CARDIOVASCULAR *LAB GUIDE*

THE OPTIMAL RANGES I LOOK FOR

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MARKER	IDEAL RANGE	WHAT IT TELLS YOU
STANDARD LIPID PANEL		
Total cholesterol	**< 200 mg/dL**	The total of all the cholesterol in your blood. On its own it tells you little about your actual risk — the markers below matter far more.
LDL cholesterol	**< 100 mg/dL**	Often called "bad cholesterol." It can deposit into your artery walls and start plaque — but the number of particles doing it (ApoB, below) matters more than this number alone.
HDL cholesterol	**> 60 mg/dL**	Your "good cholesterol." It carries cholesterol away from your arteries and back to the liver, so higher is protective.
Total cholesterol / HDL ratio	**< 3:1**	A quick read on the balance of harmful to protective cholesterol — and a number you can pull straight from a basic panel you probably already have.
Triglycerides	**< 100 mg/dL**	The circulating fat in your blood. High levels are closely tied to insulin resistance and metabolic problems, so this says as much about your metabolism as your heart.
Triglyceride / HDL ratio	**< 2:1**	Your window into particle quality. A high ratio means your LDL is more likely the small, dense, more dangerous kind — the type that drives plaque.
ADVANCED LIPIDS		
Apolipoprotein B (ApoB)	**50–90 mg/dL**	A direct count of the particles that actually cause plaque. This is the single most important number on this panel — it tells you more about your risk than your LDL or total cholesterol, and it's rarely run.
Apolipoprotein A1 (ApoA1)	**150–200 mg/dL**	The protein on your protective HDL particles — a measure of how much real cardiovascular protection you're carrying.
Lipoprotein (a)	**< 75 nmol/L**	Largely genetic, and rarely tested. If heart disease runs in your family, this is often the hidden reason — and it raises your risk on its own, independent of everything else.
OXIDATION & INFLAMMATION		
Oxidized LDL	**< 60 U/L** **< 110 ng/mL**	Tells you whether your LDL is actually oxidizing — a key step that turns harmless circulating cholesterol into arterial plaque. This is where damage actually begins.
Lp-PLA2 activity	**< 124 nmol/min/mL**	An inflammatory enzyme that signals active inflammation in your artery walls — and plaque that may be unstable.
hs-CRP	**< 1 mg/L**	A marker of inflammation in your body, a key driver of heart disease.
ESR	Men: **< 5 mm/hr** Women: **< 10 mm/hr**	Another general marker of inflammation. It isn't specific to the heart, but a raised ESR alongside hs-CRP points to inflammation worth tracking down.

FULL PANEL

See the Metabolic Health Lab List for every marker I run and how to prep for the draw.

Not sure what your labs are telling you?
That's what we figure out together.

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DISCLAIMER

The ranges in this guide are the optimal ranges I personally look for — they are not standard laboratory reference ranges, and they are not a diagnosis or a treatment recommendation.

"Optimal" reflects where I aim to see a marker for pursuing better metabolic health; it is not the same as a clinical "normal," and being outside these ranges does not by itself mean something is wrong.

This material is for educational and informational purposes only. It is not medical advice, and it is not a substitute for care from a qualified, licensed healthcare provider. Nothing here is intended to diagnose, treat, cure, or prevent any disease.

Always consult your physician or another licensed healthcare professional before making changes to your diet, supplements, medications, or exercise, before ordering or interpreting any lab tests, and before acting on anything in this guide. Do not disregard or delay seeking professional medical advice because of something you read here.

Lab results must be interpreted in the context of your full history, symptoms, and other markers by a qualified professional. Individual needs vary, and no guide can account for your specific situation.