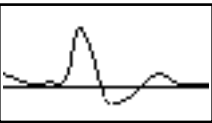
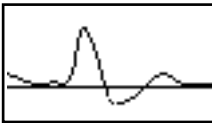
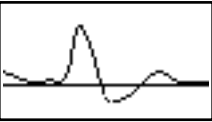
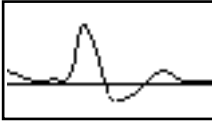


Reason Routine
Outcome Widely patent

Right	Left
<div>1101.00</div> <div></div> <div>Good</div>	<div>Brachial</div> <div></div> <div>Good</div>
<div></div> <div>Good</div>	<div>Common Femoral</div> <div></div> <div>Good</div>
	High Thigh
	Low Thigh
	Popliteal

Good

Notes

BILATERAL LOWER LIMB ARTERIAL DUPLEX ASSESSMENT

RIGHT

CFA - widely patent with good triphasic waveforms, PSV 127cm/s.

PFA - widely patent with good triphasic waveforms, PSV 66cm/s.

SFA - widely patent with good triphasic waveforms, PSV 93-77cm/s.

POPA - widely patent with good triphasic waveforms, PSV 63cm/s. TPT appears patent with evidence of two vessel run-off.

Assessed by Rachel Johnson

Printed on 13/06/2019 at 10:54 am

Checked by

ATA/PTA - widely patent with good mono/triphasic (hyperaemic) triphasic waveforms, PSV 93cm/s and 100cm/s respectively.

LEFT

CFA - widely patent with good triphasic waveforms, PSV 127cm/s.

PFA - widely patent with good triphasic waveforms, PSV 83cm/s.

SFA - widely patent with good triphasic waveforms, PSV 100-71cm/s.

POPA - widely patent with good triphasic waveforms, PSV 64cm/s. TPT appears patent with evidence of two vessel run-off.

ATA/PTA - widely patent with good mono/triphasic (hyperaemic) triphasic waveforms, PSV 79cm/s and 99cm/s respectively.

Bilateral resting ABPIs are within normal limits with no reduction post foot-flex exercise.

CONCLUSION: No evidence of any significant right or left lower limb arterial disease identified from this assessment.