Ct Angio Coronary (Jerry)

Not yet reviewed by care team.

Results

Results

CT angiogram Coronary
CT FFR Analysis

Impression

1. Mild to moderate nonobstructive coronary artery disease
2. The total Agatston calcium score measures 544.6, this places the patient at the 84 percentile for subjects of the same age, gender, and race/ethnicity who are free of clinical cardiovascular disease and treated diabetes.

Narrative

CARDIAC CT WITHOUT AND WITH CONTRAST, December 29, 2025 11:23 AM
INDICATIONS:
Z01.810; ffr analysis
COMPARISON:
None.
TECHNIQUE:
Volumetric acquisition of the chest is first performed with a small field-of-view centered on the heart using prospective EKG gating for coronary calcification scoring purposes.
Contrast enhanced dual source 64 slice coronary CTA performed per departmental protocol. Curved multiplanar and 3D post processing is performed by the interpreting physician to better assess the anatomy and morphology of the coronary arteries and cardiac function.
Wide field-of-view images are also reconstructed.
The patient's vital signs remained stable throughout the procedure. The patient was monitored by a radiology nurse during the entire examination.
Please see EPIC for specifics of medications given.
This examination was performed on a CT scanner with automated exposure control.
RADIATION:
Estimated radiation dose: As reported
Medication: Please see patients EPIC chart for specifics of medication given
Prospective dose gated.
Quality of study: Good.
FINDINGS:
Coronary arterial calcification: The total Agatston calcium score measures 544.6
The calcium score for each vessel is as follows:
Left main Artery (LM):0
Left Anterior Descending artery (LAD):321.1
Left Circumflex Artery (LCX):125.3
Right Coronary Artery (RCA): 98.2

According to the MESA study on coronary arterial calcification, this places the patient at the 84 percentile for subjects of the same age, gender, and race/ethnicity who are free of clinical cardiovascular disease and treated diabetes.
FINDINGS
Coronary CTA
Stenoses are reported as follows:
1-24% Minimal stenosis or plaque
25-49% Mild stenosis
50-69% Moderate stenosis
70-99% or Left main >50% Severe stenosis
Anatomy: No anomalous coronary artery. The right coronary artery is dominant, supplying the posterior descending and posterior lateral branches.
Left main: Angiographically Normal
LAD and diagonal branches: Mild proximal calcified plaque. There are 3 patent diagonal branches.
Left circumflex and obtuse marginal branches: Mild calcified plaque there are 1 patent obtuse marginal branches.
Right coronary artery, PDA, and posterior lateral branches: Mild to moderate calcified and noncalcified stenosis in the distal RCA.
FFRCT Reporting
An FFRCT value interpretation is as follows. Greater than 0.8 is normal, values between 0.70 and 0.8 are borderline, and a value less than or equal to 0.70 is abnormal. Trans-lesional Gradient across stenosis of > 0.12 is abnormal
Left Main: FFRct is normal in this vessel
LAD and diagonal branches: These plaques are nonobstructive by FFRct.
LCX and branches: Proximal : These plaques are nonobstructive by FFRct.
RCA and diagonal branches: Proximal : These plaques are nonobstructive by FFRct.
AORTA:
Aorta: The thoracic aorta was incompletely imaged due to coronary-only protocol. The ascending aorta is mildly dilated in caliber. 37 x 39 x 39 mm
There is minimal aortic atherosclerosis present.
PULMONARY ARTERY:
This study is not timed for optimal assessment of pulmonary embolism, but no evidence of pulmonary embolism in visualized portions of the pulmonary artery.
CARDIAC MORPHOLOGY:
No gross evidence of prior LV infarction is present.
The left atrial appendage is visualized with no thrombus present.
The pericardium is normal in appearance with no pericardial effusion.
Systemic and pulmonary venous drainage is normal with no mal-connections or shunts present.
The coronary sinus is normal in size.
CARDIAC VALVES:
The aortic valve and mitral valve are normal in appearance without calcification.
Extracardiac findings: No significant extracardiac findings in the available limited views of the lungs, mediastinum, or upper abdomen.

General Information

Ordered By Dr. G Smith, MD
Resulted On 12/29/2025 4:07 PM
Result Status: Final result

Reading Physician: Anita Radhakrishnan, MD

Study Result

Narrative & Impression

CARDIAC CT WITHOUT AND WITH CONTRAST, December 29, 2025 11:23 AM

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COMPARISON:
None.

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Quality of study: Good.

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The calcium score for each vessel is as follows:

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There is minimal aortic atherosclerosis present.

PULMONARY ARTERY:

This study is not timed for optimal assessment of pulmonary embolism, but no evidence of pulmonary embolism in visualized portions of the pulmonary artery.

CARDIAC MORPHOLOGY:

No gross evidence of prior LV infarction is present.

The left atrial appendage is visualized with no thrombus present.

The pericardium is normal in appearance with no pericardial effusion.

Systemic and pulmonary venous drainage is normal with no mal-connections or shunts present.

The coronary sinus is normal in size.

CARDIAC VALVES:

The aortic valve and mitral valve are normal in appearance without calcification.

Extracardiac findings: No significant extracardiac findings in the available limited views of the lungs, mediastinum, or upper abdomen.

IMPRESSION:
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CT FFR ANALYSIS (Jerry)

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