

## Quality Control 01-11-21 Dimski (3/3)

2 messages

Dayanera Miller <nera.cardiorisk@gmail.com>  
 To: Diane Nielson <dianekjar@comcast.net>

Thu, Jan 14, 2021 at 2:22 PM

Patient Name: HUNTER, JAMES  
 Gender: M  
 Date of Exam: 1/11/2021  
 Date of Birth: 7/15/1961  
 Referring Provider: ROBERT DIMSKI

Patient Age	59	Patient IMT	0.76 mm
Arterial Age	61	Normal IMT	<.50 mm

### CV Event Risk

All measurements in mm

Test Criteria:	Normal	Moderate	High	Last Visit (2018)*	Alert Value*
Early Event Risk**			2.9	3.4	2
Average CCA Mean IMT		0.76		0.88	0.73
Average CCA Max Region		0.88		0.97	0.75
Plaque Burden**			6.3	8.3	

### Comments:

The following values are the largest intima-media thickness (IMT) measurements found in each carotid artery segment. Any measurement as 'plaque' and is characterized as being: S = Soft; H = Heterogeneous; or E = Echogenic (includes mineral deposits like calcium).

Right CCA .8; Bulb 2.9 E; Internal Carotid 1.4 E  
 Left CCA .9; Bulb 2.0 H; Internal Carotid .9  
 Doppler was used bilaterally.

#### Comments from 1/15/2018 Scan

Right CCA .9; Bulb 3.4 E; Internal Carotid .9  
 Left CCA .9; Bulb 3.4 E; Internal Carotid 1.5 H  
 Doppler was used bilaterally.

1. RCB went from E to H. Is this a different plaque or the same and more heterogeneous?
2. Missing prior LICA plaque. Did the tech miss it this year?

--  
 Nera Miller

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Diane Nielson &lt;dianekjar@comcast.net&gt;

Thu, Jan 14, 2021 at 7:42 PM

To: Dayanera Miller <nera.cardiorisk@gmail.com>

Use prior lcb plaque and yes the tech missed the lca plaque

Sent from my iPhone

On Jan 14, 2021, at 2:22 PM, Dayanera Miller <[nera.cardiorisk@gmail.com](mailto:nera.cardiorisk@gmail.com)> wrote:

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