

From:	Lumus Imaging SVPHN^0117E3E5-5ADD-4FEE-B3BC-6078AC308915^GUID JRI5	Requested:	16/04/2024 Dr Paul McEniery 044300BB		
Patient:	KYM CHILTON	DOB:	07/09/1973	Collected:	16/04/2024

Report

Radiology - CT CORONARY ANGIOGRAM

CT Coronary Artery Calcium Score

Vessel

Left Main Coronary score: 0

Left Anterior Descending score: 46

Left Circumflex score: 0

Right Coronary score: 0

Total Score: 46

CT Coronary Angiogram

History: Chest pain waking from sleep and while driving. Negative troponin.

Technique:

Cardiac gated contrast enhanced coronary CT was obtained with dual source 128-slice

Siemens Drive as per Department Protocol.

Heart Rate During Acquisition: 55-57 bpm (average)

Metoprolol Dose: 0mg

Ivabradine Dose: 0 mg

Nitroglycerin Dose: 600 mcg

Contrast Volume: 80 ml of Omnipaque 350

Dose

Total:

DLF:224 (mSvcm)

Effective dose: 3.1(mSv)

Findings:

General Comments: This is a good quality study with good opacification of the coronary arteries. This is a left dominant system.

LMCA: There is no significant disease.

LAD/Diagonal: There are 2 diagonal branches. There is a mild degree of calcified and non-calcified plaque in the proximal vessel. This causes mild-to-moderate stenosis which is likely to be at most around 30-40% in severity.

Left Circumflex/OM: There is a single marginal branch. There is no significant disease.

RCA: There is no significant disease.

Left Ventricle: This is of normal size with no evidence of significant left ventricular hypertrophy or previous myocardial infarction.

Other Findings:

There are no significant extra-cardiac findings in the available limited views of the lungs.

Conclusion:

1. There is mild-to-moderate coronary artery stenosis in the proximal left anterior descending artery.

2. CAD- RADS 2

Principal Reporter:

Dr Roderick Chua (Cardiologist)

Co-Reporter:

Dr Carl Kua (Radiologist)

Electronically Signed by: Dr Carl Kua

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cc: Dr Paul McEniery 044300BB