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Patient: Mr James Saint [REDACTED]
Address: [REDACTED]
Hospital No: 22141884 **CRIS No:** 5427158
Referring clinician: Dr O Malik

Date of examination: 31-Jul-2025

REPORT

CT Angiogram intracranial: (reported 02-Aug-2025)

Clinical indication: To look at carotid and vertebral circulation. MRI has demonstrated a right-sided cerebellar infarct.

CT angiography of the neck vessels has been performed. Aortic arch branch anatomy is conventional. The common carotid, internal carotid and vertebral arteries are of normal calibre within the neck. The right vertebral artery is developmentally of narrow calibre than the left. It is not well visualised in its lower segment due to dense beam hardening artefact from right arm contrast injection. Allowing for this there are no stenosis or evidence of calcification. The vessels of the Circle of Willis appear of normal calibre with very minor calcification related to the intracranial internal carotid arteries. Limited visualisation of the lung apices demonstrates severe emphysema. The previously demonstrated left middle ear/mastoid effusion has resolved. No other significant findings.

Conclusion: The right vertebral artery is developmentally narrowed but appears patent. Limited visualisation of the lungs demonstrates unusually severe emphysema. Clinical correlation and consideration of respiratory referral is recommended.

Reporter: Dr Sarah Watson(C6056858), Consultant Radiologist - 02-Aug-2025 16:25:52

Reporting clinician: Dr Sarah WATSON GMC6056858 (Consultant Radiologist)
Verified by: Dr Sarah WATSON GMC6056858 (02-Aug-2025)

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