

Study DLP: 358.

## FINDINGS

Calcium score: 0 - based on this, there is no evidence of calcific atherosclerosis.

## CORONARY ARTERIES:

Dominance: Left.

Right coronary artery and first acute marginal branch fill normally with no stenosis demonstrated.

Left main coronary artery fills normally with no stenosis or atherosclerotic disease.

The left anterior descending coronary artery and the first and second diagonal branches fill normally with no atherosclerotic disease or significant stenosis demonstrated.

A ramus intermedius branch is present and normal in appearance.

The anatomy of the left circumflex coronary artery is slightly unusual with two large branches running on either side of the left atrioventricular groove. The more posterior branch which has a tortuous course appears to form a tiny PDA at its distal end. The more anterior branch appears to continue down to form an obtuse marginal and posterolateral branches. The first obtuse marginal branch is also a good calibre vessel running along the lateral wall of the left ventricle. All of these vessels have no significant atherosclerotic disease or stenosis.

## CARDIAC FINDINGS:

The cardiac chambers appear normal.

The aortic root and pulmonary trunk appear normal. No pericardial abnormality noted.

Estimated ejection fraction is 58%.

LIMITED CHEST FINDINGS:

No significant abnormality noted within the mediastinum, visualised lungs or visualised chest wall.

CONCLUSION:

Normal CT coronary angiogram.

Thank you for referring this patient.

Secretary: OFS2

Electronically Signed by: DR OBI WAN KENOBI & DR JAMES BOND

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General Report  
#178841:  
Authorised by  
Root (Root) at  
17/05/2011 11:48

Date Serviced:  
31/12/9999 00:00

Requests:  
11/OCC/0086077  
(Series 0;  
Requested by:  
Dr; Work Site:  
OCC)

Services:  
CT Coronary  
Angiogram (NR)

Exam Date: 11/05/2011

Report Date:

Report Collection: 6. Pick-Up

Referring Doctor:

Exam: CT CORONARY ANGIOGRAM

#### CLINICAL DETAILS

Equivocal Stress ECG and to rule out IHD.

#### TECHNICAL PARAMETERS

A CT coronary angiogram was performed on a multislice cardiac CT scanner with retrospective cardiac gating. The images have been evaluated on a work station.

25 mgs of Metoprolol was administered orally and a spray of sublingual nitroglycerin was administered prior to scanning.

Heart rate at time of scan 63bpm

DLP 331