

Reason Rest pain
Outcome Stenosis severe, Calcified

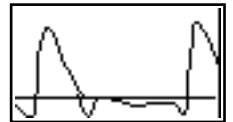
Right

130

1.00

Left**Brachial****Common Femoral**

Good

**High Thigh****Low Thigh****Popliteal**

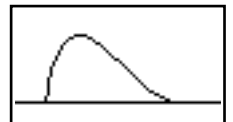
Good

**High Calf****Peroneal****Anterior Tibial**

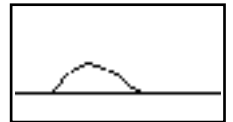
Slightly Reduced

220

1.69

**Posterior Tibial**

Reduced

**Dorsalis Pedis****Toe Pressure**

33

0.25

Post Exercise**Notes****LEFT LOWER LIMB ARTERIAL DUPLEX ASSESSMENT**

CFA - mild disease with good biphasic waveforms, PSV 205cm/s.

PFA - mild disease with good biphasic waveforms, PSV 220cm/s.

SFA - severe stenosis identified at ~78cm MM (~2.6cm from the origin), with velocities increasing from, PSV 85cm/s to 428cm/s. Disease extends for ~1cm. Moderate stenosis identified just distal (~73cm MM, with velocities increasing to, PSV 243cm/s. Disease extends for ~0.9cm. Mild/moderate disease identified in the mid vessel with slightly reduced triphasic waveforms, PSV 147-96cm/s. Severe, dense and calcified diffuse

Assessed by Rachel Johnson

Printed on 13/06/2019 at 11:00 am

Checked by

disease identified in the distal vessel, with an obscured region (?patency) and monophasic velocities, PSV 226cm/s.

POPA - mild disease with good monophasic waveforms, PSV 50cm/s. TPT appears calcified with evidence of two vessel run-off.

ATA - heavily calcified with slightly reduced monophasic waveforms, PSV 103cm/s.

PTA - heavily calcified with reduced monophasic waveforms, PSV 22cm/s.

Resting ABPI is falsely elevated, exceeding normal limits, indicating calcification of crural arteries.

Resting TBPI is reduced.

CONCLUSION: Evidence of significant SFA disease.

