

MISD Screening Results



Date: _____
 Name: _____ DOB: _____
 Employee ID: _____ Cell Phone: _____
 Physician Signature: _____

Fasting: Y N Tobacco: Y N Gender: M F
 Have you been diagnosed with: Diabetes: Y N Medication: Y N Heart Disease: Y N Medication: Y N
 High Blood Pressure: Y N Medication: Y N High Cholesterol: Y N Medication: Y N

REQUIRED:
 Blood Pressure: _____ mmHg
 A1c: _____ %
 Height: _____ ft _____ in = _____ in
 Weight: _____ lbs
 Body Mass Index (BMI): _____

OPTIONAL:
 Total Cholesterol: _____ mg/dl
 HDL Cholesterol: _____ mg/dl
 LDL Cholesterol: _____ mg/dl
 Triglycerides: _____ mg/dl
 TC/HDL Ratio: _____
 Fasting Glucose: _____
 Waist Circumference: _____ in
 Hip Measurement: _____ in
 Waist/Hip Ratio: _____
 Athletic/Muscular:

Blood Pressure:

	Systolic (Top Number)	Diastolic (Bottom Number)
Normal	<120	<80
Pre-hypertension	120-139	80-89
High Blood Pressure		
Stage 1	140-159	90-99
Stage 2	>160	>100

Blood Test Reference Ranges:

<u>TOTAL CHOLESTEROL (TC)</u>	<u>TRIGLYCERIDES (TRG)</u>
Desirable: <200 mg/dl	Normal: <150 mg/dl
Borderline High: 200-239 mg/dl	Borderline High: 150-199 mg/dl
High: ≥240 mg/dl	High: 200-499 mg/dl
	Very High: ≥500 mg/dl
<u>HDL CHOLESTEROL</u>	<u>GLUCOSE</u>
Desirable:	Normal-Fasting: <100 mg/dl
Female >50 mg/dl	Non-Fasting <125mg/dl
Male: >40 mg/dl	Pre-Diabetes: 100-125 mg/dl
<u>LDL CHOLESTEROL</u>	Diabetes: ≥ 126 mg/dl
Optimal: <100 mg/dl	<u>A1C</u>
Near Optimal: 100-129 mg/dl	Optimal: <6%
Borderline High: 130-159 mg/dl	
High: 160-189 mg/dl	
Very High: ≥190 mg/dl	

Waist/Hip Ratio:

Female: <.86	Male: <.95
[Age 60+] <.90	[Age 60+] <1.03

Body Mass Index (BMI):

Underweight:	<18.5
Normal	18.5-24.9
Overweight	25.0-29.9
Obese	≥30.0

Waist Circumference:

Female: <35"	Male: <40"
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TC/HDL RATIO
 Desirable: ≤ 4.5 mg/dl
 High Risk: ≥ 6.0 mg/dl

To Upload Your Screening Results From Your Primary Care Physician:

- › Go to www.midlandisdwellness.com or use your **MyMISD App**
- › Log in to your account with your **MISD ID #** and **wellness password**
- › Click the **"My Activites"** icon at the top right of your welcome page, and then click **"Record Healthy Choices"**
- › Select the **"2021 Submit Your PCP Form"** healthy choice
- › Upload your Primary Care Physician results by clicking **"Choose File"**, then select the file you would like to upload, and click **"Submit Verification"**