

Who else may benefit from a Heart Scan?

Some patients who have a Framingham Risk Score that is below 10% may also benefit from a Heart Scan. For instance, young patients can benefit if they have an immediate family member who had coronary artery disease before the age of 55. Scientific studies show that 95% of acute heart attack patients, even those as young as 41, would have been identified by Heart Scanning as being at risk of a heart attack.

Some patients who have a high Framingham Risk (>20%) may also be candidates for a Heart Scan. Recent studies have shown that CAC scoring may help your doctor reclassify you into a higher or lower risk category. For instance, some high-risk patients have side effects from statins (the medication most doctors prescribe to lower cholesterol) or may strongly prefer using alternative medicine. In these patients, a high CAC score may support the need of finding a statin that can be tolerated or persuade a reluctant patient of the need for aggressive treatment. On the other hand, a low CAC score may allow the patient to avoid medication. This is especially true in patients who have a CAC score of 0.

If you had a heart attack but have not had bypass grafting or a stent placed, a heart scan can help you determine how carefully your cholesterol needs to be managed. A high CAC score may help ensure that a patient makes dietary changes or takes medication.

Who should NOT have this exam?

People who had a heart attack and have a cardiac stent or have undergone bypass grafting will not really benefit from this exam. A Heart Scan is a screening test, so a patient who already had a heart attack and had surgery for coronary artery disease does not need screening to show that he/she has a risk of heart disease.

What preparation is there for a Heart Scan?

Almost none! We just request that you do not consume any caffeine for 12 hours prior to the examination.

What should I expect when I arrive? What will the scan be like?

You will be asked to change into a gown. Then specifics of the scan will be explained fully by your technologist, but it is very simple. You will lie on a comfortable, padded table and you will have electrodes placed on your chest for the machine to monitor your heart rate. You will be asked to lie very still during this scan and hold your breath for approximately 20 seconds. During the scan you may hear a very subtle humming noise, but you should not feel anything at all unusual. You may feel the table move from time to time during the exam. The Heart Scan is totally non-invasive. There are no injections.

We invite you to view our Heart Scan Demonstration video, which can be found at www.SLDCinfo.com. Under the "Patient Resources" menu, click on "Procedure Videos" to find our Heart Scan video.

How long will the exam take?

The Heart Scan itself takes a total of about 5 minutes. You can expect to be at the Center for about 15 minutes total.

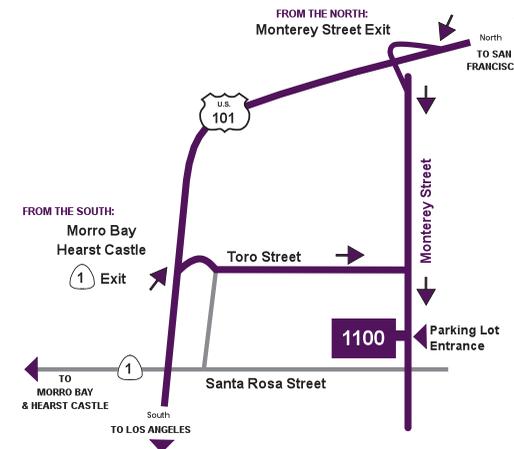
What happens after the exam?

After the exam, the technologist uses a specialized three-dimensional computer to analyze the amount of calcium in your blood vessels. The technologist tracks the known course of the blood vessels in your heart and analyzes the amount of calcium in each of these vessels. He/she then prepares a report for the radiologist to interpret and generate your CAC score. Your CAC score is also given a percentile score by comparing your score to those from other people who are the same gender and age. Those two numbers are used to help determine your risk of a future cardiac event. A copy of your report and explanation of your results will be mailed to you and sent to your physician.

Insurance

San Luis Diagnostic Center contracts with most major insurance companies and bills patients' insurance companies for them. Prior to an examination, we contact all patients for details regarding their insurance coverage. We ask patients to sign an assignment of benefits form so that payment comes directly to our center. Any amounts not covered by insurances, such as deductibles or co-insurance amounts, we collect at the time of service. For our patients' convenience, we accept personal checks and credit cards.

Specific insurance inquiries are handled by our business office at 805-542-9700. Typically, heart scans are not a covered benefit.



FROM THE NORTH: Hwy 101 South to Monterey St. exit. Turn left, over the freeway. Stay on Monterey Street 4 blocks. Driveway is on right before Santa Rosa Street. Park at street level, below the building.

FROM THE SOUTH: Hwy 101 North to Morro Bay/Hearst Castle Hwy 1 exit. Veer left on Toro, straight 5 blocks to Monterey St. Turn right on Monterey. Driveway is on right before Santa Rosa Street. Park at street level, below the building.

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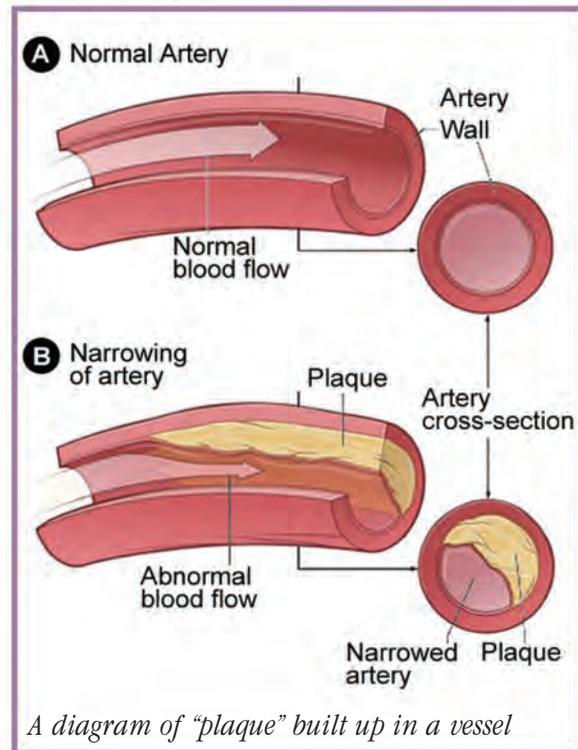
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What is a Heart Scan?

A Heart Scan is a simple imaging test that measures how much calcium a person has in his/her coronary arteries.

Why is it important to know if the coronary arteries have calcium?

The coronary arteries are the blood vessels that transport most of the blood supply and, as a result, most of the oxygen to the heart. Calcium in the arteries means there is “plaque” in those arteries. Plaque is like rust on the inside of a pipe. As rust builds up, less water can flow through the pipe. The higher the score on a Heart Scan, the more “rust” that person has in his/her “pipes” and the less blood and oxygen can get to the heart.



How does calcium get in the coronary arteries?

Calcium deposits in the coronary arteries begin with fat deposits along their walls. Fat deposits form as a result of inflammation. As this inflammation gets worse, more and more fat coats the artery wall. As this fat “matures,” it turns into calcium. This calcium is what we measure with a CT scanner on a Heart Scan.

Are Heart Scans safe?

Heart Scans are a very safe and very effective diagnostic procedure. These tests were first performed over 20 years ago, and the technique has been perfected using modern CT technology.

What do the results from a Heart Scan look like?

Heart Scan results are a number ranging from 0 to over 1000 and is frequently called a CAC (coronary artery calcium) score. You will also be given a percentile rank comparing your score to others of the same age and gender.

Does a CAC score give information about a person’s health besides the status of the blood vessels to the heart?

Yes! Studies show that the higher a person’s CAC score, the more likely he/she is to die from any cause. Figure 1 shows that the higher the calcium score, the greater the risk of dying relative to a person with a score of zero. A person with a CAC score of less than 10 has the same risk of dying as a person with a score of 0, but a person with score between 401 and 1000 has a 6.15 times greater risk of dying (from any reason) over the same period of time.

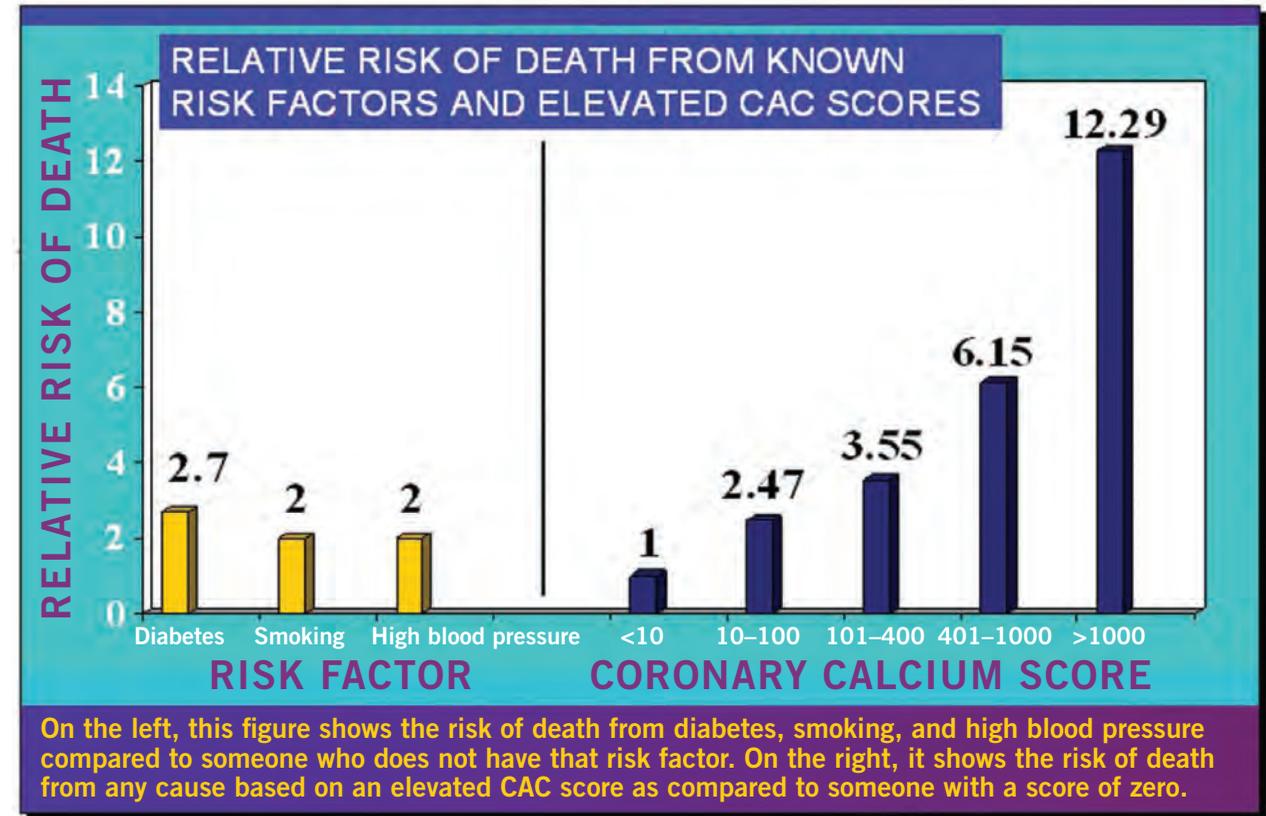


Figure 1

Who needs a Heart Scan?

Recommendations for Heart Scans are based on a scientific analysis called the “Framingham Risk Score,” or FRS. This scoring system incorporates age, gender and information regarding cholesterol levels, blood pressure, smoking habits and other heart attack risk factors.

What does the Framingham Risk Score show?

The Framingham Risk Score shows your chance of having a “cardiac event” in the next ten years. For example, if you have a FRS of 20%, that means that there is a 1 in 5 chance you will suffer a heart attack, suddenly drop dead from a heart attack, or begin having chest pain from a plugged artery in the heart in the next ten years.

Can I calculate my Framingham Risk to see if I might benefit from a Heart Scan?

Yes. To easily calculate your FRS, go to our website at www.SLDCinfo.com. Under the “Services” menu, click on “Lifesaver Screening,” scroll down to “Cardiac Calcium Scoring (Heart Screening)” and click on “Calculate Your Framingham Risk Score.” This will link you to a Framingham scoring sheet, endorsed by the American College of Cardiology and the American Heart Association. Or just drop by San Luis Diagnostic Center, and we’ll provide a score sheet to let you do this calculation manually. If the score sheet shows that you are in the 10-20% Framingham 10-year risk category, you may be a candidate for a Heart Scan and should discuss it with your physician, who can order the study if indicated.