



Reference

Accession

Patient

NHS No

D.O.B.

Patient Ref

Reason

Varicose vein

Outcome

DVT negative, Incompetence

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			Widely Patent	Competent
Superficial Veins				
Saphenofemoral Junction			Widely Patent	Incompetent
L Saphenous Vein Above			Widely Patent	Isolated Incompetence
L Saphenous Vein Below			Widely Patent	Isolated Incompetence
Vein of Giacomini			Widely Patent	Competent
Saphenopopliteal Junction			Not Identified	
S Saphenous Vein			Widely Patent	Competent
Evidence of D.V.T.				
Above the knee			No	
Popliteal			No	
Below the knee			No	

Notes

LEFT 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.

All measurements are proximal to the medial malleolus unless otherwise stated.

Sapheno-femoral junction (SFJ) is incompetent. Long saphenous vein (LSV) appears to be competent, except for a ~10cm section at the knee level, between two incompetent branches.

Anterior thigh vein (ATV) is incompetent and is linear for its initial ~8cm within the proximal thigh (AP calibre 0.7cm). An incompetent branch leaves the ATV in the proximal thigh at ~82cm, tracks inferiorly and forms

Assessed by Lukasz Koprowski

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the visible varicosities on the anterior aspect of the thigh. The main visible vein / varicosity bifurcates in the mid-distal thigh. The lateral tributary forms the minimally visible varicosities on the lateral aspect of the knee. The medial tributary conflues the LSV in the distal thigh (~52cm), rendering the LSV incompetent, as stated above.

An incompetent LSV branch leaves the vessel in the proximal calf (~42cm), forming the medial calf varicosities and rendering the LSV competent within the mid and distal calf.

Sapheno-popliteal junction (SPJ) was not identified. Short Saphenous vein (SSV) is competent and is continuous with a competent vein of Giacomini.

