Circumflex:

The left circumflex coronary artery gives rise to an obtuse marginal branch. There is minor vessel calcification with no haemodynamically significant stenosis.

RCA:

The right coronary artery arises from the right coronary sinus and gives rise acute marginal branches before terminating as posterolateral and posterior descending artery branches. There is no haemodynamically significant stenosis.

Cardiac findings:

There is an ASD closure device. The cardiac chambers, myocardium and pericardium appear normal. The ascending aorta is mildly dilated measuring up to 40 mm. There is aortic root/valve calcification.

Other findings:

The lungs and pleural spaces are clear.

There are three small hypodensities in the right lobe of the liver, likely cysts. These can be further assessed by ultrasound non-urgently.

Conclusion:

Multifocal non-obstructive coronary atherosclerosis involving the LAD-diagonal system and LCX.

Coread by Dr James Bond and Cardiology Fellow

Dictating Radiologist: Dr Wonder Woman
Approving Radiologist: Dr Wonder Woman
Report Approval Date: 27-AUG-2019 03:26 PM

Randwick Medical Imaging Department

(Incorporating POWH, SCH & RHW)

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Barker Street

RANDWICK 2031



MRN:

Proc. ID: **4148736**Exam Date: **11-JUN-2019**

PLEASE NOTE: ADDENDUM BELOW

CT Coronary Angiogram performed on 11-JUN-2019 Performing Radiographer:

CT Coronary Angiogram Preliminary Report

Patient: xxx xxx MRN: 9513561

Indication: Chest pain

HR: 60

Beta blockade: Metoprolol 100mg

Weight: 74kg **DLP:** 145.5

Coronary Arteries:

Dominance: R dominant

Origins: Normal Left main: Normal.

LAD: Normal.

D1: 2.0mm vessel. Normal.

LCx: Calcified plaque in the mid segment causing minimal stenosis

RCA: Calcified plaque in the proximal segment causing minimal stenosis.

Non Coronary Findings: Nil significant Conclusion: Mild coronary artery disease

Hans Solo

Cardiology Imaging Fellow

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