

MARSH , JONATHAN 'JON'
12 TORINO WAY STIRLING WA

Phone:

Birthdate:	27/07/1973	Sex:	M	Medicare Number:	
Your Reference:	15937	Lab Reference:	15937		
Laboratory:	ChestRad				
Addressee:	DR YVONNE TAN	Referred by:	DR YVONNE TAN		
Name of test:	CTCA(GP)				
Requested	05/04/2023	Collected:	17/04/2023	Reported:	19/04/2023 14:11:00



This report is for: Dr Y. Tan

JONATHAN 'JON' MARSH
DOB: 27/07/1973
12 TORINO WAY
STIRLING, 6021

Referred By:
Dr Y. Tan

CT CORONARY ANGIOGRAM & CALCIUM SCORE 17/04/2023 Reference: 15937

CT CORONARY ANGIOGRAM & CALCIUM SCORE

Conclusion:

- Calcium score 12.1** at the 73rd percentile for matched asymptomatic average risk subjects free of clinical cardiovascular disease or treated diabetes (reference = MESA data).
- Soft plaque in due proportion to the calcium. The soft plaque does not display features that might be regarded as a risk factor for coronary events or stroke independent of the calcium score.
- No stenosis.

Clinical comment (by Dr Chris Judkins, cardiologist): statins are considered appropriate, to target an LDL of less than 2.0 mmol.L.

Report:

Indication - family history stents, cholesterol 4.8 on statin.? Increase dose of medication.

Calcium - present in LAD and circumflex systems, Agatston score = 12.1.

Coronaries - circumflex dominant. A low absolute volume of non-calcified (aka "soft") plaque present collocated with the calcium in the LAD and circumflex system - this plaque is not thick or macroscopically ulcerated. There is no more than minor lumen irregularity in the plaque-affected segments and the remaining segments are normal.

Other cardiac - chamber morphology is normal. There is no thrombus in the left atrial appendage. There is no valve calcification. The aortic root is normal in size.

Extra-cardiac - only the lower half of the chest was encompassed in this routine scan range. There is no significant finding.

Technical factors - Beta blocker not required as we are using Dual Source CT> 2 spray GTN sublingual on the table. 75mL i.v contrast. Radiation dose for the angiogram component 100mGy.cm.

Radiologist: Dr C. Murray

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