CARDIOVASCULAR RISK ASSESSMENT SHEET

Patient Name:			{'NAME': 'JANE DOE'}			Da	Date:		2021-10-04		
Age:	ge: 50			Sex: baba		<u> </u>		Heigh	Height:		
167.0			V	Weight: 79.		0	Waist:			:	
		72.0									
Cara	liovos	ouler Die	l, Cootor								
Diabe		scular Ris		5							
1	oman										
		-	lanning Dre	egnancy 🔿 Yes 🙃 No	o: C 2 P 2	Doctmor	aonai	uso a Vos	. a NI	0	
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			PAST I	MEDICAL / SURG	ICAL HIST	ORY					
Hospitalizatio				on or Surgery			Medical History				
Reason				Date							
							hasDiabetes				
							hasBpMedication				
										Cause	
Fami	ily HX	Name	Alive	Hypertension	CAD	Stroke	PVD	Diabetic	Age	of	
										Death	
Mother		{'name':	V00	yes	yes	yes	yes	yes	65		
		'Janine Doe'}	yes								
Father		{'name':	no	no	no	no	no	no	65	sakit	
Fairei		'John Doe'}	110	110		110	110	110	03	tyan	
		PRIMA	RY PRE	VENTION A	SSESS	MEN	T T	OOL			
1.	1 Smoking status not smoking: No										
<u> </u>											
		3		yes amount: 2	·						
2.	2. Diet No										
3.	B. Alcohol intake Amount/frequency: 2										
4.	4. Physical activity ves										

- 5. Blood pressure 90.0
- 6. Waist circumference 72.0
- 7. Cholesterol 130.0 goal(<200)

 HDL 20.0 goal (men ≥ 40) (women ≥ 50)

 Diastolic 12.0 goal (men ≥ 40) (women ≥ 50)

 HBA1C 12.0
- 8. Risk Risk: 8.80
- 9. Comment