
General Report
#1035863:
Authorised by
Dr Wonder
Woman () at
17/01/2019
07:46

Date Serviced:
16/01/2019
08:22

Requests:
19/RA/0001060
(Series 2;
Requested by:
Dr; Work Site:
RA)

Services:
CT Coronary
Angiogram
(NR)
(16/01/2019
09:00 -
16/01/2019
09:10)

EXAM: CT CORONARY ANGIOGRAM AND CALCIUM SCORE

CLINICAL DETAILS:

Risk evaluation. Progress study. Normal scan 2013 Risk factors for coronary artery disease: - Hyperlipidaemia.

TECHNICAL PARAMETERS:

Single phase CT coronary angiography was performed using prospective ECG gating at 120 kVp. The total radiation dose (DLP) including scout, non contrast and contrast acquisitions was 179 mGycm⁻¹. The patient had been pre-treated with beta blockers. Medication administered in the department: 800 mcg nitrates. Intravenous iodine contrast volume: 100 mL. Data acquisition was at an average heart rate of 50 bpm. Image quality was good .

FINDINGS:

CORONARY ARTERIES

Calcium score

The calcium score is 0 This score is consistent with minimal coronary artery atherosclerotic plaque burden. On a population basis, this score places the patient in the lowest possible 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 large calibre artery and gives rise to multiple diagonal branches. There is focal non-calcified plaque in the mid segment associated with approximately 50% stenosis. No additional atherosclerotic changes of significance are detected within the main vessel or major diagonal branches.

Circumflex artery

The main vessel 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. The main vessel and its distal branches appear normal.

ADDITIONAL CARDIAC FINDINGS

There are no significant non coronary cardiac findings.

OTHER FINDINGS

The lungs appear clear.

CONCLUSION:

Focal non calcified plaque is seen in the mid LAD associated with approximately 50% stenosis. This represents interval change over the past 5 years (previously normal scan).

Functional testing and consideration of lipid lowering therapy are recommended.

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