



Pathology and Laboratory Medicine

CHOLESTEROL -LDL, PLASMA

# **Orderable - LIPIDS**

Turn Around Time: 24 hours

# **Alternate Name(s):**

Low Density Lipoprotein Cholesterol Cholesterol-LDL LDL



# **Laboratory:** Core Lab



### Requisition:

GENERAL LABORATORY REQUISITION



#### Method of Analysis:

Calculated (Friedewald equation):

[LDL-chol] = [Total chol] -[HDL-chol] - ([TG]/2.2)



#### **Test Schedule:**

As required

# **Specimen:**

Adult	Pediatric	
4.5 mL Green (Lithium	0-2 years: 0.5 mL Green	
Heparin) top Vacutainer	Microtainer	
	2-10 years: 3 mL Green top tube	

## **Collection Information:**

12-14 hour fast.

Habitual diet and activity, stable diet over preceding 4 weeks.

No recent illness. LDL levels are reduced for up to 8 weeks with acute illness (e.g. myocardial infarction, acute infection) and assays should not be performed during this time.

## **Reference Ranges:**

Cholesterol target levels are dependent upon patient 10-year risk of coronary artery disease (Can J Cardiol 2016). "Cardiovascular Age" and the Framingham Risk Score (FRS).

### **Table Treatment Thresholds and Target Lipid Levels\***

Risk Level	Initiate	Primary	Alternate
	therapy if:	Target LDL-C	Target
<u>High</u>			
FRS ≥20%	Consider	<2.0 mmol/L	Apo B <0.8
	treatment	or	g/L
	in	<50%	Non HDL-C
	all patients	decrease	<2.6 mmol/L







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		LDL-C	
<u>Intermediate</u>			
FRS 10%-	LDL-C ≥3.5	<2 mmol/L	Apo B <0.80
19%	mmol/L	or	g/L
		>50%	Non HDL-C
		decrease in	<2.6
		LDL-C	
	Apo B ≥1.2		
	g/L or Non-		
	HDL-C		
	≥4.3		
	mmol/L		
<u>Low</u>			
FRS <10%	LDL-C ≥ 5.0	>50%	
	mmol/L	decrease in	
	Familial	LDL-C	
	hyperchole		
	sterolemia		

FRS: Framingham Risk Score

2016 Canadian Cardiovascular Society Guidelines for the management of dyslipidemia for the prevention of cardiovascular disease in the adult. Can J Cardiol. 2016;32:1263-82