#### Calcium score

The calcium score is 188. This score is consistent with moderate coronary artery atherosclerotic plaque burden. On a population basis, this score places the patient in the 90th percentile rank for age and gender. The distribution of calcium is in the LAD and RCA.

#### **Dominance**

The circulation is right dominant.

# Left main coronary artery

The LMCA arises from the left coronary sinus of valsalva in the usual position and divides into left anterior descending and circumflex vessels. It exhibits pinpoint calcification at its ostium causing no stenosis.

# **Left anterior descending artery**

Focal calcified plaque is seen in the proximal and mid LAD associated with positive remodelling, causing virtually no luminal irregularity. The diagonal branch appears normal.

# Circumflex artery

The main circumflex artery and it □s obtuse marginal branches appear normal. The first OM arises very proximally, almost in an intermediate position.

## Right coronary artery

The RCA arises from the right sinus of Valsalva in the usual position. The distal vessel gives rise to posterior descending and posterolateral branches. Multifocal calcified plaque is seen in the proximal, mid and distal segments of the RCA associated with <25% stenosis. Reconstruction of the distal segments is affected by registration artefact.

## ADDITIONAL CARDIAC FINDINGS

The cardiac chambers, myocardium, pericardium and scanned segments of the thoracic aorta appear normal. There appears to be a small PFO.

#### **OTHER FINDINGS**

## **CONCLUSION:**

The epicardial coronary arteries exhibit minor non-obstructive atherosclerotic changes consisting almost entirely of calcified plaque affecting the LAD and RCA. There are no additional cardiac findings of relevance in the scanned segments. A possible PFO is incidentally noted. Lipid lowering therapy should be considered in light of these findings.

Thank you for referring this patient.

Primary Read of Cardiac Findings by: Dr Invisible Man

Co-read of Cardiac and Non-Cardiac Findings by: Dr Captain Marvel

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