

Randwick Medical Imaging Department

(Incorporating POWH, SCH & RHW)

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Barker Street
RANDWICK 2031

MRN:
Acc No: **1997713**
Ward: **DB3N**

CT CORONARY ANGIOGRAM performed on 27-SEP-2013

Indication:

Ex smoker chest pain – severe. Negative trop/ECG changes ?obstructive lesions.

Technical parameters:

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

Heart rate: 50-63 bpm

Radiation dose (DLP): 189 mGycm

Intravenous BETA-BLOCKER: No

Oral BETA-BLOCKER: Yes 100 mg Metoprolol

Sublingual Nitroglycerine: Yes

Technical Quality & technical issues: Good

Coronary arteries:

Dominance: Co-dominant

LM:

There is a short left main coronary artery arising normally from the left coronary sinus and dividing into the left anterior descending and left circumflex coronary arteries. The left main coronary artery appears normal.

LAD:

The left anterior descending coronary artery gives rise to two diagonal branches and multiple septal branches. There is a small focus of mixed plaque in the proximal segment resulting in minimal stenosis (<25%) (where it gives off the first diagonal branch) and a focus of non-calcified plaque in the mid segment resulting in minimal (approximately 25%) stenosis.

The remainder of the LAD and its diagonal branches appear normal.

Circumflex:

The left circumflex coronary artery appears normal. It gives rise to small posterolateral branches and there is a small branch that appears to collateralise with the PDA.