

Family Medicine Second Opinions™ Consultation

Date:

Patient:

Discussion:

Patient with recent blood work from PCP. LDL is 255 mg/dL, HDL is 54 mg/dL, total cholesterol is 336 mg/dL. Triglycerides are normal. Remaining blood work is unremarkable.

Using the ASCVD risk estimator patient's lifetime risk of a cardiovascular event is 50%. With the addition of high-intensity statin, risk is reduced to 15%.

If addition of statin does not reduce LDL by 50%, addition of Zetia is recommended.

Recommendations:

I agree with lifestyle changes, and continuing excellent diet and exercise routine.

I suspect he has a familial hypercholesterolemia which requires treatment, I suspect this is why multiple members of his family have had a cerebrovascular disease and strokes.

I recommend starting a high-intensity statin at a moderate dose. I believe the 20 mg of Lipitor that were started by his PCP is appropriate with rechecking labs in 3 months. I would increase to 40 mg or change to rosuvastatin if desired effect not achieved.

Answers to patient's questions:

1. I agree that you should be started on a statin, I think the choice of Lipitor at 20 mg is appropriate. My recommendation would be to reduce your LDL cholesterol which is the bad cholesterol by 40%.
2. I do not think there is anything further for your cholesterol that you could do lifestyle related.
3. I agree with rechecking cholesterol again in 3 months and adjusting the Lipitor dose from 20 mg to 40 mg if you are not at goal.

References:

ASCVD risk estimator

Electronically Signed by: Board Certified:

Board Certified Family Medicine

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