



Pathology and Laboratory Medicine

CHOLESTEROL
- LDL,
PLASMA/
SERUM



Turnaround Time: 24 hours

### **Alternate Name(s):**

Low Density Lipoprotein Cholesterol Cholesterol-LDL LDL-C



**Laboratory:** Core Lab





**Requisition:**GENERAL LABORATORY
REQUISITION



Method of Analysis: Calculated (NIH Equation)

Adult	Pediatric
4.5 mL Green (Lithium	0-2 years: 0.5 mL Green
Heparin) top Vacutainer	Microtainer
tube	2-10 years: 3 mL Green top tube
Red, Gold, or Lavender (EDTA) top tubes are also acceptable	

## **Collection Information:**



**Test Schedule:** As required

12-14 hour fast recommended.

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), testing should not be performed during this time.

# **Reference Ranges:**

<3.50 mmol/L

If LDL-C  $\geq$ 3.50 mmol/L in primary prevention setting for low risk patients with Framingham Risk Score (FRS) 5-9.9% or intermediate risk patients, consider therapy. Therapy also suggested in low risk patients with LDL-C  $\geq$ 5.00 mmol/L/.

If LDL-C ≥1.80 mmol/L in a patient with atherosclerotic cardiovascular disease, treatment intensification is recommended.

Refer to 2021 CCS guidelines (Pearson et al. reference below) for additional LDL-C and non-HDL-C thresholds based on risk stratification.







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If triglycerides ≥1.50 mmol/L, refer to non-HDL-C instead of LDL-C for dyslipidemia assessment.

As of July 11, 2022, LDL-C has been calculated using the NIH equation (shown below)

#### **NIH Equation:**

$$LDL-C = \left[\frac{Cholesterol}{0.948}\right] - \left[\frac{HDL-C}{0.971}\right] - \left[\frac{Triglycerides}{3.74} + \frac{Triglycerides \times Non-HDL-C}{24.16} - \frac{Triglycerides^2}{79.36}\right] - 0.24 + \frac{1}{100} +$$

#### **References:**

- 1) White-Al Habeeb NMA et al. Can J Cardiol. 2022. Online ahead of print. Doi: 10.1016/j.cjca.2022.03.019.
- 2) Pearson GJ et al. Can J Cardiol. 2021. 37(8):1129-1150. Doi: 10.1016/j.cjca.2021.03.016.