

#### PATIENT: XXXXXXXXXXXXXXX

TEST NUMBER: G-NL-XXXXXXXX
GENDER: Female
AGE: XX

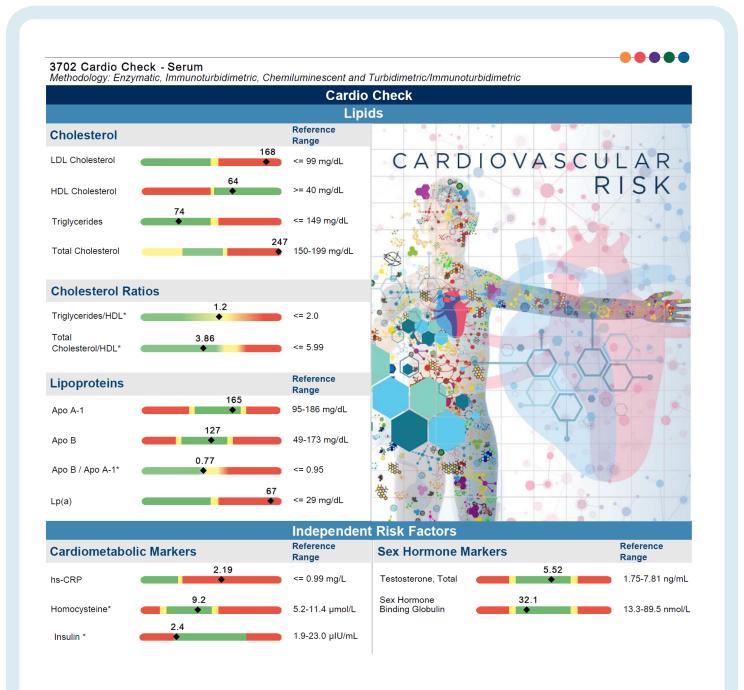
COLLECTED: XX-XXX-2023
RECEIVED: XX-XXX-2023

XX-XXX-2023 XX-XXX-2023 TEST REF: GNL-NL-XXXXX

XXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXXX

## **TEST NAME: Cardio-Check**





#### PATIENT: XXXXXXXXXXXXXXX

TEST NUMBER: G-NL-XXXXXXXX
GENDER: Female
AGE: XX

COLLECTED: XX-XXX-2023
RECEIVED: XX-XXX-2023
TESTED: XX-XXX-2023

xxxxxxxxxxxxxxxxxx

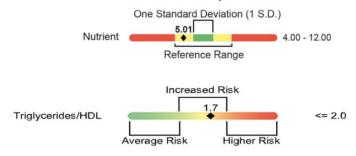
### **TEST NAME: Cardio-Check**

### **Commentary**

The performance characteristics of all assays have been verified by Genova Diagnostics Inc. All Assays have been cleared by the U.S. Food and Drug Administration.

Commentary is provided to the practitioner for educational purposes and should not be interpreted as diagnostic or as treatment recommendations. Diagnosis and treatment decisions are the practitioner's responsibility.

The **Reference Range** is a statistical interval representing 95% or 2 Standard Deviations(2 S.D.) of the reference range population. One Standard Deviation (1 S.D.) is a statistical interval representing ~68% of the reference population. Values between 1 and 2 S.D. are not necessarily abnormal. Clinical Correlation is suggested.



# \*Additional Interpretive Information:

Triglycerides/HDL Ratio: The expected range is based on a thorough analysis of the peer-reviewed literature regarding the relationship between Trg/HDL ratio and cardiometabolic risk. The increased risk associated with higher values are highlighted in *Diabetes Metab Syndr 2019; 13(1):382-388*. More information can be found in the Cardio Check support guide and the literature listed below:

https://pubmed.ncbi.nlm.nih.gov/30641729/

Total Cholesterol/HDL Ratio: The expected range is based on a thorough analysis of the peer-reviewed literature regarding the relationship between TC/HDL ratio and cardiovascular disease risk. The increased risk associated with higher values are highlighted in *J Am Col Card 2010; 55(1):35-41*. More information can be found in the Cardio Check support guide and the literature listed below.

https://pubmed.ncbi.nlm.nih.gov/20117361/

Apo B/ Apo A-1: The expected range is based on a thorough analysis of the peer-reviewed literature regarding the relationship between the Apo B/ Apo A-1 ratio and cardiovascular disease risk. The increase risk associated with higher values are highlighted in *Annals of Internal Medicine 2007; 146:640-8*. More information can be found in the Cardio Check support guide and literature listed below:

https://pubmed.ncbi.nlm.nih.gov/17470832/

Homocysteine: The reference range for the biomarker Homocysteine is based on the sex-specific 5th to 95th percentile values for men and women (20 to 39 years of age) in the NHANES nutritionally replete cohort. Annals of Internal Medicine 1999; 141 (331-338).

Insulin: Fasting insulin levels over 8.57 µIU/ml were shown to be predictors of metabolic syndrome development.

Nordic Laboratories Aps

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