
General Report
#1032958:
Authorised by
Dr Wonder
Woman () at
14/01/2019
17:35

Date Serviced:
10/01/2019
09:12

Requests:
19/RA/0000600
(Series 5;
Requested by:
Dr; Work Site:
RA)

Services:
CT Coronary
Angiogram
(NR)
(10/01/2019
09:20 -
10/01/2019
09:30)

EXAM: CT CORONARY ANGIOGRAM AND CALCIUM SCORE

CLINICAL DETAILS:

Risk evaluation. Progress study, normal scan 2012. Risk factors for coronary artery disease: - Hyperlipidaemia.

TECHNICAL PARAMETERS:

Single phase CT coronary angiography was performed using prospective ECG gating at 80 kVp. The total radiation dose (DLP) including scout, non contrast and contrast acquisitions was 72 mGycm⁻¹. Medication administered in the department: 50 mg oral metoprolol. 800 mcg nitrates. Intravenous iodine contrast volume: 80 mL. Data acquisition was at an average heart rate of 54 bpm. Image quality was good .

FINDINGS:

CORONARY ARTERIES

Calcium score

The calcium score is 4 . Distribution of calcium:- LAD This score is consistent with minimal coronary artery atherosclerotic plaque burden. On a population basis, this score places the patient in the 51st percentile rank for age, race and gender according to the MESA cohort.

Dominance

The circulation is right dominant .

Left main coronary artery

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

Left anterior descending artery

The LAD is a medium calibre artery and gives rise to one main diagonal branch. There is focal calcified plaque at the ostium associated with 25-49% stenosis. No additional atherosclerotic changes of significance are detected within the main vessel or major diagonal branches.

Circumflex artery

The circumflex artery and its obtuse marginal branches appear normal.

Right coronary artery

The RCA is a large calibre vessel which arises from the right coronary sinus of Valsalva in the usual position and gives rise to posterior descending and posterolateral branches. There are no significant atherosclerotic changes.

ADDITIONAL CARDIAC FINDINGS

There are no significant non coronary cardiac findings.

OTHER FINDINGS

CONCLUSION:

Focal non-obstructive calcified plaque is seen at the ostium of the LAD . The epicardial coronary arteries otherwise appear normal by CCTA. Overall plaque burden is low. This represents interval change from the previous scan in 2012 and lipid lowering therapy should be considered.

There are no additional cardiac findings of relevance within the scanned segments.

Thank you for referring this patient.

Primary Read of Cardiac Findings by: Dr Bruce Banner

Co-read of Cardiac and Non-Cardiac Findings by: Dr Wonder Woman

