

## CARDIAC SCORING

### What Does the Test Mean?

The American Heart Association Expert Consensus Panel summarized the results as follows:

1. A negative test makes the presence of atherosclerotic plaque, including unstable plaque, unlikely.
2. A negative test is highly unlikely in the presence of significant obstructive coronary artery disease (CAD).
3. Negative tests occur in the majority of patients who have angiographically normal coronary arteries.
4. A negative test may be consistent with a low risk of cardiovascular event in the next 2 to 5 years.
5. A positive test confirms the presence of coronary atherosclerotic plaque.
6. The greater the amount of calcium, the greater the likelihood of occlusive CAD, but there is not a 1 to 1 relationship and findings may not be site specific.
7. The total amount of calcium correlates best with the total amount of atherosclerotic plaque, although the true "plaque burden" is underestimated.
8. A high calcium score may be consistent with a moderate to high risk of cardiovascular event within the next 2 to 5 years.

| <b>CAC Score</b> | <b>Interpretation</b>   |
|------------------|---|
| 0                | No identifiable plaque.<br>Very low CHD risk.                 |
| ≤ 10             | Minimal plaque burden.<br>Low CHD risk                        |
| 11-299           | Mild to moderate plaque burden.<br>Mild to moderate CHD risk. |
| 300-399          | Moderate to high plaque burden.<br>Moderate to high CHD risk. |
| > 400            | Extensive plaque burden.<br>Very high CHD risk.               |

**CHD = Coronary Heart Disease**