

Frequently Asked Questions

Enhanced Lipid Reporting

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Cardiovascular disease (CVD) is the second leading cause of death in Alberta, and the number one cause of death for women. Many heart attacks and strokes can be prevented through healthy lifestyle changes and medication when risk is known. Identification of those at risk of CVD is an essential first step.

Primary care providers in Alberta are beginning to use [Enhanced Lipid Reporting](#) (ELR) to identify cardiovascular disease risk. Below are answers to frequently asked questions from primary care teams (practice facilitators, panel managers, quality improvement leads, physicians, clinic managers and staff) as they seek to implement ELR into practice.

The Cardiovascular Health and Stroke Strategic Clinical Network™ has provided this resource to assist primary care teams with identifying and managing those at risk for cardiovascular disease.

General Overview: Enhanced Lipid Reporting

What is ELR?

- ELR is an easy-to-use lab-based approach to calculate CVD risk and ensure those at risk receive guideline-directed treatment.
- View this brief [overview](#) and [infographic](#).

How does ELR work?

- ELR provides a CVD risk score on lab reports, based on information from a patient's lab requisition and blood sample. Lab staff enter information from the lab requisition into Connect Care at the time of the patient's blood draw. CVD risk results are then calculated using the Framingham Risk Score (FRS) algorithm built into Connect Care.
- Clinics using this lab-based CVD risk assessment will receive an Enhanced Lipid Report with the patient's risk results and treatment recommendations based on current Canadian Cardiovascular Society (CCS) Dyslipidemia guidelines.
- View this brief [video overview of Enhanced Lipid Reporting](#) (*runtime: 2 minutes, 11 seconds*)



Why would I use ELR instead of another CVD risk assessment tool or App?

- **Efficiency:** CVD risk screening is integrated into regular workflow providing easy access to CVD risk calculations and CCS treatment guidelines on the lab report.
- **Continuity of Care:** CVD risk results, including answers to CVD assessment questions, are sent to Netcare allowing information to be shared with the healthcare team (tobacco use, family history of CVD, systolic blood pressure (BP), BP treatment, chronic kidney disease, atherosclerosis). This facilitates continuity of care between acute care and family medicine.
- **Patient Support:** CVD risk is reported to the patient through 'MyHealth Record' and linked to [support resources](#) promoting patient awareness, healthy living, and education.
- **Data Access:** Technical enabler of structured information located within the electronic medical record facilitates reporting of multiple Alberta Screening and Prevention (ASaP) related measures. For example, CVD risk, tobacco, blood pressure and lipid profile.
- **Practice Improvement:** Streamlined processes, and ease of data access, supports practice improvement initiatives.

Access to Enhanced Lipid Reporting

How do I get started using ELR?

- Locate, and use, the updated requisition in your electronic medical record (EMR). General lab requisitions, for both DynaLIFE and Alberta Precision Laboratories (APL) now include the ELR Framingham Risk Score (FRS) questions under the "CVD Risk Assessment" section.
- Paper-based clinics can download current lab requisitions from both the [APL](#) and [DynaLIFE](#) websites.
- Complete all CVD risk assessment questions on the lab req to ensure you receive an Enhanced Lipid Report.

How can I access and favor the current lab req within my Electronic Medical Record (EMR)?

- This process is unique to each EMR. To obtain additional information and detailed instructions regarding your specific EMR, contact elr@ahs.ca. For additional support, access provincial EMR User Groups through Alberta Medical Association [Learn@AMA](#).

Can CVD risk assessment data be auto populated on the lab requisition within my EMR?

- Some EMRs can pull information from another area within the patient chart to populate answers to CVD risk assessment questions. For example, the systolic BP can be populated within the Accuro – reportable APL form.
- To obtain information regarding your specific EMR, contact elr@ahs.ca.

When can I start using ELR?

- Once your local labs are on Connect Care, ELR can begin! Blood collection sites must be on Connect Care so lab staff can enter responses from CVD risk questions and a CVD risk score can be provided on lab reports.
- Check the [Connect Care launch schedule](#) to find out when you have access to ELR in your area.

Does my clinic need to be on Connect Care to access ELR?

- No. Only the community lab in your area needs to be on Connect Care (CC).
- Clinics using CC can input answers to CVD risk assessment questions directly into the CC system. Lab staff will input these answers into CC for sites using all other EMRs or paper-based systems.

Completing CVD Risk Assessment Questions

Who fills out the CVD risk assessment questions on the lab requisition?

- Each clinic has their own process and workflow for form completion. At some sites, physicians complete the lab req while other sites encourage clinic staff to assist with inputting CVD risk assessment question information. Adopt the process which best fits your clinic.

Do I need to do a CVD risk assessment if my patient has a statin indicated condition?

- Not necessarily. Those with statin indicated conditions should receive treatment no matter the risk score, therefore, a CVD percent risk score is not necessary to influence treatment decisions. ELR currently designates 'High Risk' for those with a statin-indicated condition and does not provide a percent risk score.
- The benefits of ELR may still provide value for use with these patients, such as, easy access to treatment guidelines, continuity of care, data reporting, and patient supports (see [Why use ELR](#))

Should I use ELR if my patient is already taking a statin?

- Not necessarily. Statin treatment has already been determined.
- The benefits of ELR may still provide value for use with these patients, such as, easy access to treatment guidelines, continuity of care, data reporting, and patient supports (see [Why use ELR](#))
- ELR will provide a percent risk score which can also be useful to measure the benefit of lifestyle changes for reducing risk and influencing compliance. This provides an opportunity to discuss risk and engage in shared decision-making with the patient regarding steps to reduce risk.

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What needs to be completed on the lab requisition to ensure I receive an ELR?

- Correctly complete **ALL** CVD Risk Assessment questions on the patient's lab requisition.

<input type="checkbox"/> Lipid Panel	<input type="checkbox"/> Cholesterol, Total
	<input type="checkbox"/> Triglycerides
<input checked="" type="checkbox"/> Cardiovascular Disease Risk Assessment (Framingham Risk Score) <i>includes Lipid Panel</i>	
Required History	
Systolic Blood Pressure (mmHg)	<u>145</u>
Tobacco Use	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Treated for high Blood Pressure	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Diabetic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Chronic Kidney Disease	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Atherosclerosis (MI, Stroke)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
First-degree relative with Cardiovascular Disease (M <55Y / F <65Y)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

- Missing information will result in the 'unable to calculate CVD risk score' statement on the lab report.
- Answers to CVD risk assessment questions facilitate continuity of care, data tracking and patient education.

Do I need to check the CVD Risk Assessment box to obtain the CVD risk result?

- Yes. The lab may not process results unless the box prior to 'Cardiovascular Disease Risk Assessment' is marked, even if all 'Required History' answers are provided.

Do I need to order a lipid panel along with the CVD Risk Assessment to get a lipid profile?

- No. The 'Lipid Panel' does not need to be indicated.
- A lipid panel is automatically done when the CVD risk assessment is marked.

How recent does the blood pressure need to be for the CVD Risk Assessment question?

- It is best to get a blood pressure (BP) that is generally representative of the individual's usual BP. If the patient's condition has been stable, then a BP within the past month is good.
- There is no hard line on a specific date but if the patient's condition has changed recently then a current BP is best.
- If home measurements are used, use an average of the systolic BP.
- It is important to get a relevantly accurate systolic BP recording to determine CVD risk. The more accurate the information provided in the assessment, the more accurate the result.

What do I record if a patient has used tobacco in the past, but is not currently using tobacco?

- 'Tobacco Use' would then be recorded as 'No'. The patient must currently be using tobacco to record 'Yes'.

Enhanced Lipid Report Results

What is included in the ELR?

- The ELR includes the CVD risk score, treatment recommendations, lipid panel, and answers to CVD risk assessment questions.

Cardiovascular Disease Risk Assessment (Final result)			
	Result	Ref. Range	Units
10-Year CVD Risk	14.6		%
Intermediate Risk (FRS 10.0-19.9%)			
Treatment advised if LDL-C \geq 3.5 mmol/L or Non-HDL-C \geq 4.2 mmol/L			
Consider treatment for men \geq 50 yrs and women \geq 60 yrs with one additional CV risk factor regardless of LDL-C			
Treatment target: LDL-C < 2.0 mmol/L or Non-HDL-C < 2.6 mmol/L (2021 CCS Guideline, Can J Cardiol 2021)			
Triglycerides	0.71	0.00 - 1.70	mmol/L
Cholesterol, Total	3.69		mmol/L
HDL Cholesterol	2.00		mmol/L
Low Density Lipoprotein Cholesterol (Calculated)	1.37	0.00 - 3.40	mmol/L
Non High Density Lipoprotein Cholesterol	1.69	0.00 - 4.20	mmol/L
Tobacco use			
Yes			
Systolic Blood Pressure	120		mmHg
Treated Blood Pressure			
No			
Family History of CVD			
Yes			
Diabetic			
No			
Chronic Kidney Disease			
No			
Atherosclerosis			
No			

Who has access to ELR results?

- **Patient's Care Team:** Results are included in the lab report provided to the primary care provider and care team.
- **Healthcare Provider:** Results are accessible through Netcare allowing for other healthcare providers access when being cared for outside the patient's medical home.
- **Patient:** Results are available for the patient to access through MyHealth Record.

Where does a patient access CVD risk results and support resources?

- Through their MyHealth Record account. Links from this account will direct patients to [patient education and behavior change resources](#) located on MyHealthAlberta.
- Access to information empowers patients and encourages a partnership approach in their healthcare.

Why is there no percent risk score on my lab report?

- **Missing information:** the lab report will indicate 'unable to calculate CVD risk score' when one or more answers are missing within the CVD Risk Assessment 'Required History' section.

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- **Stain Indicated Condition:** If the patient has a stain indicated condition identified within the CVD Risk Assessment section of the lab req (diabetic, chronic kidney disease, atherosclerosis), the report will identify 'High risk' and a percent risk score will not be provided. The percent risk score does not influence treatment decisions in these patients.
- **Lab Error:** There may be an error when lab staff enter data from the lab requisition into Connect Care. These errors are becoming less frequent with increased ELR use, education, and process improvement efforts.

Are ELR results accessible on Netcare?

- Yes. Results are available on Netcare for healthcare teams to access. This facilitates continuity of care between acute care and family medicine.
- View [infographic](#).

CVD Risk Tracking and Data Reporting

How does ELR facilitate data reporting?

- Results are accessible within the EMR as a lab report, allowing CVD risk scores and relevant history data to be more easily searched and tracked. This can be used for creating clinical decision support Triggers and reporting.
- Information located within the EMR supports access to reliable data for Alberta Screening and Prevention (ASaP) maneuver reporting of CVD risk, tobacco, blood pressure and lipid profile.

Can ELR be used for a practice improvement initiative?

- Yes. Teams can access ELR data within the EMR, review the CVD risk screening process, and identify areas for improvement.
- CVD risk assessments completed via ELR can be used as your data to complete the Practice Driven Quality Improvement component of the Physician Practice Improvement Program (PPIP). An action plan is still required to ensure all components of this activity are met.

Supports

Are there support resources available for those patients identified at risk for CVD?

- Yes. CVD risk [patient education resources](#) are available on MyHealth Alberta (MHA). A link from the CVD risk result on the patient's MyHealth Record directs patients to these MHA resources.

Are there resources available to support providers with ELR implementation?

- Yes. ELR support resources for providers are located on the [ELR website](#). Promotional materials, summaries, videos, patient resources and more are available.

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- A provincial ELR team is also available to assist and support implementation. Learnings from other sites can be shared to provide insight and strategies which may enhance your efforts. Contact elr@ahs.ca.

Do you have any information about concerns regarding statin use?

- Yes. The below resources are available to assist in answering questions related to statins:
 - **Patients:** [Statin Medicines: Clearing up Myths](#)
 - **Providers:** [Clearing up Myths about Statins for Healthcare Providers](#)

For more information about using Enhanced Lipid Reporting, contact: elr@ahs.ca