

## CT CALCIUM SCORING ONLY

Collected on Feb 16, 2026 3:09 PM

### Results

### Impression

**IMPRESSION:** Total coronary artery calcium score of 0.

Coronary artery grading : No evidence of coronary artery disease.

**REFERENCE:** Coronary calcium scoring should be interpreted in the context of the overall patient including other cardiac risk factors. Consider further evaluation if multi-vessel or left-main predominant disease is present. Coronary calcium scoring is for screening asymptomatic patients, symptomatic patients require prompt evaluation. Calcium Score 0: Does not imply complete absence of coronary artery disease as non-calcified plaques may be present, but these patients may require less aggressive medical/lipid targets. Typically, does not warrant further imaging evaluation.

Calcium score >0: Recommend further clinical evaluation and consider lipid/medical therapy. Scores >100 are at higher risk and therapy should be more strongly considered. Scores greater than 300 may require more aggressive medical targets/therapy and evaluation. Gaine, S, Blumenthal, R, Sharma, G. Coronary Artery Calcium Score as a Graded Decision Tool. JACC Adv. 2023 Nov, 2 (9) . S.M. Grundy, N.J. Stone, A.L. Bailey, et al. 2018

AHA/ACC/AACVPR/AAPA/ABC/ACPM/ADA/AGS/APhA/ASPC/NLA/PCNA guideline on the management of blood cholesterol: a report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. J Am Coll Cardiol, 73 (24) (2019), pp. e285-e350 Electronically Signed By: Joshua Tochtrop, D.O. 2/16/2026 3:16 PM

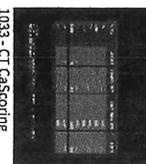
### Narrative

**PROCEDURE:** CT CALCIUM SCORING ONLY **HISTORY:** - Mixed hyperlipidemia - **TECHNIQUE:** CT coronary artery calcium scoring was performed. Helical noncontrast CT acquisition through the heart was performed for calcium scoring. Agatston score equivalent was calculated. Dose reduction techniques include automated exposure control and adjustment of the mA and kV according to patient size.

**COMPARISON:** June 25, 2024 **FINDINGS:** Coronary arteries: No significant coronary artery calcifications visualized. The unenhanced coronary arteries appear grossly unremarkable.



1018 - Evidence Documents MM



1033 - CT CasScoring [2] Result Table (1)



1011 - Evidence Documents CT



502 - Patient Protocol 1 Images



1 - Topogram 1.0 Tr20 1 Images



1036 - CT CasScoring [2] Percentile Chart



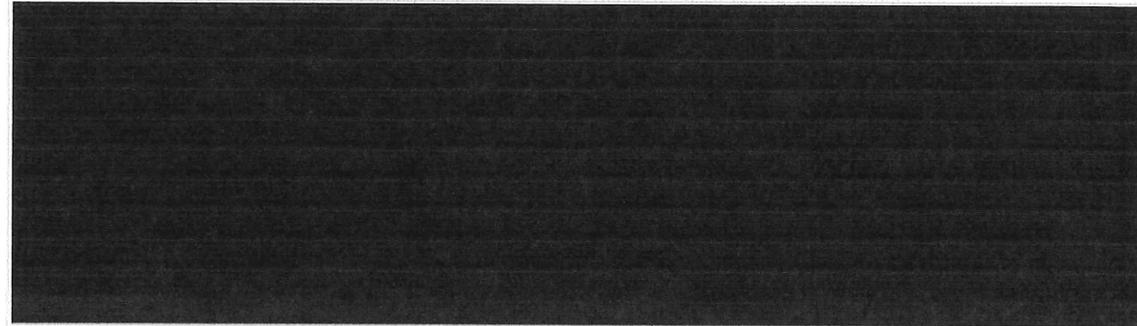
1025 - CaPercentile Casc



2 - CasCSeq 3.0 Q36 60%

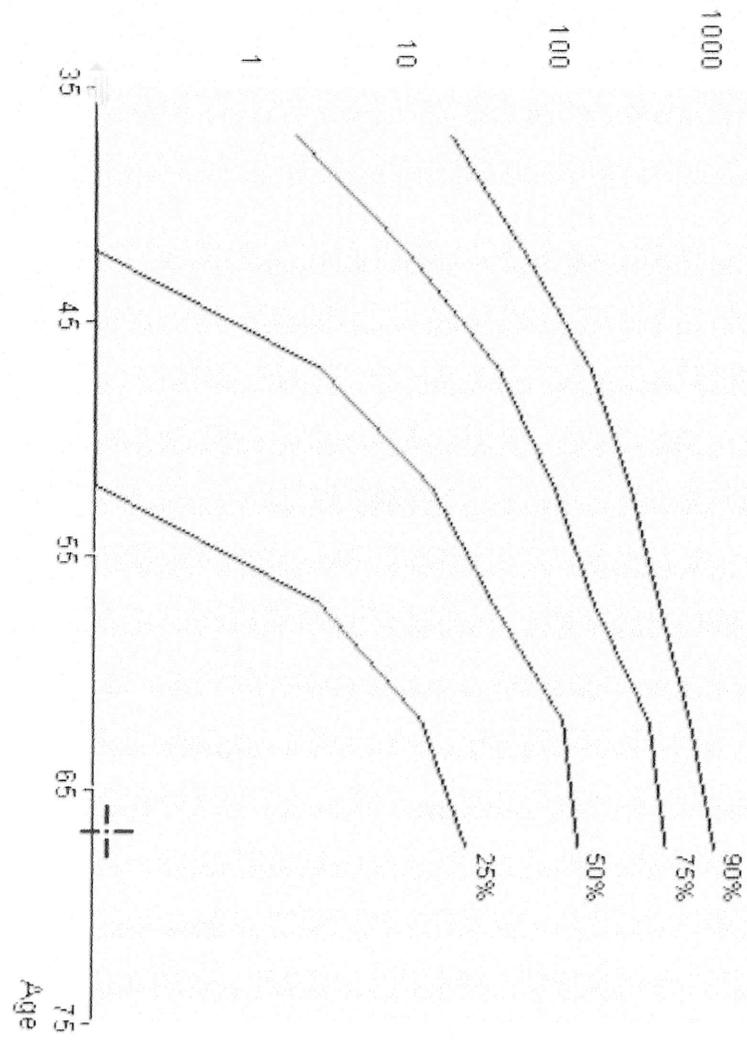


501 - Dose Report



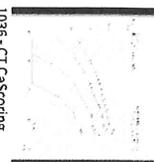
Score : 0  
Raggi, Circulation 2000  
Score 10000

No Identifiable Calcification  
Coronary Age: < 35 Y

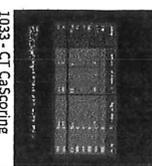




1018 - Evidence Documents MM



1036 - CT Casoring [2] Percentile Chart



1033 - CT Casoring [2] Result Table (1)



1025 - Capercentile Case



1011 - Evidence Documents CT



2 - CASCSeq 3.0 Q236 60%



502 - Patient Protocol 1 Images



501 - Dose Report



1 - Topogram 1.0 TR20 1 Images

Artery	Lesions	Volume / mm <sup>3</sup>	Equiv. Mass / mg	Score
LM	0	0.0	0.00	0.0
LAD	0	0.0	0.00	0.0
CX	0	0.0	0.00	0.0
RCA	0	0.0	0.00	0.0
Ca	0	0.0	0.00	0.0
<b>Total</b>	<b>0</b>	<b>0.0</b>	<b>0.00</b>	<b>0.0</b>
U1	0	0.0	0.00	0.0
U2	0	0.0	0.00	0.0

**Settings**  
 Score Type: Agatston equivalent, Threshold: 130 HU (102.7 mg/cm<sup>2</sup> CaHA)  
 Mass calibration factor: 0.79