

Calcium score

The calcium score is 235 . Distribution of calcium:- LMCA, LAD, LCx, RCA This score is consistent with moderate coronary artery atherosclerotic plaque burden. On a population basis, this score places the patient in the 56th percentile rank for age, race and gender according to the 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 divides into left anterior descending and circumflex vessels. It contains focal calcified plaque causing no luminal narrowing.

Left anterior descending artery

The LAD is a large calibre artery and gives rise to one main diagonal branch. There is multifocal mixed plaque in the proximal and mid segments associated with positive remodelling, causing <25% stenosis. The major diagonal branch is a medium calibre vessel and exhibits focal mixed plaque at its ostium causing <25% stenosis.

Circumflex artery

Focal mixed, predominantly calcified plaque is seen in the mid circumflex causing virtually no luminal narrowing. No further atherosclerotic changes of significance are detected within the main circumflex artery or obtuse marginal branches.

Right coronary artery

The RCA is a large calibre vessel which arises from the right coronary sinus of Valsalva in the usual position and gives rise to posterior descending and posterolateral branches. Focal mixed plaque is seen in the proximal vessel associated with <25% stenosis. There is additional focal calcification in the mid and distal vessel and in the posterolateral branch causing no appreciable luminal narrowing. The posterior descending artery appears undiseased.

ADDITIONAL CARDIAC FINDINGS

There are no significant non coronary cardiac findings.

OTHER FINDINGS

There are several small low density lesions in the liver which may be simple cysts but which are too small to characterise.

There is gravitational atelectasis at the lung bases.

CONCLUSION:

The epicardial coronary arteries exhibit moderate multifocal non-obstructive atherosclerotic changes involving the LMCA and all three major vessels . There has been plaque progression as compared with the previous study in 2016. Tight control of hyperlipidaemia is recommended.

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

Thank you for referring this patient.

Primary Read of Cardiac Findings by: Dr Bruce Banner

Co-read of Cardiac and Non-Cardiac Findings by: Dr Wonder Woman

General
Report
#1030967:
Authorised by
Dr Bruce
Banner () at
14/01/2019
20:55

Date Serviced:
07/01/2019
09:00

Requests:
19/BJ/0000116
(Series 0;
Requested by:
Dr; Work Site:
BJ)

Services:
CT Coronary
Angiogram
(NR)
(07/01/2019
10:30 -
07/01/2019
10:50)

EXAM: CT CORONARY ANGIOGRAM AND CALCIUM SCORE

CLINICAL DETAILS:

Screening test. Exclude coronary artery disease. Risk factors for coronary artery disease: -
Hyperlipidaemia. Family history

TECHNICAL PARAMETERS:

Single phase CT coronary angiography was performed using prospective ECG gating at 100 kVp. The DLP for the entire study is 217 mGycm⁻¹. The patient has been pre-treated with beta blockers. Medication administered in the department: 800 mcg nitrates. Intravenous iodine contrast volume: 90 mL. Data acquisition was at an average heart rate of 41 bpm. Image quality is good .

FINDINGS:

CORONARY ARTERIES