

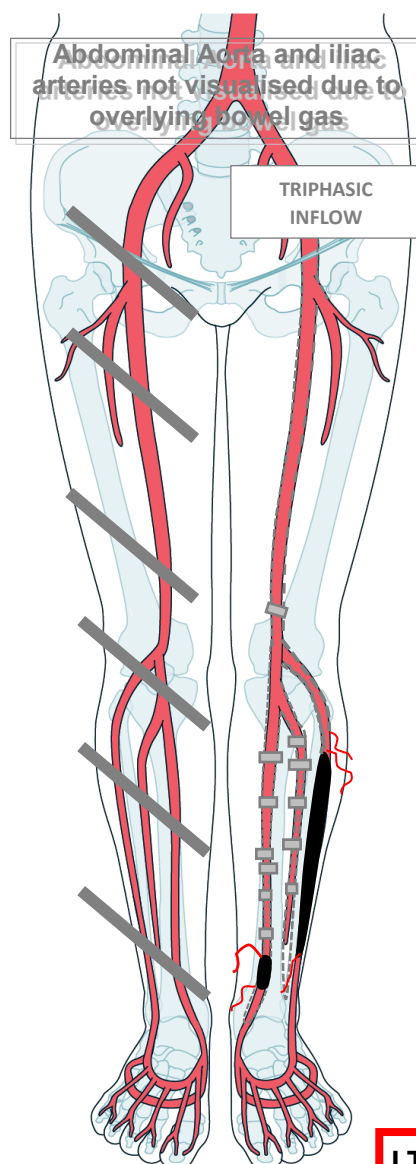
Vascular lab report

Assessed by: Emily Blake (CVS)

| | | |
|-------------------|----------------------|---------------------------|
| Name: [REDACTED] | Hospital: [REDACTED] | Date of Exams: 19/03/2019 |
| DOB: [REDACTED] | NHS No: [REDACTED] | Ip/Op: OP |
| Refer: [REDACTED] | Hospital Site: UHL | |

Clinical Indications: Insulin Dependent diabetic - ulcer to dorsum of 3rd toe, ? #/osteomyelitis

Lower Limb – Arterial Duplex [Both] – Diseased



LEFT LEG:

Diffuse medial wall calcification throughout – typical diabetic appearance

Distal EIA = Patent /
Triphasic (PSV = 0.95m/sec)

CFA = Patent / Triphasic
PFA = Patent/Triphasic
SFA = Patent/Triphasic
Pop = Patent / Triphasic
TPT = Patent/Triphasic

Run off: tibial disease

ATA = Occluded mid to distal
calf with reformation distally
PSV = 0.21m/sec

PTA = Short occlusion distally

Peroneal = Patent / Diffusely
calcified PSV = 0.57m/sec

**Interpretation of resting tow brachial
pressure indices (TBPI)**

| Resting TBPI | Severity of disease |
|--------------|-------------------------|
| >0.7 | Normal arterial supply |
| 0.64 – 0.7 | Borderline |
| <0.64 | Significant PAD present |

Left brachial systolic pressure: 150mmHg
Great toe pressure: 118mmHg

LTBPI = 0.78

Black colour fill indicates
stenosis or occlusion

Grey and white texture
indicates calcified plaque

Grey dotted line indicates
medial wall calcification

Grey box indicates acoustic
shadowing from calcification

Dashed green line
indicates stent in situ

Report:**Aorto-left iliac arteries:**

Distal EIA is patent with triphasic inflow to left leg.

Left leg:

CFA, PFA, SFA and POPA are all patent with diffuse wall calcification / atheroma. Triphasic waveforms detected. No significant stenosis.

TPT and PEROA are patent although heavily diseased (heavy calcification causing strong acoustic shadowing / imaging artefact noted throughout the PEROA).

PT occludes for a short segment 5cm AMM with reformation via collateral – monophasic flow followed into the foot.

AT occludes 15cm BK and reforms 10cm ALM – monophasic flow followed into the foot (DP patent).

Conclusion:

No significant FEM-POP.

Tibial disease:

Short PT occlusion

AT occlusion.
