Randwick Medical Imaging Department

(Incorporating POWH, SCH & RHW)

Level 0, Campus Centre, Prince of Wales Hospital, Barker Street, Randwick NSW 2031 Phone (02) 93820300



Barker Street MRN:

RANDWICK 2031 Acc No: **1318752** Ward: **PB8**

CT Coronary Angiogram:

Indication: RCA reversibility on MIBI.

Technical parameters:

A CT Coronary Angiogram was performed using a 320 row detector cardiac CT scanner. The images have been evaluated and re-constructed and manipulated on a 3D work station.

Heart rate: 60 bpm

Radiation dose (DLP): 301 mGycm

Intravenous BETA-BLOCKER: Yes Oral BETA-BLOCKER: Yes Sublingual Nitroglycerine: Yes

Technical Quality & technical issues: Good.

Coronary arteries:

Dominance: Right

LM:

The left main coronary artery arises from the left coronary sinus and divides into the left anterior descending and left circumflex coronary arteries. It appears normal.

LAD:

There is a calcific plaque within the proximal and midportion of the LAD causing mild (25%) stenosis. Calcific plaque is seen within the midportion of the first diagonal branch. Calcium is seen within the midportion of the 2^{nd} diagonal branch.

Circumflex:

There is diffuse calcific atherosclerotic disease of the left circumflex coronary artery. There is a portion proximally with dense calcium making assessment difficult. A significant stenosis is difficult to exclude, although unlikely. The marginal branch appears normal.

RCA:

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There is an occlusion of the distal aspect of the midportion of the right coronary artery, with no contrast seen within the distal aspect of the vessel. Calcium is seen within the very distal aspect of the vessel just before the take-off of the posterior descending coronary artery.

(Minimal 0%-25%, Mild 25%-50%, Moderate 50%-70%, Severe >70%)

Cardiac findings:

Cardiac Chambers: Normal.
Cardiac Valves: Normal.
Pericardium: Normal.
Aorta: Normal.
Pulmonary Arteries: Normal.

Other findings:

Lung parenchyma: There is mild to moderate circumferential bronchial wall thickening

involving both lung bases. There are multiple areas of atelectasis. There

is a large area of emphysema involving the right middle lobe

Chest wall: The visualised chest wall appears normal.

Mediastinum: Multiple calcified mediastinal and upper abdominal

lymph nodes are identified.

Upper abdomen: The visualised upper abdomen appears normal.

Osseous structures: The visualised osseous structures appear normal.

Conclusion:

Occlusion of the distal right coronary artery.

Mild diffuse mixed plaque seen elsewhere.

Dictated By: Dr Mickey Mouse

Approved By: Dr Princess Leia at 05-MAR-2012 10:50 AM

Typist: