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CMO Reg. No. RMEE 2445133 NABL Reg. No. MC-2491 Certificate No. MIS-2023-0218

Patient Name : Mr. DEEPAK BAHADUR SHAH

Age/Gender : 50 Y 0 M 0 D /M **Lab No** : **10130727**

Referred By : Dr.L

Refer Lab/Hosp : CHARAK NA

Visit No : CHA250033431

Registration ON : 24/Feb/2025 04:37PM Sample Collected ON : 24/Feb/2025 04:37PM

Sample Received ON

Report Generated ON : 25/Feb/2025 05:19PM

CT CORONARY ANGIOGRAPHY

Compromised assessment due to respiratory motion artifacts (inadequate breath hold)

CALCIUM SCORE:

VESSEL	LMCA	LAD	LCX	RCA	TOTAL
AGATSTON SCORE	0	0	0	0	0

Aorta: shows tricuspid aortic valve.

Left main coronary artery shows origin from left posterior aortic sinus with bifurcation into left anterior descending artery and left circumflex artery. No obvious calcified / non-calcified plaques are seen in left main coronary artery; however, optimal assessment is limited by respiratory motion artifacts.

Left anterior descending artery shows no obvious calcified / non-calcified plaque; however, optimal assessment is limited by respiratory motion artifacts. Distal opacification appears maintained.

Ramus Intermedius is absent.

<u>Left circumflex artery</u> is narrow in caliber and appears attenuated in caliber beyond origin of OM1 branch - normal variant in right dominant circulation. Optimal assessment is limited by respiratory motion artifacts.

Right coronary artery shows origin from anterior aortic sinus. No obvious calcified / non-calcified plaques are seen in right coronary artery; however, optimal assessment is limited by respiratory motion artifacts. Distal opacification appears maintained.

Dominant circulation: Right sided.

IMPRESSION: - CORONARY ANGIOGRAM SHOWS -

- RIGHT DOMINANT CIRCULATION.
- NO OBVIOUS CALCIFIED OR SOFT PLAQUE IN CORONARY ARTERIES. (CAD-RADS N)

Clinical correlation is necessary.

[DR. JAYENDRA K. ARYA, MD]

Transcribed By: RACHNA



*** End Of Report ***