

Vascular lab report
Assessed by: Emily Blake (CVS)

Nam	[REDACTED]	Ho	[REDACTED]	Date of Exams: 28/032019
DOB	[REDACTED]	NH	[REDACTED]	Ip/Op: OP
Refe	[REDACTED]	Hospital Site: UHL		

Clinical Indications: Cerebrovascular disease + infarct

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

Internal carotid (ICA) = No significant stenosis

External carotid (ECA) = No significant stenosis

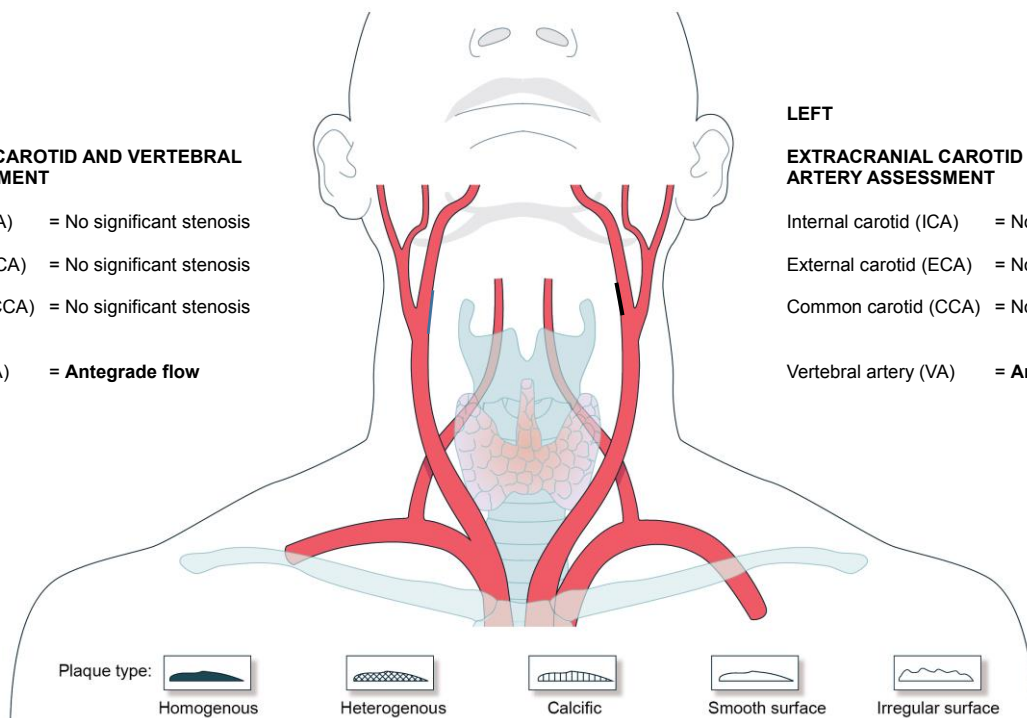
Common carotid (CCA) = No significant stenosis

Vertebral artery (VA) = **Antegrade flow**
LEFT
EXTRACRANIAL CAROTID AND VERTEBRAL ARTERY ASSESSMENT

Internal carotid (ICA) = No significant stenosis

External carotid (ECA) = No significant stenosis

Common carotid (CCA) = No significant 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. Minimal amount of mixed echogenicity atheroma detected within the Bulb / ICA (<50%).

ICA Peak Systolic Velocity (PSV) = 0.45m/sec

ICA End Diastolic Velocity (EDV) = 0.15m/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. Moderate amount of calcific atheroma (signal drop out due to heavy calcification) detected within the Bulb / ICA (<50%).

ICA Peak Systolic Velocity (PSV) = 0.42m/sec.

ICA End Diastolic Velocity (EDV) = 0.15m/sec.

The Vertebral artery is patent with antegrade blood flow detected.

Conclusion:

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