

Vascular lab report
Assessed by: Emily Blake (CVS)

Name: [REDACTED]	Hospital No: [REDACTED]	Date of Exams: 14/03/2019
DOB: [REDACTED]	NHS No: [REDACTED]	Ip/Op: op
Referral: [REDACTED]	Hospital Site: UHL	

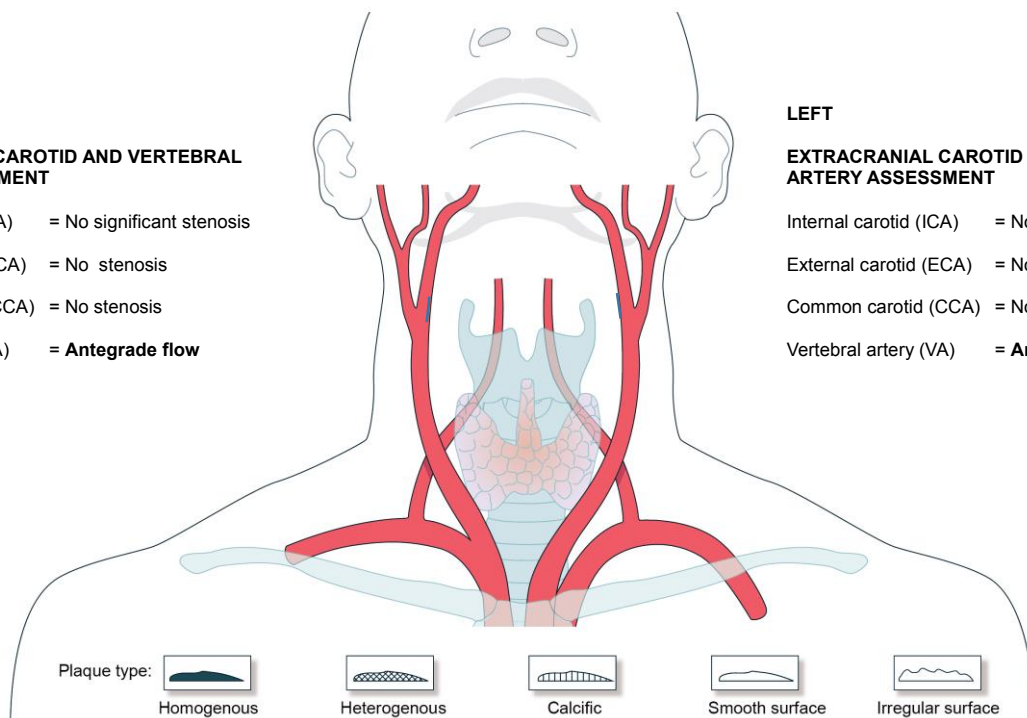
Clinical Indications: Presented with one episode of confusion ? reason.

Carotid and Vertebral Artery – Duplex scan
RIGHT
EXTRACRANIAL CAROTID AND VERTEBRAL ARTERY ASSESSMENT

Internal carotid (ICA) = No significant stenosis
 External carotid (ECA) = No stenosis
 Common carotid (CCA) = No stenosis
 Vertebral artery (VA) = **Antegrade flow**

LEFT
EXTRACRANIAL CAROTID AND VERTEBRAL ARTERY ASSESSMENT

Internal carotid (ICA) = No significant stenosis
 External carotid (ECA) = No stenosis
 Common carotid (CCA) = No stenosis
 Vertebral artery (VA) = **Antegrade flow**


Report:
RIGHT:

The Common (CCA), Internal (ICA) and External (ECA) carotid arteries are patent with no significant stenosis detected (<50%). Minimal amount of lightly echogenic atheroma noted within the bulb / ICA.

ICA Peak Systolic Velocity (PSV) = 0.66m/sec

ICA End Diastolic Velocity (EDV) = 0.25m/sec.

The Vertebral artery is patent with antegrade blood flow detected.

LEFT:

The Common (CCA), Internal (ICA) and External (ECA) carotid arteries are patent with no significant stenosis detected. Minimal amount of lightly echogenic atheroma noted within the bulb / ICA.

ICA Peak Systolic Velocity (PSV) = 0.55m/sec.

ICA End Diastolic Velocity (EDV) = 0.17m/sec.

The Vertebral artery is patent with antegrade blood flow detected.

Conclusion:

Patent carotid and vertebral arteries with no haemodynamically significant stenosis detected bilaterally.