
General Report
#1030997:
Authorised by
Dr Donald
Duck () at
16/01/2019
10:17

Date Serviced:
07/01/2019
09:20

Requests:
19/RA/0000297
(Series 3;
Requested by:
Dr; Work Site:
RA)

Services:
CT Coronary
Angiogram
(NR)
(07/01/2019
10:10 -
07/01/2019
10:20)

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. Hypercholesterolaemia. Factor five deficiency.

TECHNICAL PARAMETERS:

Single phase CT coronary angiography was performed using prospective ECG gating at 120 kVp. The DLP for the entire study is 213 mGycm⁻¹. Medication administered in the department: 800 mcg nitrates. Intravenous iodine contrast volume: 100 mL. Data acquisition was at an average heart rate of 52 bpm. Image quality is good .

FINDINGS:

CORONARY ARTERIES

Calcium score

The calcium score is 8 . Distribution of calcium:- RCA This score is consistent with minimal coronary artery atherosclerotic plaque burden. On a population basis, this score places the patient in the 61st percentile rank for age , race and gender according to 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 is a large calibre vessel. It divides into the left anterior descending and the left circumflex arteries.

There is focal non-calcified plaque at the ostium of the vessel causing < 25% stenosis.

Left anterior descending artery

The LAD is a medium calibre vessel and gives rise to 2 major diagonal branches . There is no evidence of atherosclerotic disease.

Circumflex artery

The left circumflex artery is a small calibre vessel and gives rise to 1 major obtuse marginal branch . There is no evidence of atherosclerotic disease.

Right coronary artery

The RCA arises from the right sinus of Valsalva in the usual position. It is a large calibre dominant vessel. It gives rise to a posterior descending artery and posterolateral branch .

There is diffuse mixed plaque in the proximal RCA causing maximal stenosis of close to 50%.

ADDITIONAL CARDIAC FINDINGS

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

OTHER FINDINGS

The lungs appear clear.

CONCLUSION:

Focal non obstructive disease in the ostial LMCA.

Diffuse non obstructive coronary artery atherosclerosis involving the RCA .

There are no additional cardiac findings of relevance in the scanned segments.

Thank you for referring this patient.

Primary Read of Cardiac and Non Cardiac Findings by: Dr Wonder Woman

Co-read of Cardiac and Non-Cardiac Findings by: Dr Donald Duck