



Patient

NHS No

D.O.B.

Patient Ref

Reason

Varicose vein

Outcome

DVT negative, Widely patent , Normal

	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Widely Patent	Competent		
Profunda Vein	Widely Patent	Competent		
Superficial Femoral Vein	Widely Patent	Competent		
Popliteal Vein	Widely Patent	Competent		
Posterior Tibial Vein	Widely Patent	Competent		
Anterior Tibial Vein	Widely Patent	Competent		
Peroneal Vein	Widely Patent	Competent		
Soleal Vein				
Gastrocnemius	Patent	Competent		
Superficial Veins				
Saphenofemoral Junction	Patent	Competent		
L Saphenous Vein Above	Patent	Competent		
L Saphenous Vein Below	Patent	Competent		
Vein of Giacomini	Patent	Competent		
Saphenopopliteal Junction	Not Identified			
S Saphenous Vein	Patent	Competent		
Evidence of D.V.T.				
Above the knee	No			
Popliteal	No			
Below the knee	No			

Notes**RIGHT LOWER LIMB VENOUS DUPLEX ASSESSMENT**

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and a normal response on Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear widely patent and competent with no evidence of previous DVT.

Sapheno-femoral junction (SFJ) is competent. Long Saphenous vein (LSV) is competent throughout its length.

Sapheno-popliteal junction (SPJ) was not identified.

Short Saphenous vein (SSV) is competent and is continuous with a competent vein of Giacomini.

CONCLUSION: No evidence of right lower limb DVT or venous insufficiency detected from this scan.

Assessed by Lukasz Koprowski

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