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

Patient Name : Ms. SUPRIYA SINGH Visit No : CHA250042968

 Age/Gender
 : 56 Y/F
 Registration ON
 : 10/Mar/2025 12:30PM

 Lab No
 : 10140263
 Sample Collected ON
 : 10/Mar/2025 12:30PM

Referred By : Dr.1 Sample Received ON

Refer Lab/Hosp : CHARAK NA Report Generated ON : 10/Mar/2025 06: 43PM

CT CORONARY ANGIOGRAPHY

CALCIUM SCORE:

VESSEL	LMCA	LAD	LCX	RCA	TOTAL
AGATSTON SCORE	0	0	0	1	1

Aorta: shows tricuspid aortic valve.

<u>Left main coronary artery</u> 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.

<u>Left anterior descending artery</u> shows no obvious calcified / non-calcified plaque. Distal opacification appears maintained.

Ramus Intermedius: is absent.

<u>Left circumflex artery</u> appears attenuated in caliber beyond origin of OM1 branch - normal variant in right dominant circulation. Rest of the left circumflex artery shows no obvious calcified / non-calcified plaque.

Right coronary artery shows origin from anterior aortic sinus. Tiny calcified plaque is seen in proximal segment of right coronary artery, measuring approx. 2 mm in segmental length, being located approx. 30 mm distal to its origin and causing approx. 20-25 % luminal narrowing. Distal opacification appears maintained.

Dominant circulation: Right sided.

IMPRESSION: - CORONARY ANGIOGRAM SHOWS

- RIGHT DOMINANT CIRCULATION.
- TINY CALCIFIED PLAQUE IN RIGHT CORONARY ARTERY CAUSING LUMINAL NARROWING AS MENTIONED ABOVE (CAD-RADS I).

Clinical correlation is necessary.

[DR. JAYENDRA K. ARYA, MD]

Transcribed by Rachna

*** End Of Report ***

