

Advanced Cardiometabolic Profile & Protocol Worksheet

Client Name: ____ Date: ____ Practitioner: ____ Target Re-test Date: ____

Section 1: The Reveal (Advanced Biomarker Assessment)

Compare current labs against Functional Medicine optimal ranges. Check the box if the marker requires clinical "Targeting."

Marker Category	Biomarker	Optimal Range	Client Value	Needs Focus?
Particle Count	LDL-P (Particle Number)	< 1,000 nmol/L	_____	[]
Particle Size	LDL Size (Pattern A vs B)	Pattern A (Large)	_____	[]
Atherogenic Load	ApoB	< 80 mg/dL	_____	[]
Vascular Fire	Lp-PLA2 (PLAC)	< 200 ng/mL	_____	[]
Oxidative Stress	Myeloperoxidase (MPO)	< 470 pmol/L	_____	[]
Metabolic Health	HOMA-IR (Insulin/Gluc)	< 1.9	_____	[]
Cellular Health	Omega-3 Index	> 8%	_____	[]

Section 2: Risk Interpretation (The R.O.O.T.S. Analysis)

Use the "Tennis Ball vs. Golf Ball" analogy to explain results to the client.

1. **Particle Risk (The "Vehicles"):** * [] **Low Risk:** High LDL-C but low LDL-P (Large, fluffy "Tennis Balls"). * [] **High Risk:** High LDL-P and/or Pattern B ("Golf Balls" getting stuck in the arterial net).

2. Inflammatory Risk (The "Fire"): * [] **Stable:** Markers like Lp-PLA2 and MPO are within range. * [] **Active:** High Lp-PLA2 suggests "active" plaque that is prone to rupture.

3. Metabolic Efficiency (The "Engine"): * [] **Efficient:** Low HOMA-IR; body processes fuel easily. * [] **Resistant:** High HOMA-IR; the pancreas is overworking to maintain blood sugar.

Section 3: The Target Phase (Action Plan)

Based on the results above, prioritize the following interventions:

Priority Area	Action Step	Frequency/Dosage
Dietary Shift	[] Reduce Refined Carbs [] Increase Soluble Fiber	
Movement	[] Strength Training [] Zone 2 Cardio	
Stress/Sleep	[] 7-8 Hours Sleep [] Daily Breathwork	
Supplementation	[] Omega-3 [] Berberine/ALA [] Antioxidants	

Practitioner Observations & Reflection

Primary Clinical Goal: _____

Client Readiness for Change (1-10): ____

Notes on Metabolic/Vascular Synergy:

Next Steps:

1. _____
2. _____

3. Follow-up Session Date: _____

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