

Pharmacy Name and/or Logo		Patient:	
Pharmacy Address		PHN:	
Pharmacy Phone/Fax Number		Pharmacist:	

FRAMINGHAM RISK ASSESSMENT CONDITION PLAN AND INTERVENTION FORM

Who To Screen		
- Men ≥ 40 years of age, and women ≥ 50 years of age or postmenopausal, - Earlier in ethnic groups at such as South Asians or First Nations individuals, or - All patients with any of the following conditions, regardless of age:		
Modifiable Risk Factors	Non-Modifiable Risk Factors	
Smokes cigarettes, cigars, etc. Diabetes* Arterial hypertension* Obesity (BMI > 27) Hyperlipidemia	Inflammatory disease Rheumatoid arthritis Psoriatic arthritis SLE IBD Ankylosing spondylitis	CKD* HIV infection COPD Family hx of hyperlipidemia Erectile dysfunction
* These conditions may be considered automatically high risk		
What to Screen		
Automatically Considered High Risk – FRS $\geq 20\%$ No need to calculate FRS – Go directly to discussing Risk Factors		
Vascular disease Atherosclerosis Previous MI Coronary revascularization CABG surgery Arterial revascularization Angina Congestive heart failure Venous thrombosis Arrhythmias Abdominal aortic aneurysm Electrocardiogram abnormalities	Cerebrovascular disease Stroke Transient ischemic attacks Peripheral arterial disease Vascular dementia Hypertension + 3 of the following: Male Age > 55 Smoking Total C/HDL-C ratio > 6 Lt ventricular hypertrophy Microalbuminuria	Diabetes and age ≥ 40 Diabetes > 15 years duration + age ≥ 30 Diabetes > 15 years duration + microvascular disease (retinopathy, nephropathy, neuropathy) Chronic kidney disease eGFR ≤ 45 mL/min, or ACR ≥ 30 mg/mmol Family history of premature CVD - Men < 55, or Women < 65
CKD		Yes / No
eGFR ≤ 60 mL/min, or ACR ≥ 3 mg/mmol		ACR (mg/mmol):
SCr (umol/L):	eGFR (mL/min):	
Goal of Therapy:		
Notes:		

What to Screen, Continued...		
Smoking Status		Yes / No
Goals of Therapy:		
Notes:		
Obesity (BMI > 27)		Yes / No
Ht:	Wt:	BMI:
Goal of Therapy:		
Notes:		
Diabetes		Yes / No
FPG ≥ 7.0 mmol/L, RPG or 2hPGOGTT ≥ 11.1 mmol/L, or A1C $\geq 6.5\%$		A1C (%):
		2hPG OGTT(mmol/L):
FPG (mmol/L):	Random PG (mmol/L):	2hPPG (mmol/L):
Goal of Therapy:		
Notes:		
Hypertension		Yes / No
		BP:
If diabetes 130/80, high risk 140/90, low risk 160/90, or very elderly SBP 160		
Goals of Therapy:		
Notes:		
Hyperlipidemia		Yes / No
Use FRS to calculate low, intermediate or high risk		Non-HDL (mmol/L):
		TG (mmol/L):
Total Chol (mmol/L):	LDL (mmol/L):	HDL (mmol/L):
Goal of Therapy:		
Notes:		

When to Initiate Cholesterol Therapy		Primary Target	Alternate Target
High FRS $\geq 20\%$	Consider treatment in all	$\leq 2\text{mmol/L}$ or $\geq 50\%$ decrease in LDL	- Apo B $\leq 0.8\text{ g/L}$ or - Non-HDL $\leq 2.6\text{ mmol/L}$
Intermediate FRS 10 – 19%	- LDL $\geq 3.5\text{mmol/L}$ - For LDL $< 3.5\text{ mmol/L}$ consider if: Apo B $\geq 1.2\text{g/L}$ or Non-HDL $\geq 4.3\text{ mmol/L}$	$\leq 2\text{mmol/L}$ or $\geq 50\%$ decrease in LDL	- Apo B $\leq 0.8\text{ g/L}$ or - Non-HDL $\leq 2.6\text{ mmol/L}$
Low FRS $< 10\%$	- LDL $\geq 5.0\text{ mmol/L}$ or - Familial hypercholesterolemia	$\geq 50\%$ decrease in LDL	N/A

Identify Drug Therapy Problems

Plan to Resolve Drug Therapy Problems (DTPs) or Health Issues

- ☐ Initiate Drug Therapy
- ☐ Discontinue Drug Therapy
- ☐ Changed frequency of Admin
- ☐ Increase Dose
- ☐ Decrease Dose
- ☐ Provide Patient Education/Info
- ☐ Refer to:

Plan for Follow-up

- ☐ 7 days
- ☐ 14 days
- ☐ 1 month
- ☐ Monthly
- ☐ 3 months
- ☐ 6 months
- ☐ Annually
- ☐ Other:

***Attach relevant lab report data to this form if/when available.**

A copy of this form to be kept on file in the pharmacy pursuant to the Health Information Act.