

# LifeSavers Imaging

## Coronary Calcium Screening Report

Patient Name:  
 Current Exam Date:  
 Previous Exam Date:

DOB:  
 Original Exam Date:  
 Referring Physician:

### Technique:

The patient underwent high-resolution, volume-mode, axial Electron Beam Tomography (EBT) with multiple contiguous 3 millimeter slices of the heart obtained at 100 millisecond scan time, in conjunction with ECG-gating at peak diastole.

### FINDINGS:

Location	# of Lesions	Calcium score	Volume mm3
Left Main	0	0.00	0.00
LAD	17	574.65	386.43
Circumflex	12	336.76	256.11
RCA/PDA	22	881.20	675.30
<b>Total</b>	<b>51</b>	<b>1792.60</b>	<b>1317.85</b>

### Coronary artery Atherosclerosis:

Calcified atherosclerotic plaques in the coronary arteries are summarized as in above table by:

- 1) Artery location- **Figure 1.**
- 2) Number of plaques.
- 3) Plaque volume.
- 4) Calcium score correlated to databases:

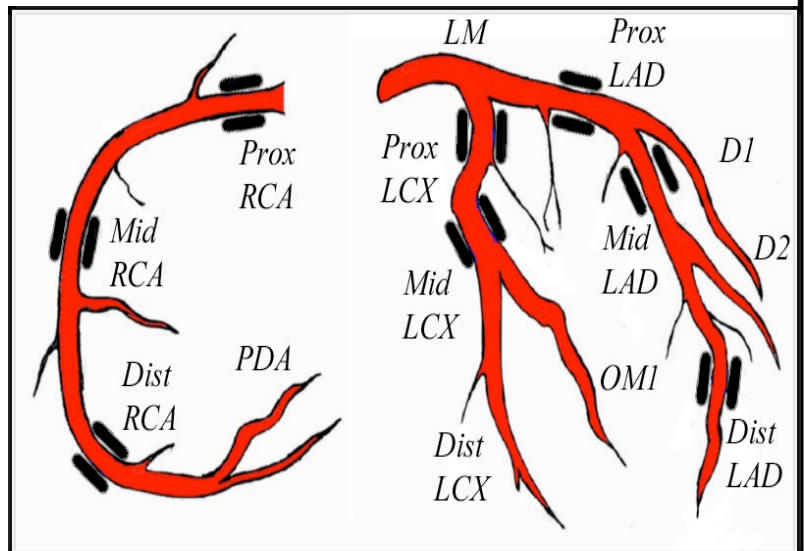
### Figure 3 & 4.

### Risk Assessment:

Based on result of your coronary calcium score and information available, following comments can be made:

- Low probability of cardiac risk.
- Moderate probability of cardiac risk.
- High probability of cardiac risk.
- Low probability of flow obstructive disease.
- Moderate probability of flow obstructive disease.
- High probability of flow obstructive disease.

Note: This chart shows only approximate positions.

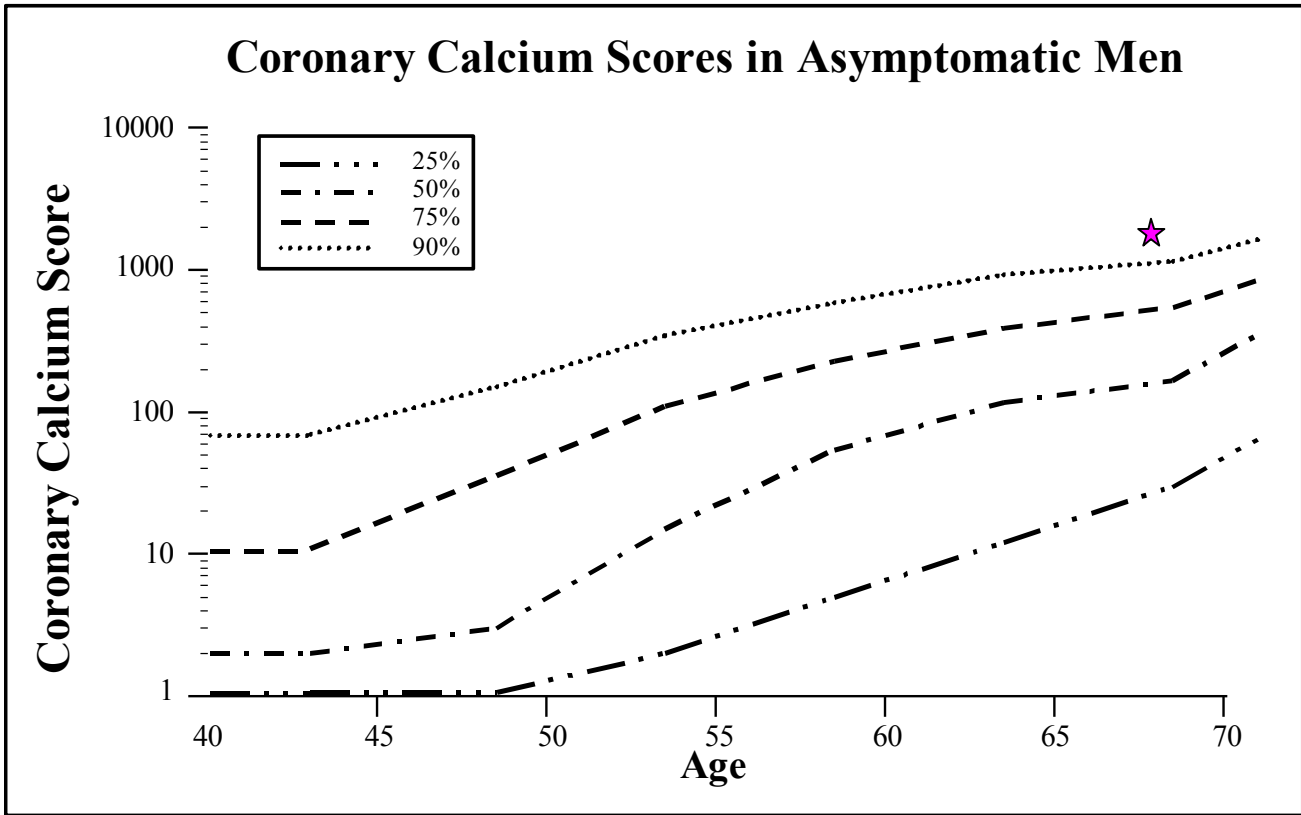


**Figure 1. Distribution of Coronary Artery Calcium**

Patient Name:

DOB:

Examination Date:



**Figure 3**

**EBT Calcium Score Guidelines:**

The total calcium score (1792.60) is above the 90th percentile for men between the ages of 65 and 69. (Exact percentile calculated to be 99%; this means 98% of the population has lower calcium score and 1% of the population has a higher calcium score than you.)

<b>EBT Calcium score</b>	<b>Plaque burden</b>	<b>Probability of significant CAD</b>	<b>Implications for CV risk</b>
0-0.9	No or negligible identifiable plaque	Very low, generally <5%	Very low
1-10	Minimal identifiable plaque burden	Very unlikely, <10%	Low
11-100	Definite, at least mild atherosclerotic plaque burden	Mild or minimal coronary artery stenosis likely	Moderate
101-400	Definite, at least moderate atherosclerotic plaque burden	Non-obstructive CAD highly likely, although obstructive disease possible	Moderately high
> 400	Extensive atherosclerotic plaque burden	High likelihood (≥90%) of at least 1 significant coronary stenosis	High

**Figure 4**

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## Conclusion and Recommendations

Based upon your Calcium Score and the Score which would be expected considering your age group, gender, and the other risk factors you may have reported to us, our cardiology advisory panel suggests the following:

**X Electron beam angiography.**

**X Physician consultation.**

**Comprehensive lipid panel.**

**Smoking cessation.**

**Diet counseling.**

**Weight reduction.**

**Exercise counseling.**

**X Additional comments: Well above average calcium score for age and gender. A score of this magnitude indicates a high likelihood of at least one significant coronary stenosis. Electron beam angiography is recommended for further evaluation. Rescan annually. Radiation exposure for CAS is approx 40-70 mrem.**

The HeartSavers EBT scanning facility is intended as a coronary artery disease risk assessment testing facility and is not a substitute for a careful examination by a physician. All recommendations from our center are suggestions based solely upon information supplied by the conventional risk factor questionnaire and by electron beam CT scan results. The patient's own physician is best able to make definitive therapeutic decisions based upon a careful history, physical examination, this report and other testing if necessary.

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Physician Name, M.D.

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