

**Vascular lab report**
**Assessed by:** Emily Blake (CVS)

Name	Hospital	Date of Exams: 07/03/2019
DOB:	NHS No	Ip/Op: OP
Refer	Hospital Site: UHL	

Clinical Indications: : intermittent claudication 150m bilateral legs, right worse than left. night cramps, numbness in feet, last duplex scan 9/2017. booted with Tiwa for

**Lower Limb – Arterial Duplex**

**Abdominal Aorta diameter** = 1.4cm max AP  
Iliac arteries not visualised due to overlying bowel gas

**RIGHT LEG:**

EIA = Patent, triphasic flow  
CFA = Patent, Biphasic flow  
PFA = Patent, triphasic flow  
SFA = Patent, triphasic flow  
Pop = Patent, triphasic flow  
TPT = Patent, triphasic flow

**Run off:**

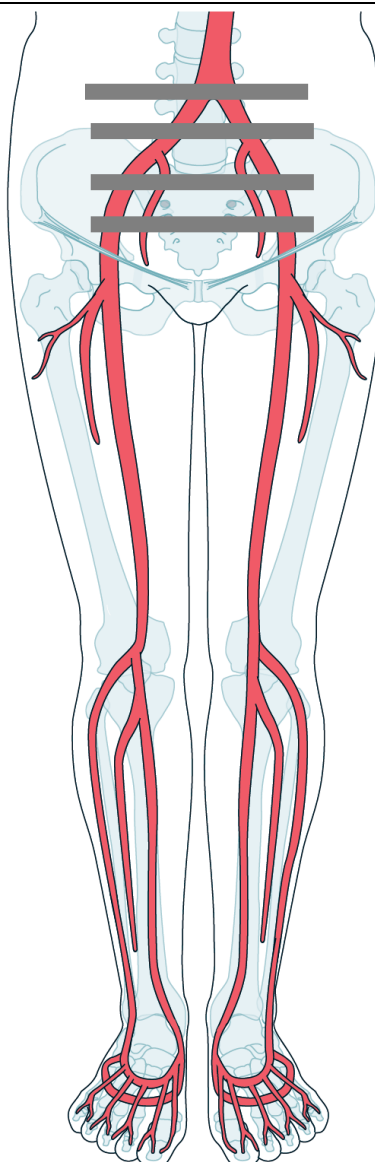
ATA = Patent, triphasic flow  
PTA = Patent, triphasic flow  
Peroneal = Patent biphasic

**LEFT LEG:**

EIA = Patent, triphasic flow  
CFA = Patent, triphasic flow  
PFA = Patent, triphasic flow  
SFA = Patent, triphasic flow  
Pop = Patent, triphasic flow  
TPT = Patent, triphasic flow

**Run off:**

ATA = Patent, tri/biphasic flow  
PTA = Patent, tri/biphasic flow  
Peroneal = Patent tri/biphasic


**RABPI = 1.1**
**LABPI = 1.1**


Black colour fill indicates  
occlusion or stenosis



Dashed green line  
indicates stent in situ

---

**Report:**

Right / Left leg:

CFA, PFA origin, SFA, POPA, TPOT, PTA, PEROA and ATA are all patent with no significant stenosis detected, bilaterally. Very minimal amount of atheroma noted.

Normal ABPI's >1.

---

**Conclusion:**

No significant PAD.

---