

Patient Name	: Mr.MANIRAM	Visit No	: CHA250043560
Age/Gender	: 65 Y/M	Registration ON	: 11/Mar/2025 09:28AM
Lab No	: 10140855	Sample Collected ON	: 11/Mar/2025 09:28AM
Referred By	: Dr.L	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 11/Mar/2025 05:51PM

CT CORONARY ANGIOGRAPHY

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

CALCIUM SCORE:

VESSEL	LMCA	LAD	LCX	RCA	OM1	TOTAL
AGATSTON SCORE	0	146.6	4.4	96.1	1.3	248.4

Aorta: shows tricuspid aortic valve with 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 few calcified plaques in proximal & mid segments with the largest measuring approx. 7.9 mm in segmental length being located approx. 5.2 mm distal to left main coronary trifurcation. The plaques are causing upto 50-55 % luminal narrowing; however, optimal assessment is limited by respiratory motion artifacts. Distal opacification appears maintained.

Ramus Intermedius is absent.

Left circumflex artery is narrow in caliber and appears attenuated in caliber beyond origin of OM2 branch - normal variant in right dominant circulation. Small calcified plaques with spotty calcification are seen in left circumflex artery and OM1 branch causing minimal to mild luminal narrowing; however, optimal assessment is limited by respiratory motion artifacts.

Right coronary artery shows origin from anterior aortic sinus. Few calcified plaques are seen in right coronary artery mainly in its distal segment with the largest measuring approx. 8.2 mm in segmental length, being located approx. 99 mm distal to its origin. The plaques are causing upto 70-75 % luminal narrowing; however, optimal assessment is limited by respiratory motion artifacts. Distal opacification appears maintained.

Dominant circulation: Right sided.



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IMPRESSION: - CORONARY ANGIOGRAM SHOWS -

- **RIGHT DOMINANT CIRCULATION.**
- **CALCIFIED PLAQUES IN CORONARY ARTERIES CAUSING LUMINAL NARROWING AS MENTIONED ABOVE (CAD-RADS 4A/P2/N).**

Clinical correlation is necessary.

[DR. JAYENDRA K. ARYA, MD]

Transcribed By: RACHNA

*** End Of Report ***

CHARAK

