

Randwick Medical Imaging Department

(Incorporating POWH, SCH & RHW)

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Health

South Eastern Sydney
Local Health District

Barker Street
RANDWICK 2031

MRN:
Proc. ID: **3193234**
Exam Date: **29-DEC-2016**

CT CORONARY ANGIOGRAM performed on 29-DEC-2016

CT CORONARY ANGIOGRAM: 29/12/2016

CLINICAL INFORMATION:

Assess ostium of left main coronary artery. Paravalvular leak adjacent to left main.

FINDINGS:

There is a moderately long calcific plaque involving the left main coronary artery causing mild (less than 25%) stenosis.

There appear to be mild irregularity/leaking of contrast adjacent to the left main coronary artery. There appears to be an aortic valve augmentation. This one is very close to the ostium of the left main coronary artery. The augmentation is intimately related to the left coronary sinus. There is no clear evidence of a leak. The right coronary artery appears patently normal and supplies the posterior descending coronary artery. The left circumflex artery appears normal. The left anterior descending coronary artery demonstrates several calcific plaques causing mild stenosis.

There appears to be a small patent foramen ovale.

The left ventricle appears normal in contour and size. There is mitral valve annulus calcification. The right ventricle appears normal. The left atrium is slightly enlarged. The right ventricle appears normal in size.

There is a small sliding hiatal hernia.

There are several calcified granulomas and cysts within the visualised liver.

The lung bases appear clear.

The visualised osseous structures appear normal apart from mild degenerative change.

IMPRESSION:

Aortic valve augmentation. No clear evidence of a leak in the vicinity of the left main coronary artery.