

Calcium score

The calcium score is 0 . This score is consistent with no calcific coronary artery atherosclerotic plaque burden. On a population basis, this score places the patient in the lowest possible percentile rank for age and gender.

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 no evidence of atherosclerotic disease.

Left anterior descending artery

The LAD is a medium calibre vessel and gives rise to 3 major diagonal branches . There is no evidence of atherosclerotic disease.

Circumflex artery

The left circumflex artery is a medium 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 no evidence of atherosclerotic disease.

ADDITIONAL CARDIAC FINDINGS

There are no significant non coronary cardiac findings.

OTHER FINDINGS

The lungs appear clear.

CONCLUSION:

The epicardial coronary arteries appear normal on CT angiography. There are no additional cardiac findings of relevance in the scanned segments.

Thank you for referring this patient.

Dr Wonder Woman

General Report #1030387: Authorised by Dr Wonder Woman () at 04/01/2019 18:54 Date Serviced: 04/01/2019 11:15 Requests: 19/LI/0000434 (Series 2; Requested by: Dr; Work Site: LI) Services: CT Coronary Angiogram (NR) (04/01/2019 11:15 - 04/01/2019 11:30)

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.

TECHNICAL PARAMETERS:

Single phase CT coronary angiography was performed using prospective ECG gating at 120 kVp. The DLP for the entire study is 253 mGycm⁻¹. Medication administered in the department: 75 mg oral metoprolol. 800 mcg nitrates. Intravenous iodine contrast volume: 75 mL. Data acquisition was at an average heart rate of 50 bpm. Image quality is good .

FINDINGS:

CORONARY ARTERIES

Calcium score

The calcium score is 0 . This score is consistent with no calcific coronary artery atherosclerotic plaque burden. On a population basis, this score places the patient in the lowest possible percentile rank for age and gender.

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 short but large calibre vessel. It divides into the left anterior descending and the left circumflex arteries. There is no evidence of atherosclerotic disease.

Left anterior descending artery

The LAD is a medium calibre vessel and gives rise to 1 major diagonal branch . There is no evidence of atherosclerotic disease.

Circumflex artery

The left circumflex artery is a medium calibre vessel and gives rise to 2 major obtuse marginal branches, the first of which is a large branching vessel. . 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 no evidence of atherosclerotic disease.

ADDITIONAL CARDIAC FINDINGS

There are no significant non coronary cardiac findings.

OTHER FINDINGS

The lungs appear clear.

CONCLUSION:

The epicardial coronary arteries appear normal on CT angiography. There are no additional cardiac findings of relevance in the scanned segments.

Thank you for referring this patient.

Primary Read of Cardiac Findings by: Dr Invisible Man