

Date: \_\_\_\_\_  
 Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
 Wellness ID: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 Your Employer: \_\_\_\_\_ Physician Signature: \_\_\_\_\_

Fasting: Y N Tobacco: Y N Gender: Male Female Check here if you are pregnant:   
 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

Blood Pressure: \_\_\_\_\_ mmHg  
 Total Cholesterol: \_\_\_\_\_ mg/dl  
 HDL Cholesterol: \_\_\_\_\_ mg/dl  
 LDL Cholesterol: \_\_\_\_\_ mg/dl  
 Triglycerides: \_\_\_\_\_ mg/dl  
 TC/HDL Ratio: \_\_\_\_\_  
 Fasting Glucose: \_\_\_\_\_  
 A1c: \_\_\_\_\_ %  
  
 Height: \_\_\_\_\_ ft \_\_\_\_\_ in = \_\_\_\_\_ in  
 Weight: \_\_\_\_\_ lbs  
 Waist Circumference: \_\_\_\_\_ in  
 Hip Measurement: \_\_\_\_\_ in  
 Waist/Hip Ratio: \_\_\_\_\_  
 Body Mass Index (BMI): \_\_\_\_\_  
 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:**

<p><b><u>TOTAL CHOLESTEROL (TC)</u></b>                  Desirable: &lt;200 mg/dl                  Borderline High: 200-239 mg/dl                  High: ≥240 mg/dl</p> <p><b><u>HDL CHOLESTEROL</u></b>                  Desirable:                  Female &gt;50 mg/dl                  Male: &gt;40 mg/dl</p> <p><b><u>LDL CHOLESTEROL</u></b>                  Optimal: &lt;100 mg/dl                  Near Optimal: 100-129 mg/dl                  Borderline High: 130-159 mg/dl                  High: 160-189 mg/dl                  Very High: ≥190 mg/dl</p> <p><b><u>TC/HDL RATIO</u></b>                  Desirable: ≤ 4.5 mg/dl                  High Risk: ≥ 6.0 mg/dl</p>	<p><b><u>TRIGLYCERIDES (TRG)</u></b>                  Normal: &lt;150 mg/dl Borderline                  High: 150-199 mg/dl High:                  200-499 mg/dl                  Very High: ≥500 mg/dl</p> <p><b><u>GLUCOSE</u></b>                  Normal-Fasting: &lt;100 mg/dl                  Non-Fasting &lt;125mg/dl                    Pre-Diabetes: 100-125 mg/dl                  Diabetes: ≥ 126 mg/dl</p> <p><b><u>A1C</u></b>                  Optimal: &lt;5.7%</p>
---	---

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"

**To Upload Your Screening Results From Your Primary Care Physician:**

- Go to [www.midlandisdwellness.com](http://www.midlandisdwellness.com) or use your MyMISD App
- Log in to your account with your MISD ID # and wellness password
- Click the "My Activities" icon at the top right of your welcome page
- Click "Record Healthy Choices"
- Select the "2022 Submit Your PCP Form" healthy choice
- Upload your Primary Care Physician results by clicking "Choose File"
- Select the file you would like to upload and click "Submit Verification"