The National Heart-Lung-Blood Institute (NHLBI) recommends a person has baseline cholesterol screening when they are 20 years old.

**Cholesterol Screening (lipid panel) is available by appointment in the Student Health & Wellness Office.** The cost of screening is $20 for students and $25 for college employees (7.1.2013). A 12-hour food fast is recommended. Individual health education is provided by the college nurse with each screening. Blood pressure screening is also available at no additional cost.

Lipid panel results are available within 15 minutes and include:
- Total Cholesterol
- HDL ("GOOD" cholesterol)
- Total Cholesterol / HDL ratio
- LDL ("BAD" cholesterol)
- Triglycerides
- Blood sugar
- VLDL (Very low density lipids)

**What are YOUR numbers?**
- American Heart Association - [http://www.heart.org/HEARTORG/](http://www.heart.org/HEARTORG/)

**What Your Numbers Mean**

Cholesterol is measured in milligrams per deciliter of blood (mg/dL). Your total blood cholesterol is the number you normally receive with your test results. To determine your risk for heart disease, it’s also important to know how this number breaks down into LDL cholesterol ("bad"), HDL cholesterol ("good"), and triglyceride levels.

Here’s a guide to interpreting your test results:

**Total Blood Cholesterol Level**

Your total blood cholesterol will fall into one of these categories:

- **Desirable: Less than 200 mg/dL**
  In this range, your heart attack or stroke risk is relatively low, unless you have other risk factors. Almost half of adults have total cholesterol levels below 200 mg/dL. Have your cholesterol levels measured every five years-or more often if you’re a man over 45 or a woman over 55.

- **Borderline high risk: 200-239 mg/dL**
  About a third of American adults are in this group. Have your cholesterol and HDL rechecked in one to two years if your total cholesterol is in this range; if your HDL is less than 40 mg/dL; or if you don't have other risk factors for heart disease. Talk to your healthcare provider about managing your individual risk.

- **High risk: 240 mg/dL and over**
  About 20 percent of the U.S. population has high blood cholesterol levels. Your risk of heart attack and stroke is greater in this range. In general, people who have a total cholesterol level of 240 mg/dL have twice the risk of coronary heart disease as people whose cholesterol level is 200 mg/dL.

  It is important to discuss your cholesterol and overall risk of heart disease and stroke with a healthcare professional.

**LDL ("Bad") Cholesterol Level**

The lower your LDL cholesterol, the lower your risk of heart attack and stroke. In fact, it’s a better gauge of risk than total blood cholesterol. Talk to your healthcare provider about managing your individual risk.

<table>
<thead>
<tr>
<th>LDL Cholesterol Levels</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 100 mg/dL</td>
<td>Optimal</td>
</tr>
<tr>
<td>100 to 129 mg/dL</td>
<td>Near Optimal / Above Optimal</td>
</tr>
<tr>
<td>130 to 159 mg/dL</td>
<td>Borderline High</td>
</tr>
<tr>
<td>160 to 189 mg/dL</td>
<td>High</td>
</tr>
</tbody>
</table>
HDL ("Good") Cholesterol Level
With HDL ("Good") cholesterol, higher levels are better. Low HDL cholesterol (less than 40 mg/dL for men, less than 50 mg/dL for women) puts you at high risk for heart disease. In the average man, HDL cholesterol levels range from 40 to 50 mg/dL. In the average woman, they range from 50 to 60 mg/dL.

People with high blood triglycerides usually have lower HDL cholesterol and a higher risk of heart attack and stroke. Progesterone, anabolic steroids and male sex hormones (testosterone) also lower HDL cholesterol levels. Female sex hormones raise HDL cholesterol levels.

Triglyceride Level
Your triglyceride level will fall into one of these categories:

<table>
<thead>
<tr>
<th>Triglyceride Level</th>
<th>Classification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 150 mg/dL</td>
<td>Normal</td>
</tr>
<tr>
<td>150-199 mg/dL</td>
<td>Borderline-high</td>
</tr>
<tr>
<td>200-499 mg/dL</td>
<td>High</td>
</tr>
<tr>
<td>500 mg/dL or higher</td>
<td>Very high</td>
</tr>
</tbody>
</table>

Many people with high triglycerides have underlying diseases or genetic disorders. If this is true for you, the main therapy is to change your lifestyle. This includes controlling your weight, eating foods low in saturated fat and cholesterol, exercising regularly, not smoking and, in some cases, drinking less alcohol. Visit your healthcare provider to create a plan of action that will incorporate all these lifestyle changes.

People with high triglycerides also may need to limit their intake of carbohydrates to no more than 45-50 percent of total calories. The reason for this is that carbohydrates raise triglycerides in some people and lower HDL cholesterol. Use products with monounsaturated and polyunsaturated fats.

Cholesterol Ratio
Some physicians and cholesterol technicians use the ratio of total cholesterol to HDL cholesterol in place of the total blood cholesterol. The American Heart Association recommends that the absolute numbers for total blood cholesterol and HDL cholesterol levels be used. They're more useful to the physician than the cholesterol ratio in determining the appropriate treatment for patients.

The ratio is obtained by dividing the HDL cholesterol level into the total cholesterol. For example, if a person has a total cholesterol of 200 mg/dL and an HDL cholesterol level of 50 mg/dL, the ratio would be stated as 4:1. The goal is to keep the ratio below 5:1; the optimum ratio is 3.5:1.