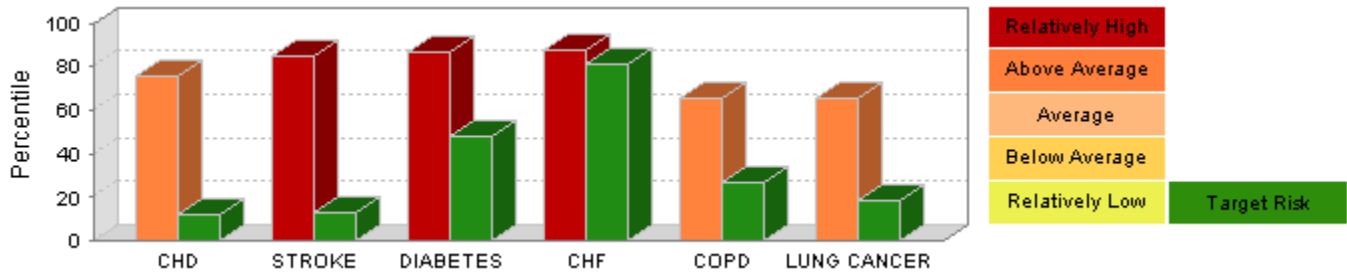
Name: John Smith	DOB: 03/01/1961
Age: 45	Gender: Male
Ethnicity: African American	Date: 02/14/2007

	CLINICAL MEASUREMENT	VALUE	REFERENCE
<25 Normal 25-29 Overweight 30-34 Obesity 1 35-39 Obesity 2 >=40 Obesity 3	Body Mass Index (BMI)	31.2	<25 kg/m ²
	Waist	41	<=40 Inches
	Blood Pressure Systolic	115	<120 mmHg
<120/80 Normal 120/80-139/89 Prehypertension 140/90-159/99 Hypertension I >=160/100 Hypertension II	Blood Pressure Diastolic	78	<80 mmHg
	Fasting Glucose	99	<100 mg/dL
<100 Normal 100-125 Prediabetes >=126 Diabetes	Pulse Rate	110	60-100 bpm
	Total Cholesterol	234	<200 mg/dL
<100 Optimal 100-129 Near Optimal 130-159 Borderline High 160-189 High >=190 Very High	HDL Cholesterol	38	>=40 mg/dL
	LDL Cholesterol	171	<130 mg/dL
	Triglycerides	126	<150 mg/dL
<200 Desirable 200-239 Borderline High >=240 High			
<150 Normal 150-199 Borderline High 200-499 High >=500 Very High			

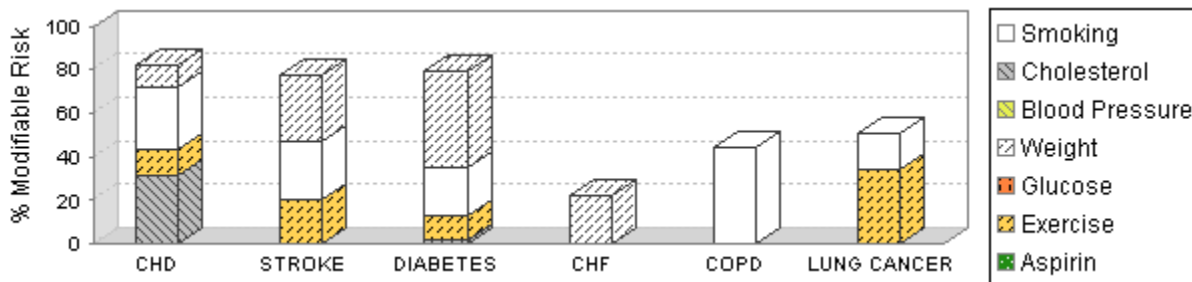
Metabolic Syndrome	No: Waist>40 ; Triglycerides>=150; HDL Cholesterol<40 ; Blood Pressure>=130/85; Fasting Glucose>=100
On Medication For	Aspirin to prevent heart attack
Lifestyle Factors	Low physical exercise ; Current smoker 15 cig/day for 10 years ; 0.429 alcoholic drinks/week ; 0 servings red meat/week

Risk	CHD	Stroke	Diabetes	CHF	COPD	Lung Cancer
Current 5-year risk of onset	5%	2.6%	12%	1.4%	3.8%	0.013%
Percent of current risk that is modifiable	82%	77%	79%	22%	44%	51%
Percentile (compared to other 45 year old men)	76%	85%	87%	88%	65%	65%

Risk Percentile: Current vs. Target



Modifiable Risks & Where They Come From



The impact of changing one risk factor could be higher than shown. Modifying one risk factor is likely to cause changes in others.

This report is not intended to diagnose or to recommend treatment for any disease but to predict the likelihood of occurrence based on established risk factors. Do not undertake any changes to your health without consulting your physician.

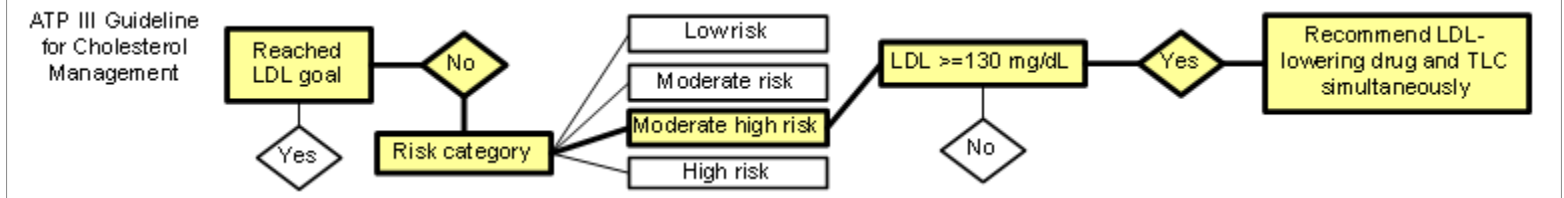
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Treatment/Action Plan Report

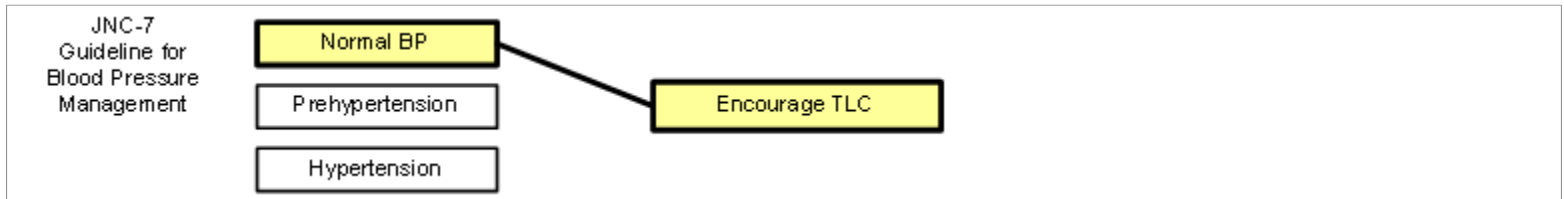


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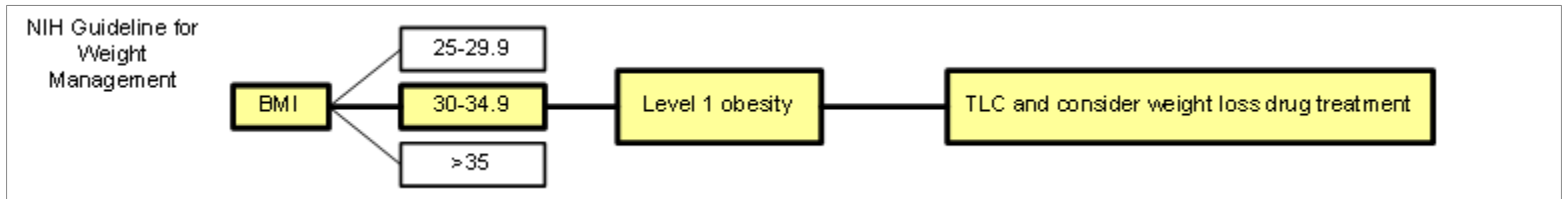
LDL Cholesterol: 171 mg/dL LDL Goal: 130 mg/dL



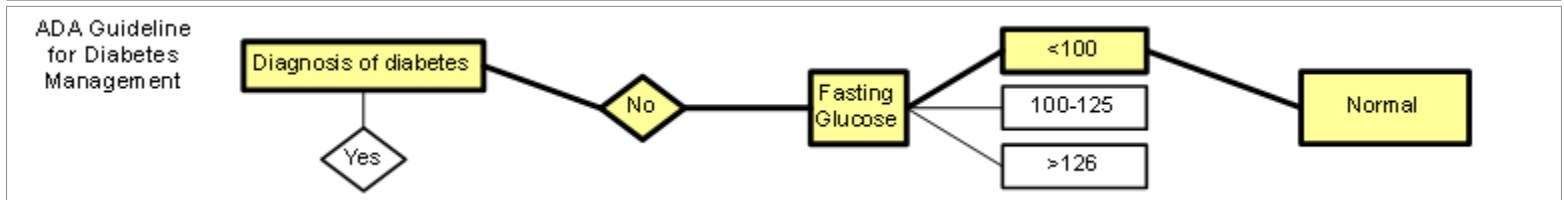
Therapeutic Lifestyle Changes (TLC) include reduced intakes of saturated fats (<7% of total calories) and cholesterol (<200 mg per day); therapeutic options such as plant stanols/sterols (2g/day) and increased viscous (soluble) fiber (10-25 g/day); weight management according to NIH guideline; increased physical activity; check LDL in 6 weeks.



Therapeutic Lifestyle Changes (TLC) include: maintain normal body weight (BMI 18.5-24.9) (5-20 mmHg BP reduction/10 Kg weight loss); adopt a diet rich in fruits, vegetables, and low fat dairy products with reduced content of saturated and total fat (8-14 mmHg); reduced dietary sodium intake to less than 2.4 g sodium or 6 g sodium chloride (1 teaspoon salt) per day (2-8 mmHg); regular aerobic physical activity (e.g. brisk walking) at least 30 minutes per day, most days of the week (4-9 mmHg); limit to <=2 drinks per day (e.g. 24 oz beer, 10 oz wine, 3 oz 80-proof whiskey) (2-4 mmHg).



Therapeutic Lifestyle Change (TLC) include: (1) Set up initial goal of weight loss by approximately 10% in 6 months, about 1-2 lb/week; (2) Dietary therapy create a deficit of 500 to 1000 kcal/day, fat <30% calories, reduced saturated fat; (3) Physical activity: 30 minutes or more of moderate-intensity physical activity on most, and preferable all days of the week.



Recommended Preventive Screening

Procedure	Frequency	Done	Need
Health maintenance exam (including exams for cancer of thyroid, mouth, skin, testicles, lymph nodes, and screening for depression, smoking, alcohol or drug use)	Every 2-3 years		
Height, weight, BMI, BP	Every 2-3 years		
Self exam (testicles)	Monthly		
Prostate cancer/DRE	Every 3-4 years		
Lipid screen	Every 5 years		
Glucose	Every 3 years		
Vaccine: Tetanus-diphtheria	Booster every 10 years		

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Diabetes Complications Summary

NAME: John Smith	ID #: 02142007
DOB: 03/01/1961	ETHNICITY: African American
GROUP: BioQACustB2P1	GENDER: Male
PHYSICIAN: Dr. Physician	RECORD DATE: 02/14/2007



Risk of Onset for Diabetes Complications - 02/14/2007

Risk	5-Year Risk		10-Year Risk		
	CHD	Stroke	Blindness	Amputation	End-Stage Renal Disease
Current risk of onset	7%	3.7%	0.34%	0.34%	0.013%
Target risk	0.95%	0.83%	0.22%	0.34%	0.013%
% of risk that is modifiable	86%	77%	37%	0%	0%

RISK FACTOR	RANGE	CURRENT
HbA1c	<7%	4
LDL Cholesterol	<100 mg/dL	171
HDL Cholesterol	>40 mg/dL	38
Triglycerides	<150 mg/dL	126
Blood Pressure Systolic	<130 mmHg	115
Blood Pressure Diastolic	<80 mmHg	78
Weight		230
Diabetes Status		Type 1
Years Since Diagnosed		6
Coronary Heart Disease (CHD) Status		No
Stroke Status		No
Other Cardiovascular Disease		No
Nephropathy Stage		None
Retinopathy Stage		None
Macular Edema		None
Neuropathy Stage		Subclinical
Insulin Usage		Yes
Glucose Control (other than insulin)		No
Medication for lowering blood pressure		No
Medication for lowering cholesterol		No
Aspirin Usage		Yes
Eye Screening		No
Family History of CHD		No
Family History of Stroke		No
Exercise Level		Low
Current Smoker		Yes

Clinical Measures	Patient Value	ADA Suggested Treatment*
HbA1c	4	<ul style="list-style-type: none"> Patient is well controlled. Perform HbA1c test at least twice a year. Maintain the same level of glycemic control intensity.
Yearly Eye Exam	No	<ul style="list-style-type: none"> Schedule dilated retinal eye exam or funduscopy photograph by ophthalmologist at least once a year.
Routine Foot Exam		<ul style="list-style-type: none"> Perform foot examinations (unless patient has bilateral foot amputation), visual inspection, sensory exam with monofilament and pulse exam.
Aspirin Usage	Yes	<ul style="list-style-type: none"> Recommend aspirin therapy (75-163 mg/day).
Smoking Status	Yes	<ul style="list-style-type: none"> Initiate smoking cessation counseling or pharmacologic action.
Nephropathy Stage	None	<ul style="list-style-type: none"> Monitor kidney function at least once a year through urine protein test or urinalysis (dipstick) or microalbumin dipstick or quantitative microalbumin determination.

* Follow ATP III guidelines for lipid management and JNC 7 guidelines for blood pressure control

* Recommend influenza vaccine yearly

Cancer Risk Summary

NAME: John Smith	ID #: 02142007
DOB: 03/01/1961	ETHNICITY: African American
GROUP: BioQACustB2P1	GENDER: Male
PHYSICIAN: Dr. Physician	RECORD DATE: 02/14/2007



RISK FACTOR	VALUE	ALERT	MODIFIABLE	DESIRABLE RANGE
Colon Cancer Status	No			None
Prostate Cancer Status	No			None
Family History of Colon Cancer	No			None
Family History of Prostate Cancer	No			None
Red Meat Consumption (per week)	0		x	None
Alcohol Consumption (per week)		3	x	None
Exercise Level		Low	x	High
Body Mass Index (BMI)		31.2	x	<25 kg/m ²
Height (feet)	6			
Height (inches)	0			
Age	45			

Risk	Colon Cancer	Prostate Cancer
Current 5-year risk of onset	0.32%	0.62%
Achievable risk	0.15%	0.34%
Percent of current risk that is modifiable	54%	46%
Current cancer age compared to all other American men	Age 50 Above Age Risk	Age 54 Above Age Risk
Achievable cancer age compared to all other American men	Age 44 Below Age Risk	Age 45 At Age Risk

Comparison of Your Current and Achievable Cancer Age

