

Pulmonary arteries: Within normal limits.

Left atrium: The Atrial appendage is clear and the atrium is of normal size.

LIMITED CHEST CT FINDINGS:

Lung parenchyma: Minimal dependent posterior atelectasis.

Pleural spaces: Within normal limits.

Chest wall: No abnormalities detected.

COMMENT & IMPRESSION:

There is right ventricular enlargement. Cardiac echo assessment of right ventricular function is indicated .

Mild left ventricular enlargement is noted the functionality appears intact.

Up to 50% stenosis in the proximal LAD with a smooth mixed plaque and remodelling of the vessels demonstrated.

The system is left dominant however the PDA is not demonstrated distally with contrast and may be chronically occluded however this may also represent a variant with supply via the large acute marginal and posterolateral branch.

Thank you for referring this patient.

Electronically Signed by: DR JAMES BOND

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General Report
#158076:
Authorised by
Root (Root) at
08/12/2010 11:07

Date Serviced:
31/12/9999 00:00

Requests:
10/OCC/0065211
(Series 0;
Requested by: Dr
; Work Site:
OCC)

Services:
CT Coronary
Angiogram (NR)

Exam Date: 06/12/2010

Report Date:

Report Collection: 6. Pick-Up

Referring Doctor:

Exam: CT CORONARY ANGIOGRAM

CLINICAL INDICATION: Atypical chest pain.

TECHNICAL PARAMETERS:

A CTA Coronary Angiogram was performed using a 64 slice dual source cardiac CT scanner. The images have been evaluated and re-constructed and manipulated on a 3D work station.

Heart rate: Radiation dose (DLP):

1 Intravenous BETA-BLOCKER: Nil.

2 Oral BETA-BLOCKER: 25 mg

3 Sublingual Nitroglycerine: One spray.

Technical Quality & technical issues: Good.

Calcium score : 147 Volume: 17

CORONARY ARTERIES:

Dominance: Left

LM: The left main coronary artery appears normal with no evidence of atherosclerotic disease.

LAD: There is a small calcific plaque within the distal aspect of the proximal left anterior descending artery, with no significant stenosis.

There are several mixed plaques within the midportion of the left anterior descending artery. The most distal of these plaques is causing mild to moderate (25% to 50%) stenosis.

Diagonals: The first diagonal branch of the left anterior descending artery appears normal with no evidence of atherosclerotic disease.

Circumflex: There is a small calcified plaque within the proximal portion of the left circumflex coronary artery. This is causing no significant stenosis. The remainder of the left circumflex coronary artery appears normal. The left circumflex coronary arteries supplies the posterolateral branches, and the posterior descending coronary artery.

Ramus Intermedius: Appears patent.

RCA: The right coronary artery appears normal with evidence of atherosclerotic disease.

CARDIAC FINDINGS:

Cardiac Chambers: There is a focal area of fat within the central aspect of the myocardium in the lateral segment at the apical level. The appearance may represent an old myocardial infarct. There is however reasonable contraction of this segment. Overall left ventricular function appears normal. Ejection fraction: 60%.