

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003

Phone: 0522-4062223, 9305548277, 8400888844 9415577933, 9336154100, **Tollfree No.**: 8688360360

E-mail: charak1984@gmail.com

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

Patient Name : Mr.SHV PRATAP Visit No : CHA250038760

 Age/Gender
 : 35 Y/M
 Registration ON
 : 04/Mar/2025 10: 28AM

 Lab No
 : 10136055
 Sample Collected ON
 : 04/Mar/2025 10: 28AM

Referred By : Dr.L Sample Received ON :

Refer Lab/Hosp : CHARAK NA Report Generated ON : 04/Mar/2025 06:52PM

CT CORONARY ANGIOGRAPHY

Compromised assessment due to respiratory motion artifacts (study was performed twice, however patient was unable to hold breath).

CALCIUM SCORE:

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

Aorta: shows tricuspid aortic valve with few small mixed density plaques in visualized part.

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 and appears attenuated in caliber beyond origin of OM2 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 ***