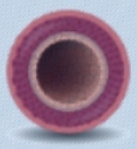
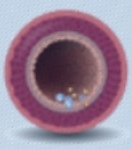
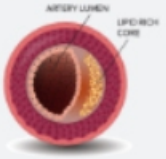
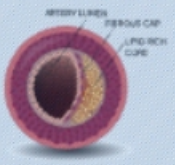
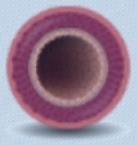
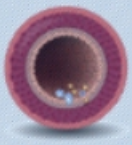
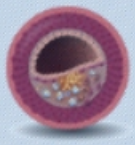
CAROTID ASSESSMENT	A GOOD	B SATISFACTORY	C CONCERN	D SERIOUS	E HIGHEST RISK
INTIMA-MEDIA THICKNESS	 Normal	 Mild	 Moderate	 Significant	 Critical Significant
PLAQUE CHARACTER	 None Observed	 Early Buildup	 Calcified	 Mixed	 Soft
PERCENT STENOSIS	 None Observed	 Nominal	 Less than 30%	 Between 30% to 50%	 Greater than 50%

ARTERIAL AGE
76

IMT Score Relative Risk Of Clinical Event

- **A** Very Unlikely - No increased risk
- **B** Unlikely - Minimal increased risk
- **C** Possible - Risk increased 1.5x
- **D** Probably - Risk increased 1.5x - 2.0
- **E** Likely - Risk increased to 2.7x

Comments:

Carotid IMT Assessment

Your risk of experiencing a heart attack or stroke is graded by zone. The zone assigned is age and gender specific to you. Normal or thin Carotid IMT does not completely exclude coronary artery disease. The result of this test should be interpreted in conjunction with your medical history, symptoms, known risk factors, and other test results.

Plaque Character

Plaque or lesions develop when atherosclerosis in the arterial wall intrudes into the lumen. Plaque may be soft, mixed or calcified as outlined on Page 3 of the report. It is possible to have normal IMT and yet lesions may be present.

Percent Stenosis

Stenosis is the amount of blockage of the artery. It occurs when plaque intrudes into the lumen. If the plaque becomes large, it can reduce the flow of blood to critical areas.

The HeartSmart IMT Grade

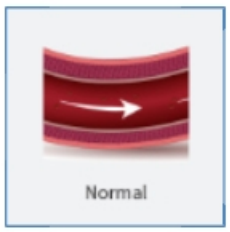
HeartSmart IMT uses a graphical illustration on the front page of the report to give a patient a “grade” of A through E based on comparing the actual IMT measurement to outcome data from a database of 40,000 patients with an average 6 year follow-up based on age and gender. The grade provides a ratio of increased risk for a coronary event based on the age and gender as outlined on the left.

Physician Signature: _____ Date: _____

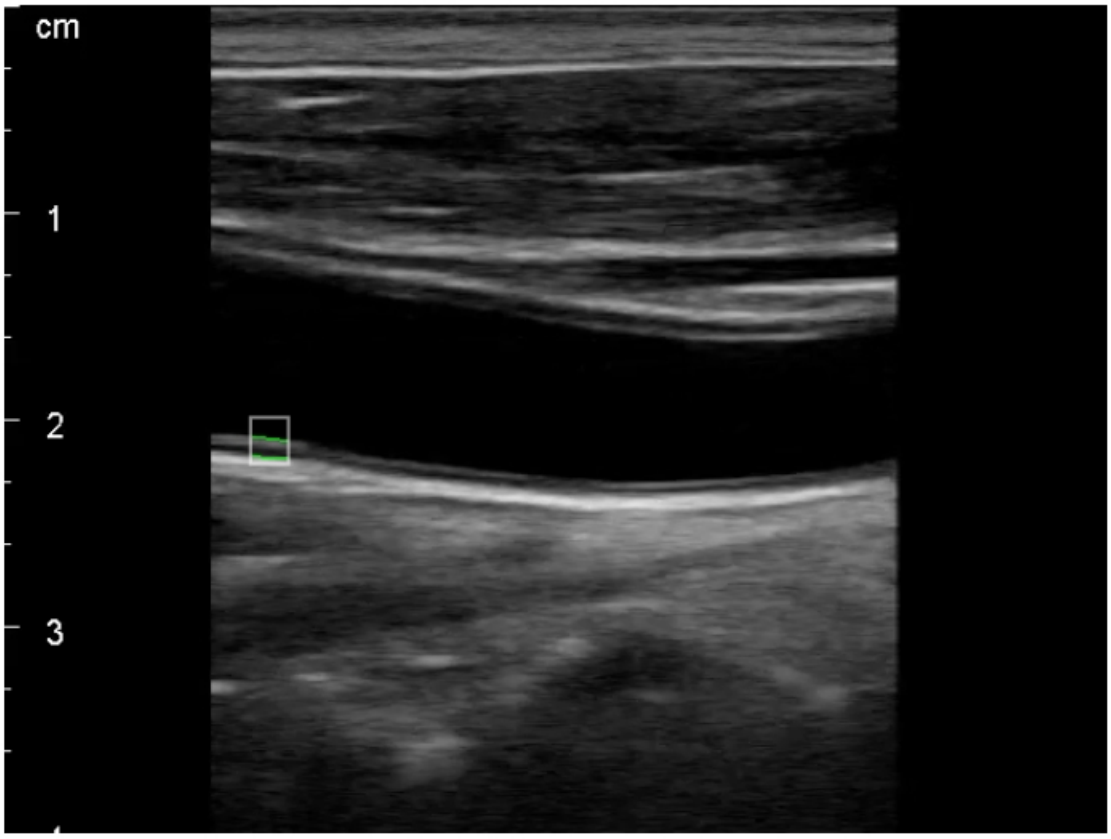
Intima-Media Thickness

LEFT SIDE

Average IMT



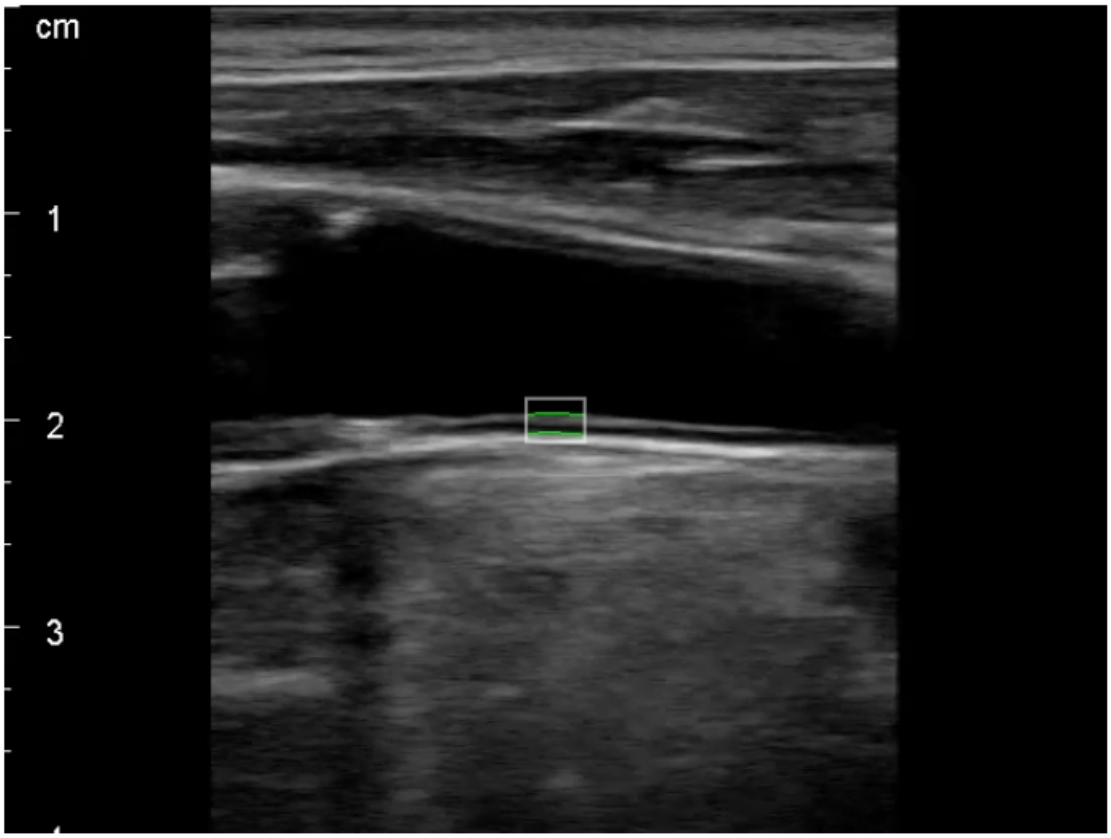
0.924 mm



RIGHT SIDE

Average IMT

0.959 mm



Plaque Assessment - Left Side

SAGITTAL VIEW

Plaque Size

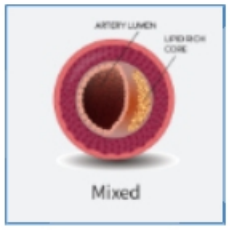
1.764 mm

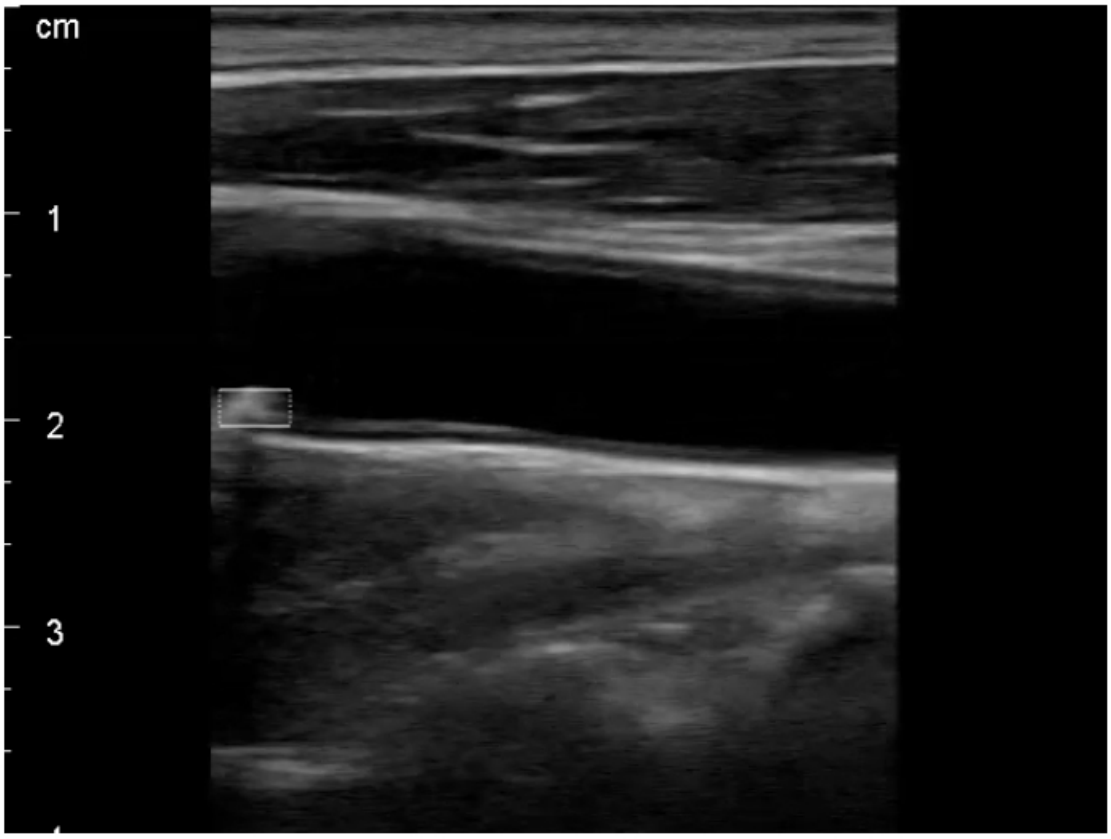
Sagittal View

Location

BULB

Plaque Character



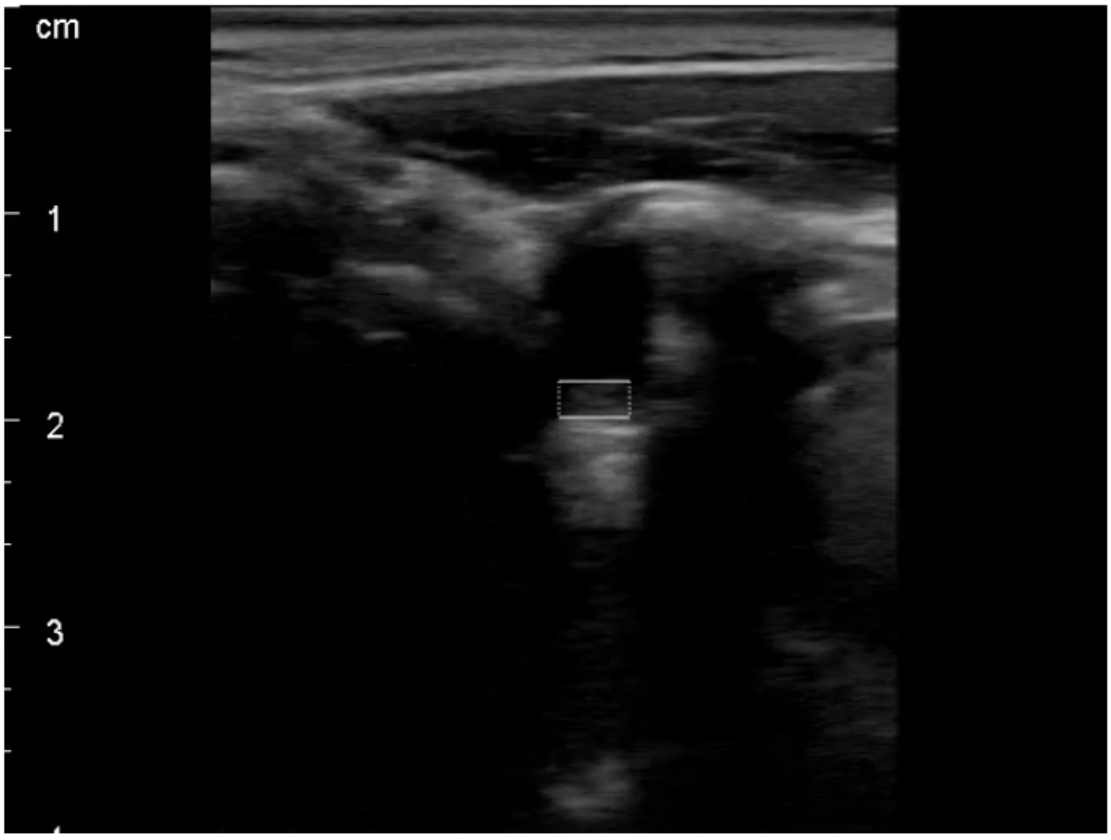


TRANSVERSE VIEW

Plaque Size

1.764 mm

Transverse View



Plaque Assessment - Right Side

SAGITTAL VIEW

Plaque Size

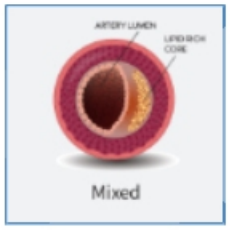
2.604 mm

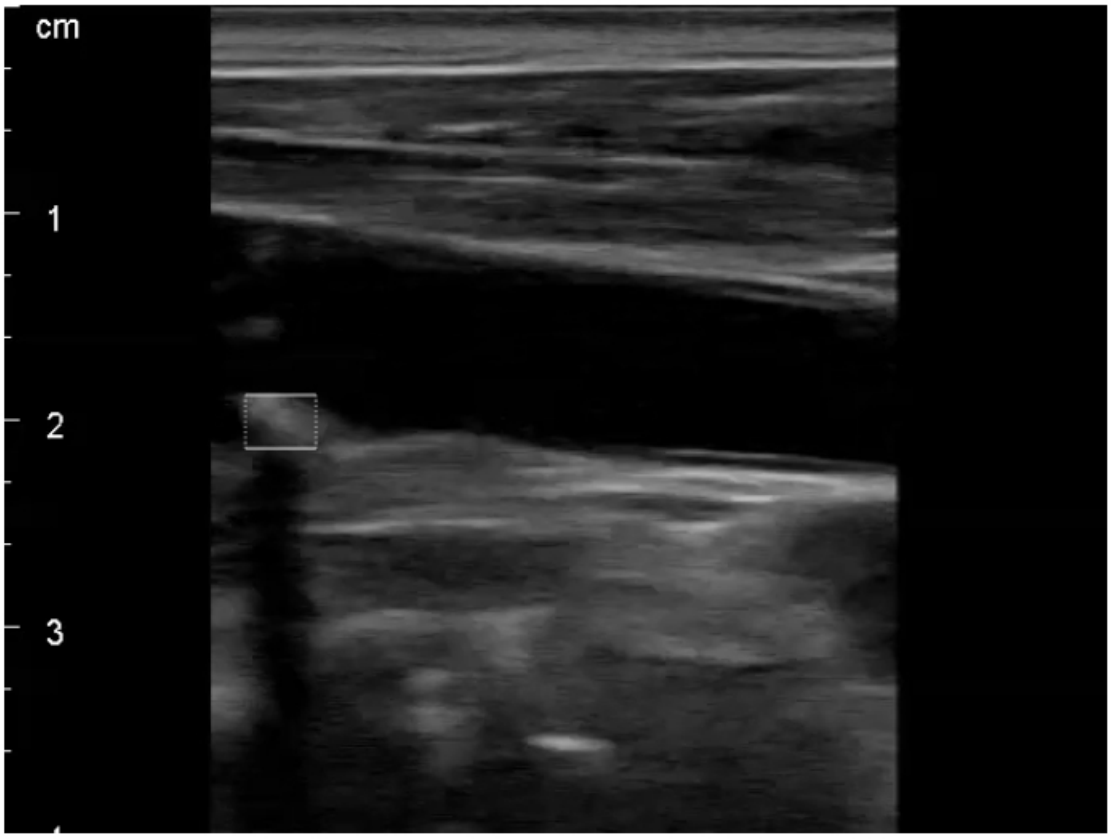
Sagittal View

Location

BULB

Plaque Character



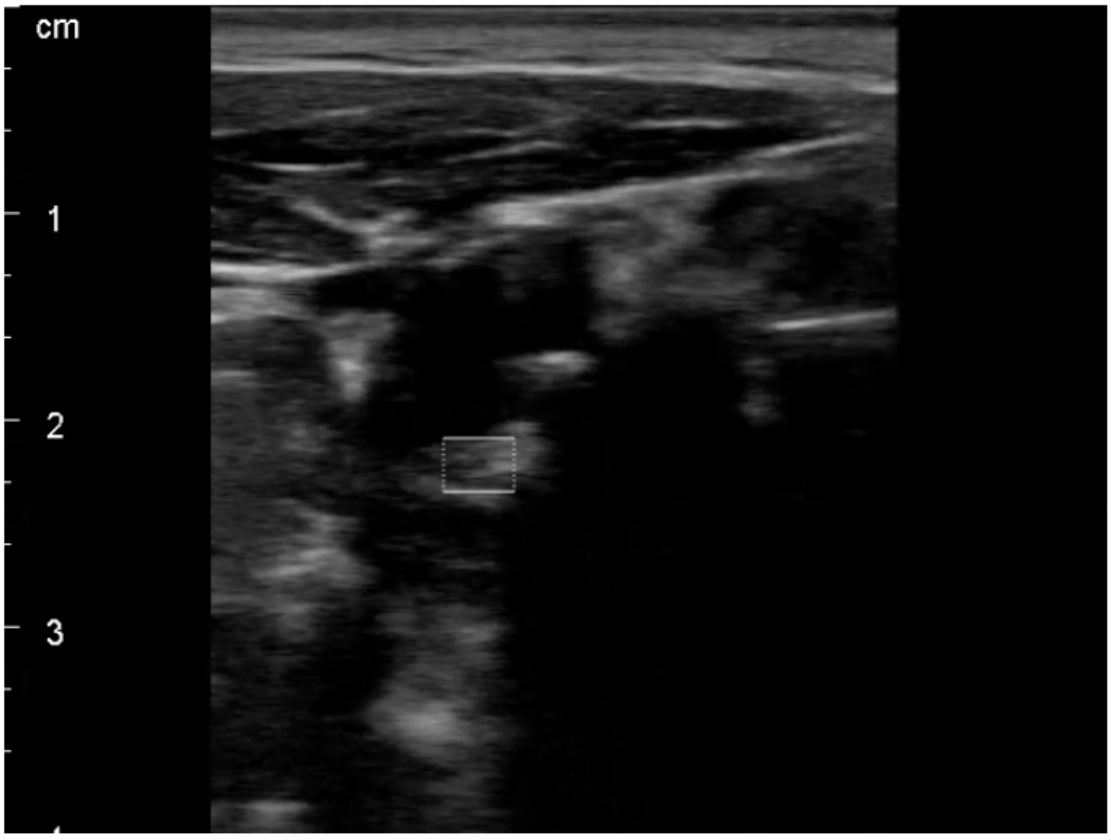


TRANSVERSE VIEW

Plaque Size

2.604 mm

Transverse View



Report Overview

The relationship of Intima-Media Thickness (IMT) to atherosclerosis is well established. Prevention and detection of coronary artery disease and stroke is complex. Normal or thin carotid IMT does not completely exclude coronary artery disease; it only indicates it is less likely. The results of this test should be interpreted in conjunction with your medical history, symptoms, known risk factors, and other test results.

Intima-Media Thickness

Carotid intima-media thickness (IMT) is a well-established noninvasive, safe method to provide information on subclinical atherosclerosis. Measures of IMT have been well demonstrated to be a surrogate marker for coronary artery disease and provide a more accurate assessment of CVD risk beyond using Framingham risk score categories.Advanced Carotid Ultrasound is used to diagnose the extent of carotid atherosclerotic disease. The test measures the thickness of the inner two layers of the carotid artery—the intima and media. Computerized measurements of many points along the artery wall are taken into account and the average is then calculated from these measurements. Studies show that about 70% of the time the disease process similarly aects the coronary arteries.Advanced Carotid Ultrasound alerts healthcare providers to the presence of pathology when patient may still be asymptomatic. Early detection may indicate the need for a more aggressive approach to managing risk factors associated with heart disease and stroke. Significant levels of disease may warrant further testing as determined by the physician.

Plaque Character

Plaque or lesions develop when atherosclerosis in the arterial wall intrudes into the lumen. Plaque may be soft, mixed or calcified. Calcified plaque is generally stable and poses less threat to the patient. Soft or mixed plaque is more vulnerable to inflammation and rupture and can release its contents into the bloodstream. This may trigger the formation of a blood clot that can block the blood flow through the artery leading to a heart attack or stroke. It is possible to have normal IMT and have lesions present.Advanced Carotid Ultrasound examines the carotid arteries in the transverse as well as sagittal plane to more accurately determine plaque location, extent, thickness, severity and texture, as well as to assess luminal narrowing. Plaque is irregular and may not be completely visualized in the sagittal view. Pathology may be seen on the side walls of the artery in the transverse view that may not be visible in the sagittal or longitudinal view which is used for IMT measurement.

Stenosis

Stenosis is the amount of blockage of the artery. It occurs when plaque or lesions intrude into the lumen. If the plaque becomes suiciently large, it can reduce the flow of blood to critical areas. The detection of significant plaque may warrant further testing to fully determine the extent of any blockage.