

CardioVision_R MS-2000

Patient : **00010** Date:2002/06/12 10:23

Name : **Akemi Rice**

Sex : **Female**

Age : **43**

Memo Monopril HCT 20/12.5mg 1X2 a day Glucovance 5/500mg 2X2 a day
y Actos 30mg 1x1 a day Tamoxifen 10mg 1x2 a day

ASI Range

A 0 - 80

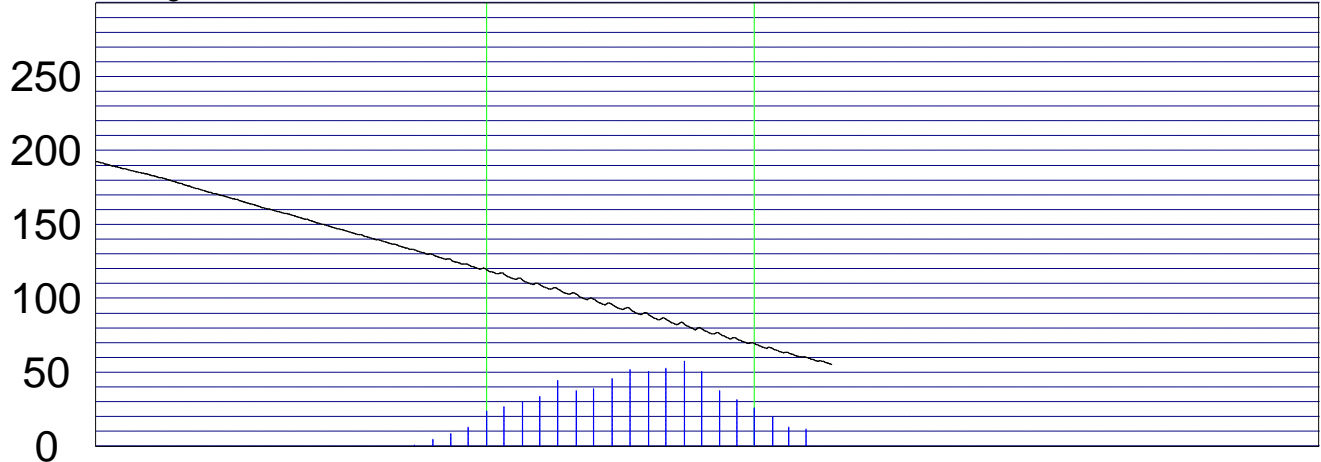
AC 81 - 209

C 210 +

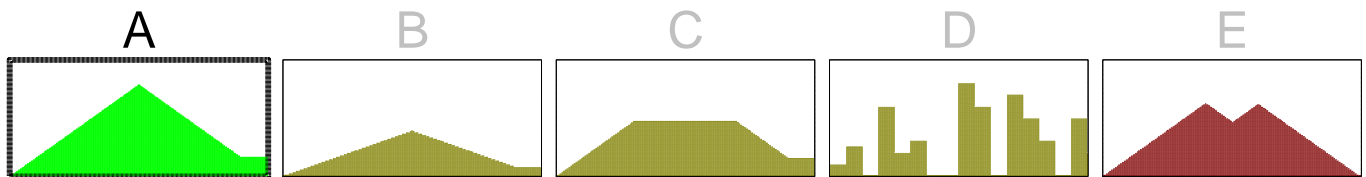
LIPID PROFILE AND OTHER TESTS

Cholesterol	LDL-Cholesterol	HDL-Cholesterol	Triglycerides	Glucose	HbA1c	ALT
172 mg/dL	96 mg/dL	38 mg/dL	192 mg/dL	207 mg/dL	4.4 %	22 U/L
Ankle Brachial Index		Brachial Pressure		Left Ankle	102 mmHgCV	ABI 0.88
(<0.9=Increased PVD Risk)		Supine 116 mmHg		Right Ankle	107 mmHgCV	ABI 0.92
(>1.30=Non-compressible)						

mmHg



ASI	Systolic	Diastolic	Pulse	PulsePress
55	120	70	83	50
				>60=Increased Risk



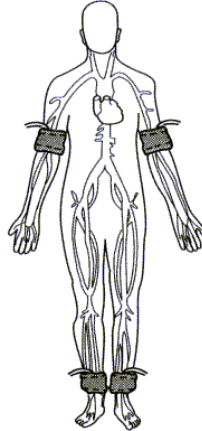
PATTERN A

This pulse wave pattern demonstrates normal stiffness of the brachial artery. As the CardioVision measures blood pressure and pulse rate it also measures and calculates the stiffness of the brachial artery as the pressure is released from the blood pressure cuff. The Arterial Stiffness Index (ASI) ranges from 0-750+. It produces the pattern classification according to measured arterial stiffness or flexibility (lower ASI=flexible and higher ASI=inflexible). This information is graphically displayed as pulse waves on the computer screen. Since the stiffness of the brachial artery has been shown to correlate with the stiffness of the other arteries, it can be assumed that this patient is at a lowered risk for artery disease. However, this correlation is not absolute and can only be interpreted in light of other risk factors for artery disease.

CardioVision_R MS-2000 Ankle Brachial Index (ABI)

Patient : **00010**
Name : **Akemi Rice**
Sex : **Female**
Age : **43**

Right Arm Systolic Pressure
116 mmHg
Used in ABI calculation
Supine Position



Left Arm Systolic Pressure
114 mmHg
Supine Position

Right Ankle Systolic Pressure
107 mmHg
(CV)
Supine Position

Left Ankle Systolic Pressure
102 mmHg
(CV)
Supine Position

Right ABI
0.92
 $\frac{\text{Right Ankle Pressure}}{\text{Higher Arm Pressure}} =$

Left ABI
0.88
 $\frac{\text{Left Ankle Pressure}}{\text{Higher Arm Pressure}} =$

Blood Pressure & Arterial Stiffness Index(ASI) Sitting Position [0249 - 2002/06/12 10:23]

Systolic	Diastolic	Pulse Pressure	Pulse	ASI
120mmHg	70mmHg	50mmHg	83	55

Pulse Pressure:(≥ 60 Increased Risk) Internal Medicine News 2000:33:1-2
ASI:(< 80 Low Risk, 81-209 Moderate Risk, > 210 High Risk)

LAB TESTS

Cholesterol	LDL-Cholesterol	HDL-Cholesterol	Triglycerides	Glucose	HbA1c	ALT	Framingham Risk
172 mg/dL	96 mg/dL	38 mg/dL	192 mg/dL	207 mg/dL	4.4 %	22 U/L	4 %

Arterial Stiffness Index ASI Range
A 0- 80
AC 81-209
C 210+

Ankle Brachial Index Interpretation	
N Engl J Med, Vol.344, No21, Page1608-1621	
> 1.30	- Non-compressible
$0.91-1.30$	- Normal
$0.41-0.90$	- Mild to moderate peripheral artery disease
$0.00-0.40$	- Severe peripheral artery disease

Compared to women of the same age.

Age (years)	Comparative Risk	
	Average 10 Yr CHD Risk	Low* 10 Yr CHD Risk
30-34:	$< 1\%$	$< 1\%$
35-39:	1%	$< 1\%$
40-44:	2%	2%
45-49:	5%	3%
50-54:	8%	5%
55-59:	12%	7%
60-64:	12%	8%
65-69:	13%	8%
70-74:	14%	8%

*Low risk was calculated for a woman the same age, normal blood pressure, total cholesterol 160-199 mg/dL, HDL cholesterol 55 mg/dL, non-smoker, no diabetes

Risk estimates were derived from the experience of the NHLBI's Framingham Heart Study, a predominantly Caucasian population in Massachusetts, USA

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