

Dear Healthcare Provider,

This individual's familial risk for heart disease is increased.

This individual has completed the heart disease risk assessment module of the **U.S.**

Surgeon General's My Family Health Portrait web-based family history tool

(<https://phgkb.cdc.gov/FHH/>).^{*} This individual has been instructed to seek your advice regarding their risk for heart disease and steps they should take to reduce their risk.

The risk estimate generated by this tool uses family health history and limited personal medical history information to classify patients into "not increased" or "increased" risk categories for heart disease.

The risk estimate does not reflect other risk factors such as diet, race, or body mass index.

This individual's increased risk is due to one or more of the following:

- Personal history of angina or heart attack before age 50
- Personal history of heart disease, stroke, hypertension, high cholesterol, familial hypercholesterolemia, or diabetes at any age
- Parent, sibling, or child had angina or a heart attack before age 50
- One or more male relatives had heart disease, a heart attack, or a stroke/brain attack before age 50
- One or more female relatives had heart disease, a heart attack, or a stroke/brain attack before age 60
- Sudden death (due to heart problems) of a male relative before age 50
- Sudden death (due to heart problems) of a female relative before age 60
- One or more family members with familial hypercholesterolemia at any age
- One or more family members with diabetes at any age

Next steps (based on your clinical judgement)

- Please review the family and personal history of this individual to confirm heart disease risk factors and identify any additional heart disease risk factors.
- Please discuss the need for blood pressure, cholesterol, and other screenings with the individual.
- Please discuss preventive measures such as diet, exercise, and use of aspirin.
- For patients with high cholesterol and a family history of heart disease before age 50 in one or more male relatives or before age 60 in one or more female relatives, please consider screening for familial hypercholesterolemia.

For more information on risk factors for heart disease, please see:

- [Heart Disease, Family Health History, and Familial Hypercholesterolemia](#)
- [Heart Disease](#)
- [Million Hearts®](#)

*The module is based on the following references:

- Grundy et al. 2018 AHA/ACC/AACVPR/AAPA/ABC/ACPM/ADA/AGS/ APhA/ASPC/NLA/PCNA Guideline on the Management of Blood Cholesterol: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. J Am Coll Cardiol. 2019; 73:e285-350.
- Lloyd-Jones et al. Use of Risk Assessment Tools to Guide Decision-Making in the Primary Prevention of Atherosclerotic Cardiovascular Disease: A Special Report From the American Heart Association and American College of Cardiology. Circulation. 2019; 139:e1162-e1177.
- Moonesinghe et al. Prevalence and Cardiovascular Health Impact of Family History of Premature Heart Disease in the United States: Analysis of the National Health and Nutrition Examination Survey, 2007-2014. J Am Heart Assoc. 2019; 8:e012364.
- Ridker et al. C-Reactive Protein and Parental History Improve Global Cardiovascular Risk Prediction: The Reynolds Risk Score for Men. Circulation. 2008; 118:2243-51.
- Ridker et al. Development and validation of improved algorithms for the assessment of global cardiovascular risk in women: the Reynolds Risk Score. JAMA. 2007; 297:611-9.