

**Reason** Varicose vein  
**Outcome** Incompetence

Deep Veins	Right		Left	
	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	Not Identified			
Gastrocnemius	Patent			
<b>Superficial Veins</b>				
Saphenofemoral Junction	Patent	Incompetent		
L Saphenous Vein Above	Patent	Incompetent		
L Saphenous Vein Below	Patent	Incompetent		
Vein of Giacomini	Patent	Competent		
Saphenopopiteal Junction	Not Identified			
S Saphenous Vein	Patent	Competent		
<b>Evidence of D.V.T.</b>				
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 demonstrates 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.

SFJ is incompetent.

LSV is incompetent in the thigh and calf, leaving the fascia in the distal thigh and becomes superficial and slightly tortuous in the calf until ~28cm MM, where it rejoins the fascia.

Incompetent branches noted at 79cm MM, 39cm MM and 28cm MM, forming visible thigh and calf varicosities.

Assessed by Rachel Johnson

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Checked by

Transverse (AP) dimensions of LSV: Proximal thigh - 1cm, Mid thigh - 0.46cm, Distal thigh - 0.53cm, Proximal calf - 1.2cm, Mid calf - 0.48cm, Distal calf - 0.35cm

SPJ was not identified.

SSV is competent and is continuous with a competent vein of Giacomini.

