

# Lipid Screening Protocol for Primary Care Pediatrics

## Screen children:

- a. For risk factors starting at birth
  - a. Family history, grandparents, parents, siblings (smoking, dyslipidemia TC>240, known familial hypercholesterolemia, CVD<55M&<65F, DM, Obesity).
  - b. Nutrition, activity, sleep, mental health, social determinants of health/ACEs.
  
- b. With non-fasting lipid panel (POC in clinic or lab draw) starting at age 2, if medical diagnoses that place patient at higher risk:
  - a. Kidney disease
  - b. Heart transplantation
  - c. Kawasaki disease
  - d. Chronic inflammatory disease (lupus, JIA/JRA)
  - e. HIV
  - f. Nephrotic syndrome
  - g. Hypertension, confirmed
  - h. Hypothyroidism
  - i. Clinical judgement if <age 9 with obesity and/or significant known family history
  
- c. With non-fasting lipid panel (POC in clinic or lab draw) for patient with obesity starting at age 9.  
(Consider initial HgbA1c, CBC, CMP, TSH reflex)
  
- d. With non-fasting lipid panel (POC in clinic or lab draw) for all patients once age 9-11 and again at age 17-21.
  
- e. With fasting lipid panel (lab draw) if non-fasting lipid panel is near referral/medical treatment range (see below).

## Treat in Primary Care with PCP counseling and follow-up:

- If BMI >85%ile (consider referral to FitKids360, [www.fitkids360.com](http://www.fitkids360.com), other resources)
- If mild elevations in LDL, TG, non-HDL

## Refer to Healthy Weight Center at Helen DeVos Children's Hospital:

- If under 18 years with abnormal weight gain and/or dyslipidemia

## Lipid referral/medical treatment range (fasting values):

- Non-HDL >145
- LDL >130 if diabetes (should be seen in peds endocrinology), >160 if risk factors, >190 if no risk factors
- TG >250