General Report #1052255: Authorised by Dr Donald Duck () at 20/02/2019 09:18

Date Serviced: 18/02/2019 09:23

Requests: 19/RA/0003720 (Series 7; Requested by:; Work Site: RA)

Services: CT Coronary Angiogram (NR) (18/02/2019 09:40 -18/02/2019 09:50)

EXAM: CT CORONARY ANGIOGRAM AND CALCIUM SCORE

CLINICAL DETAILS:

Risk evaluation. Progress study. Risk factors for coronary artery disease: - Hypertension, poorly controlled. 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 226 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 51 bpm. Image quality was excellent.

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 one main diagonal branch. The main vessel and its major diagonal branch appear normal.

Circumflex artery

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

ADDITIONAL CARDIAC FINDINGS

There is borderline dilatation of the ascending aorta at 37mm. There are no additional non coronary cardiac findings of significance.

OTHER FINDINGS

No significant extracardiac findings identified.

CONCLUSION:

The epicardial coronary arteries appear normal by CT angiography. There is borderline dilatation of the ascending aorta at 37mm.

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 Donald Duck

General Report #1046716: Amended by Dr Mickey Mouse () at 08/05/2019 16:45

Date Serviced: 07/02/2019 09:10

Requests: 19/RA/0002817 (Series 1; Requested by: Dr; Work Site: RA)

Services: CT Coronary Angiogram (NR) (07/02/2019 09:10 -07/02/2019 09:20)

EXAM: CT CORONARY ANGIOGRAM AND CALCIUM SCORE

CLINICAL DETAILS:

Stable symptoms consistent with coronary ischaemia at low to intermediate risk of coronary artery disease and would otherwise have been considered for invasive angiography. Exclude coronary artery disease.

TECHNICAL PARAMETERS:

Single phase CT coronary angiography was performed using prospective ECG gating at 100 kVp. The DLP for the entire study is 143 mGycm⁻¹. Medication administered in the department: 800 mcg nitrates. Intravenous iodine contrast volume: 90 mL. Data acquisition was at an average heart rate of 55 bpm. Image quality is good.

FINDINGS:

CORONARY ARTERIES

Calcium score