NHS Number: 4\*\*\*\*\*\*\*\*2  
Referring Doctor: SARAH SH HULIN  
Report Author: Janine Fletcher   
  
**19B\*\*\*\*\*\*8 27/02/2019 US Doppler lower limb veins Both**   
  
Clinical History: Recurrent right lower leg ulcer. Prominent varicose veins.  
  
**SUMMARY: SEVERE GSV REFLUX BILATERALLY, ONLY MINOR DEEP VEIN REFLUX   
  
\*\*also see diagram\*\***  
  
RIGHT LEG: The deep veins were patent with minor reflux in the CFV while the FV and popliteal vein were competent.  
  
Severe reflux was shown across the SFJ into the GSV and large medial varicose veins that divided from the GSV just below groin. These rejoin with the GSV below knee then divided further into numerous medial and anterior varicose veins in throughout the calf with no discernible GSV here. The GSV is straight in the thigh with a diameter of 5.6mm.  
  
The SSV was competent proximally then following medial branch connections becomes severely incompetent in the lower calf. This incompetent section is straight for more than 10cm with a diameter of 3.1mm  
  
LEFT LEG: The deep veins were patent and competent apart from long trickle reflux in the popliteal vein above knee.  
  
The GSV shows severe reflux from SFJ through the upper thigh before a large incompetent branch divides leaving the GSV competent. This large branch is straight from mid to lower thigh with a diameter of 3.8mm. It rejoins the GSV in the upper calf causing further reflux though more like long-trickle through this distal part.  
  
The SSV is mainly competent however there was a very short section of severe reflux distally following a medial connection.  
  
Janine Fletcher - Vascular scientist



