#### INITIAL CONSIDERATIONS

Measure non-facting full lipid profile (FC, PDLC, non-PDLC, triplycended and PBA, as part of an initial bearing assessment. Consider securolarly several frequency and manage as needed. Drawn appropriate bearing and follow-up needs as detailed in the guidaline. Measure SMI, triplycende piople with contractions of an initial profile and exclude piople with contractions of an initial profile and exclude piople with contractions of an initial bearing triplycende above 8.5 remoth see the quickline text.

#### PROMEST PREVENTION

Executes some therapy for public who do not have entertained CVD but by two the companies before the CVDA and passessing and whose appropriate (see Princip presentate the assessment in the publical).



identify and address all modifiable risk factors—emoking, that, obserting alsofoli intoke, physical activity, blood pressure, and ribid...

Consider additional risk factors, if present, together with CRDX acres (mental for HIV) among interfal librars, salang insultance that cause spriprioritisms, systems. Inflammatory standards (p. SCIX, replaced featuring sylptams), recent sharings in the factors!

#### PRINCIPLE PRINCIPLES

T thing's mostly inter to contract on a property of the same beautiment storage (00)

- Massure full lipid profile again effer 3 months inon-festing;
- High intensity state treatment should achieve reduction of non-HDL C + 62% from leasting. If not achieved other 2 months.
- C discuss beatment adherence, timing of dose, diet, and illestyle
- If at higher risk based on simulabilities, risk some or denois' judgement—use Additional risk factors consider increasing the direc every 2-3 months as to a maximum dose of advisorability 80 mg QQ.
- The how to recrease it passing with CKD, and the parties Special pattern consistency.
- If persons on a high interesty static have sole offects, offer a lower dose or an attenuative static beet factor should static.
- If maximum tolerated does of states does not actions non-HDL/C reduction in KPL of baseline takes after 3 months, consider adding scantingle 10 mg CD
- Execution ended static treatment is contraindicated or not tolerated.
- and AAC State Institution Appointment for action regarding solvene effects.
- apaticobe 10 mg instruktingsy may be opreident? Asses regions after 3 months
- Settimbe 70 mg/bampedox axid 180 mg combination may be considered when exetimbe stone dome; not control non HCL CADLC self amough INICE SARRE.

Proce-PDLC reduction remains vi80% of baseline despite meanual sciented lipid lossering therapy (including people with intolerance prod contramilisations) consider referral to specialist lipid management clinic according to local amangements.

#### SEVERE HYPERUPIDAENIA

IFTC 17.5 remoted another IDNAC 18.8 remoted another room POCK 19.5 is remoted, a pursuing another family framery of confirmate CHO 1980 years and with no secondary scales, auspect FH (possible federatypool FH).

Do not use CADIC vot assessment tool

#### DIAGNOSIS AND REFERRAL

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#### Use the Simon Brooms or Dutch Lightle Close Nationals officers to make a obtained disapposite of PM

Rafar to Igid clinic for further occurrent I effected diagnosis of FIL or FIL > 0.0 month antition (DA, C, 16.5 minute) analise tem-PCA, C, c.7.5 minute) or fusing supportants. > 10 minute) (anguestess of lamily finition)

#### THEATMENT TARGETS IN PH

If clinical diagrams of FH another statement in factors present, follow the statement and treatment management pothesy for princely or secondary presentation as for most FH, BUT aim to achieve at least a SDE reduction of CDL C for man facting reprofile. CI from Secondary.

#### Consider openialist referred for further treatment and/or consideration of PCSCS therapy II:

- They are essented to be at very highrise of a commany event."
- The set of secretary is been believed and
- ar USC Comutes of netral formuly presentant
- ar US, Chemany N.S streight becoming preventions despite maximal televated state, and seelinibe therapy

Matchine at any of the following:

- manufacture (345)
- Basic on House other CNSS risk Numbers

#### ROCCHOLARY PREVENTION

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blandly and address of modifiable risk factors—emoting, dust, obesity, elsohol make, physical activity. Modifications, and MA.

#### INCOMPANY PRESENTION

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- Measure full light profile again after 3 months (non-facing)
- High-intensity statin treatment should achieve reduction of non-PCC C +60% from baseline. If not softward after 3 months.
- 17 discuss treatment adherence, timing of does, plat, and lifestyle measures
- 17 if started on teas their accurate to the part of the person is pudged to be at higher risk (beased on sometimes), risk some or climate pudgement—use Additional risk factors, consider increasing to 60 mg phonestern. For how to increase in people with CVD see Special persons projections.
- If can HDX, C baseline value is not available", consider target non-HDX, C <2.5 inmulti (approximately
  equivalent to 2DX, C <1.8 immulti as recommended by John British Societies.</li>
- If patients on a high-intensity statio have side affects, offer a lower dose or an alternative static law.
   Solvent of land lowering with applicitive therepaint.

"the paners is not several by NCE CO. HT.

If manager total read those of state disposed committees ECL/CVCL/C and enough after 3 months, conformation advances then consider the following options based on shared decision making? with the potent.

"See the full gustame he offernature to expect shared decision making."

Encommended states transmiss in contralindrated or not televated, followed the AAC States intellegence Appetition? for access regenting attempt effects

If state intolerance is conformal, complete

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- specialists 10 mg/ being-schol and 100 mg continuous when applicable store does not control convESLC authority (ACS Stating

#### Earthribe 10 mg duly

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if non-HDS, C mension ×2.5 monify despite other ligit lowering theorytes, consider injectable throughtened most and storag blaced food and assess migdistry outside (IA)(II)(IA)(IA)(II)

#### Injuriable Suraples?

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- IDLC of a result, despite requirement tolerated land treaming therapy DATES
- as PCMR—are below Eleteric of Spid Screening with probable theraping for USL-C threadwistin (SASY)-6;

If alighbility orbins are not met, consider exertinable 10 mg skely (Free previously considered)

Professor and PCSCR should not be prescribed procuredly

[A] implant his striag publication inter-implement pathway

BM-body mass index, OXD-contrary feast disease, OXD-chronic bidrary disease, OXD-cardinosecular disease, oXD-chronic filtration rate, FM-banded hypercholesterolasmus, MA1-chiae-mydiotes A1-c FOX, C-high identity (proprotein chronic filtration, SLI)-epidemic lapse explanation, SLI-epidemic lapse explanation, TX-total christosmic traduction, CC-core delty, FCSXII-epidemic conventees exhibition leave 1 inflation, SLI-epidemic lapse explanation, TX-total christosmic traduction, CC-core delty, FCSXII-epidemic lapse explanation, Inflation, Infl

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