
General Report
#189648:
Authorised by
Root (Root) at
13/07/2011 20:39

Date Serviced:
31/12/9999 00:00

Requests:
11/OCC/0097505
(Series 0;
Requested by: Dr
OCCAM; Work
Site: OCC)

Services:
CT Coronary
Angiogram (NR)

Exam Date: 13/07/2011

Report Date: 13/07/2011

Report Collection: 3 Returning

Referring Doctor:

Exam: CT CORONARY ANGIOGRAM

CLINICAL HISTORY

Atypical chest pain.

TECHNIQUE

CT angiography was performed on a GE 64-slice scanner. The patient was pre-treated with 25 mg of oral Betaloc and the heart rate at the time of the study was 58 beats per minute. The total exam DLP equals 1159 mGy/cm.

Note the heart was irregular.

FINDINGS

CORONARY CALCIUM SCORE: The calcium score is 6 with a volume of 0 consistent with minimal calcific atherosclerosis.

DOMINANCE: The coronary circulation is right dominant.

LEFT MAIN CORONARY ARTERY: The left main coronary artery arises from the left coronary sinus of Valsalva. It branches almost immediately into the left anterior descending and circumflex vessels.

LEFT ANTERIOR DESCENDING ARTERY: The LAD and its diagonal branches appear normal.

CIRCUMFLEX ARTERY: The main vessel and the major obtuse marginal branches appear normal. The first obtuse marginal has a large calibre, arises early, and does not contain any atheromatous plaque.

Continued

RIGHT CORONARY ARTERY: The right coronary artery arises from the right coronary sinus of Valsalva. There is no atherosclerosis within the RCA. It divides distally into the posterior descending artery and the posterolateral branches. It appears normal. It is tortuous.

The cardiac chambers, myocardium and scanned segments of the thoracic aorta appear normal.

Scans through the lung bases are normal. There is gravity-related atelectasis at both lung bases.

CONCLUSION

Normal CT coronary angiogram with no evidence of atherosclerosis.

Thank you for referring this patient.

Secretary: OFS7

Electronically Signed by: DR WONDER WOMAN and DR CAPTAIN MARVEL