Understanding Your ASCVD Risk Score
CORCAL RESEARCH STUDY

What is the ASCVD risk score?
The ASCVD (atherosclerotic cardiovascular disease) risk score is a national guideline developed by the American College of Cardiology. It is a calculation of your 10-year risk of having a cardiovascular problem, such as a heart attack or stroke. This risk estimate considers age, sex, race, cholesterol levels, blood pressure, medication use, diabetic status, and smoking status.

What does my risk score mean?
The ASCVD risk score is given as a percentage. This is your chance of having heart disease or stroke in the next 10 years. There are different treatment recommendations depending on your risk score.

- A **0 to 4.9 percent risk** is considered **low**. Eating a healthy diet and exercising will help keep your risk low. Medication is not recommended unless your LDL, or “bad” cholesterol, is greater than or equal to 190.

- A **5 to 7.4 percent risk** is considered **borderline**. Use of a statin medication may be recommended if you have certain conditions, or “risk enhancers.” These conditions may increase your risk of a heart disease or stroke. Talk with your primary care provider to see if you have any of the risk enhancers in the list below.

- A **7.5 to 20 percent risk** is considered **intermediate**. It is recommended that you start with moderate-intensity statin therapy.

- A **greater than 20 percent risk** is considered **high**. It is recommended that you start with high-intensity statin therapy.

What should I do now?
Talk with your primary care provider to discuss the treatment option that is best for you. If it is recommended that you take a statin, use the Statins fact sheet in **English** or **Spanish** to learn more. Your primary care provider will prescribe this medication if you choose to follow the recommendation.

ASCVD risk enhancers
Talk with your primary care provider if you have any of the following conditions or risk enhancers:

- Family history of early-onset ASCVD
- Continually elevated LDL greater than or equal to 160 mg/dL (≥ 4.1 mmol/L)
- Chronic kidney disease
- Metabolic syndrome
- Preeclampsia or premature menopause
- Inflammatory diseases such as rheumatoid arthritis, psoriasis, or HIV
- South Asian ancestry
- Continually elevated triglycerides greater than or equal to 175 mg/dL (≥ 2.0 mmol/L)

Additional risk enhancers may be present. Ask your primary care provider for more information.