

Patient Name: Venkatesh Murthy

Age / Sex: 51 Years/ Male

Patient ID: 290323

Date: 29/03/2023

Referral Dr.: Dr Samir Vora

CT CORONARY ANGIOGRAPHY

Procedure: Computed tomographic angiography, heart and coronary arteries with contrast material, including 3D image post-processing.

Contrast type and volume: [Optiscan 370, 90ml]

Medication used: [None]

Complications: [None]

Image quality: [Good] signal noise. [No Significant artifacts].

Scanner: [Philips 128 CT]

Coronary angiography:

Left Main: The left main is a large caliber vessel with a normal take off from the left coronary cusp that bifurcates to form a left anterior descending artery and a left circumflex artery. LMA reveals an eccentric calcific plaque causing 20-30% luminal occlusion.

Left anterior descending artery: The LAD reveals no plaques or stenosis. The LAD gives off two patent diagonal branches.

Left circumflex artery: The LCX is non dominant reveals a small calcific plaque in the proximal segment causing focal 30-40% luminal occlusion. The LCX gives off two patent obtuse marginal branches.

Right coronary artery: The RCA is dominant reveals no plaques or stenosis. The RCA is seen supplying the PDA and PLV with no evidence of plaque or stenosis.

Left Atrium: Left atrial size is normal in size with no left atrial appendage filling defect.

Left Ventricle: The ventricular cavity size is within normal limits. There are no stigmata of prior infarction. There is no abnormal filling defect.

VAPI

1st Floor, Above Trivedi Suzuki,
N.H. 48 (Service Road), Chharwada, Vapi - 396 191
Ph.: 0260 2468803 / 04 | M.: +91 78741 55100 / 78744 55100

VALSAD

Ground Floor, Behind Trivedi Suzuki, Near Jalaram Ceramic,
Dharampur Road, Abrama, Valsad - 396 002
Ph.: 02632 355100 | M.: +91 84690 55100 / 82381 55100



Pulmonary arteries: Normal in size without proximal filling defect.

Pulmonary veins: Normal pulmonary venous drainage. There were four noted pulmonary veins, two on the right and two on the left.

Pericardium: Normal thickness with no significant effusion or calcium present.

Cardiac valves: There is no thickening or calcifications in the aortic and mitral valves.

Aorta: Normal caliber with no significant disease.

IMPRESSION:

1. Total calcium score 0.
2. LMA reveals an eccentric calcific plaque causing 20-30% luminal occlusion.
3. LCX is non dominant reveals a small calcific plaque in the proximal segment causing focal 30-40% luminal occlusion
4. No evidence of coronary stenosis or plaque by Coronary CT Angiography.
5. CAD RADS 2

RECOMMENDATIONS:

[<CAD RADS 0: Reassurance. Consider non-atherosclerotic causes of chest pain.>]

[<CAD RADS 1: Consider non-atherosclerotic causes of chest pain. Consider preventive therapy and risk factor modification.>]

[<CAD RADS 2: Consider non-atherosclerotic causes of chest pain. Consider preventive therapy and risk factor modification, particularly for patients with non-obstructive plaque in multiple segments.>]

[<CAD RADS 3: Consider further functional testing. Consider symptom-guided anti-ischemic and preventive pharmacotherapy as well as risk factor modification per published guideline statements.>]

[<CAD RADS 4A: Consider further functional testing or invasive coronary angiography with revascularization per published guideline statements. Consider symptom-guided anti-ischemic and preventive pharmacotherapy as well as risk factor modification per published guideline statements.>]

[<CAD RADS 4B: Invasive coronary angiography recommended with revascularization per published guideline statements. Consider symptom-guided anti-ischemic and preventive pharmacotherapy as well as risk factor modification per published guideline statements.>]

[<CAD RADS 5: Consider invasive angiography and/or viability assessment with revascularization per published guideline statements. Consider symptom-guided anti-ischemic and preventive pharmacotherapy as well as risk factor modification per published guideline statements.>]

Thanks for the reference.

With regards,

Dr. Shenil Trivedi
Chief Radiologist
Fellowship in Musculoskeletal
& Body Imaging (Singapore)


Dr. Siddharth Parekh
Consultant Cardiac Radiologist
Fellowship in adult/congenital CMR (BCH. Harvard medical college)
Fellowship in PET CT/MRI university hospital Zurich (Switzerland)

VAPI

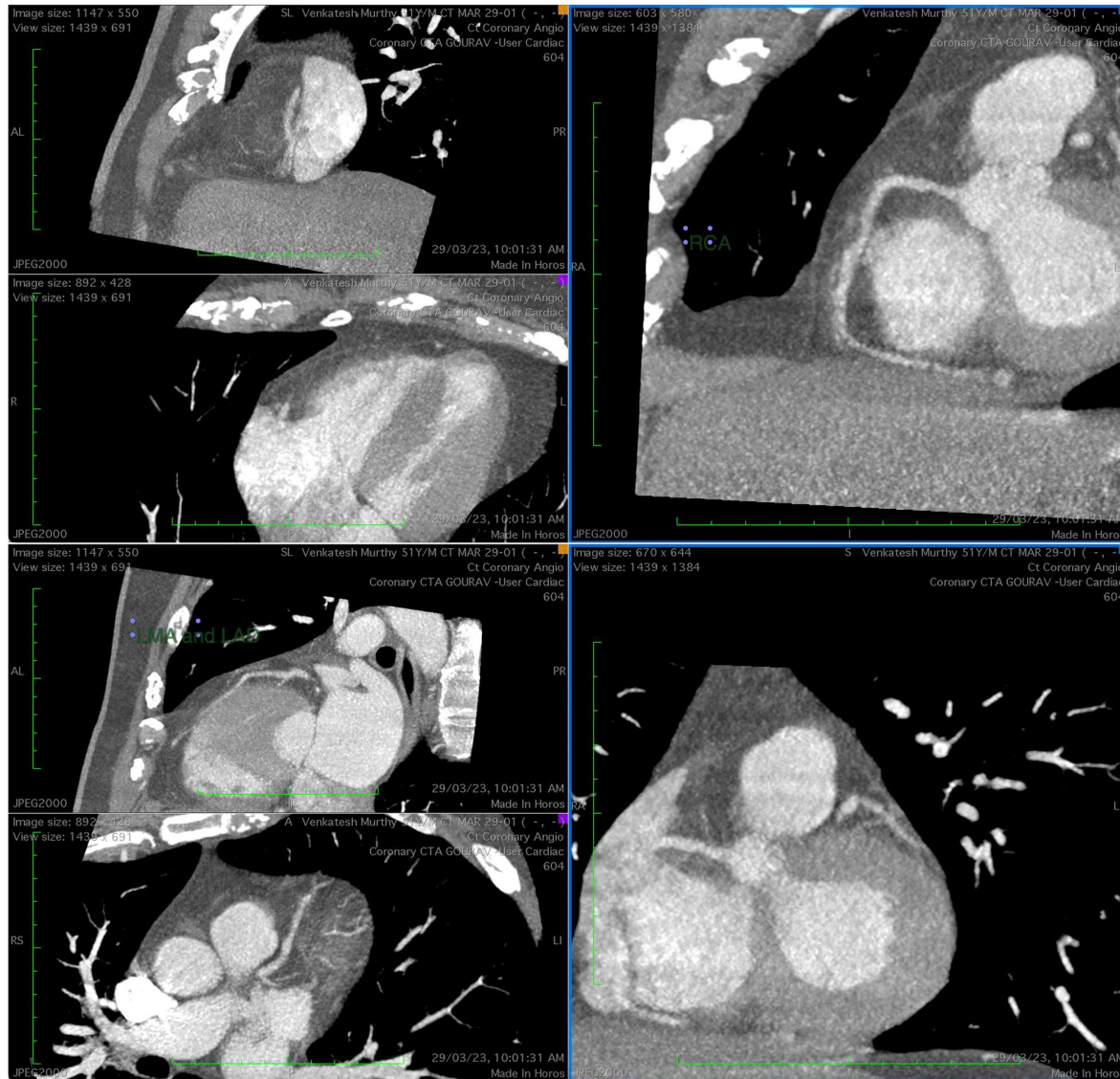
1st Floor, Above Trivedi Suzuki,
N.H. 48 (Service Road), Chharwada, Vapi - 396 191
Ph.: 0260 2468803 / 04 | M.: +91 78741 55100 / 78744 55100

VALSAD

Ground Floor, Behind Trivedi Suzuki, Near Jalaram Ceramic,
Dharampur Road, Abrama, Valsad - 396 002
Ph.: 02632 355100 | M.: +91 84690 55100 / 82381 55100

A Unit of Trisba Healthcare LLP

State-of-the-art Whole-body Digital MRI • 128-Slice Cardiac & Whole-body CT Scan
3D-4D Sonography • Color Doppler • Digital X-Ray • Digital Mammography • Digital OPG
BMD DEXA • Intervention - Biopsy, FNAC & Image-guided procedures • Computerized Pathology
2D-Echo, ECG • Elastography • EEG, EMG, NCV • Full Body Health Check-Up



VAPI

1st Floor, Above Trivedi Suzuki,
N.H. 48 (Service Road), Chharwada, Vapi - 396 191
Ph.: 0260 2468803 / 04 | M.: +91 78741 55100 / 78744 55100

VALSAD

Ground Floor, Behind Trivedi Suzuki, Near Jalaram Ceramic,
Dharampur Road, Abrama, Valsad - 396 002
Ph.: 02632 355100 | M.: +91 84690 55100 / 82381 55100

A Unit of Trisba Healthcare LLP

State-of-the-art Whole-body Digital MRI • 128-Slice Cardiac & Whole-body CT Scan
3D-4D Sonography • Color Doppler • Digital X-Ray • Digital Mammography • Digital OPG
BMD DEXA • Intervention - Biopsy, FNAC & Image-guided procedures • Computerized Pathology
2D-Echo, ECG • Elastography • EEG, EMG, NCV • Full Body Health Check-Up



VAPI

1st Floor, Above Trivedi Suzuki,
N.H. 48 (Service Road), Chharwada, Vapi - 396 191
Ph.: 0260 2468803 / 04 | M.: +91 78741 55100 / 78744 55100

VALSAD

Ground Floor, Behind Trivedi Suzuki, Near Jalaram Ceramic,
Dharampur Road, Abrama, Valsad - 396 002
Ph.: 02632 355100 | M.: +91 84690 55100 / 82381 55100