The calcium score is 0 with a volume of 0. There is no evidence of calcific atherosclerosis.

Dominance:

The coronary circulation is right dominant.

Left main coronary artery:

The left main coronary artery arises from the left coronary sinus of Valsalva in the usual position dividing into left anterior descending and circumflex vessels. It appears normal.

Left anterior descending artery:

The LAD and its diagonal branches appear normal.

Circumflex artery:

The main vessel and major obtuse marginal branches appear normal.

Right coronary artery:

The RCA arises from the coronary sinus of Valsalva, in the usual position.

It appears normal dividing distally into the posterior descending and posterolateral branches both of which have a normal appearance.

Additional cardiovascular findings of relevance within scanned segment:

The cardiac chambers have a normal appearance. The visualised thoracic aorta appears normal. The pericardium has a normal appearance.

The ejection fraction is 61%.

Other findings:

The visualised lungs appear normal. Arterial scans of the upper abdomen are within normal limits.

**CONCLUSION:** 

Normal CT Coronary Angiogram. No evidence of coronary atherosclerosis.

Thank you for referring this patient.

Secretary: LIN

Electronically Signed by: DR WONDER WOMAN

Co-read: Dr Darth Vader

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We are pleased to announce the opening of our X-Ray and Ultrasound practice at Casula which is located at Shop 4a, 389 - 393 Hume Highway, CASULA (in Reilly Centre - cnr of Hume Highway and Reilly St. Bulk billing and free onsite car parking is available. Please phone 9824 1600.

General Report #190699: Authorised by Root (Root) at 21/07/2011 08:41

Date Serviced: 31/12/9999 00:00

Requests:

11/OCC/0098720

(Series 0;

Requested by: Dr OCCAM; Work Site: OCC)

Services: CT Coronary Angiogram (NR)

Exam Date: 20/07/2011

Report Date: 20/07/2011

Report Collection: 3 Returning

Referring Doctor:

Exam: CT CORONARY ANGIOGRAM

CLINICAL:

Chest pain.

TECHNIQUE:

Helical CT acquisition during the arterial phase of contrast enhancement with ECG gating was obtained. A multiphase study was acquired with retrospective analysis.

FINDINGS:

The patient was treated with oral betaloc 50mg. 1 spray of sublingual nitrate was given.

The procedure was performed at a heart rate of 75bpm.