

Reason Varicose vein
Outcome Incompetence, Superficial thrombophlebitis

Deep Veins	Right		Left	
	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Profunda Vein	Widely Patent	Competent	Widely Patent	Competent
Superficial Femoral Vein	Widely Patent	Incompetent	Widely Patent	Competent
Popliteal Vein	Widely Patent	Incompetent	Widely Patent	Competent
Posterior Tibial Vein	Patent	Competent	Patent	Isolated Incompetence
Anterior Tibial Vein	Patent	Isolated Incompetence	Patent	Competent
Peroneal Vein	Patent	Competent	Patent	Competent
Soleal Vein	Patent		Patent	
Gastrocnemius	Patent		Patent	
Superficial Veins				
Saphenofemoral Junction	Patent	Competent	Patent	Incompetent
L Saphenous Vein Above	Patent	Competent	Areas of Thrombus	Old Thrombus
L Saphenous Vein Below	Patent	Incompetent	Patent	Incompetent
Vein of Giacomini	Patent		Patent	
Saphenopopliteal Junction	Patent	Incompetent		
S Saphenous Vein	Patent	Incompetent	Patent	Competent
Evidence of D.V.T.				
Above the knee	No		No	
Popliteal	No		No	
Below the knee	No		No	

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

RIGHT:

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised proximal deep veins appear widely patent, calf veins are patent with no evidence of previous DVT. Areas of incompetence in the superficial femoral vein and popliteal vein and proximal anterior tibial vein. All other deep veins appear competent.

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

Assessed by Danny Rimmer

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Sapheno-femoral junction (SFJ) is competent. Long Saphenous vein (LSV) is competent in the thigh. Incompetent branch communicates @22cm, causing LSV to be incompetent to ankle. Additional incompetent branch also communicates @17cm. Incompetent perforator with posterior tibial vein noted @13cm.

Transverse (AP) dimensions of LSV: Mid - calf -0.29 cm, Distal calf -0.29 cm

Sapheno-popliteal junction (SPJ) is patent and incompetent. Short saphenous vein (SSV) is tortuous immediately after the junction. SSV is incompetent to the distal calf, where incompetent branch identified @11cm. Competent branches which communicate with varicosities noted in the mid calf. SSV is then competent at the ankle.

Transverse (AP) dimensions of SSV: Proximal calf - 0.53cm, Mid - calf -0.79 cm, Distal calf -0.16 cm

LEFT:

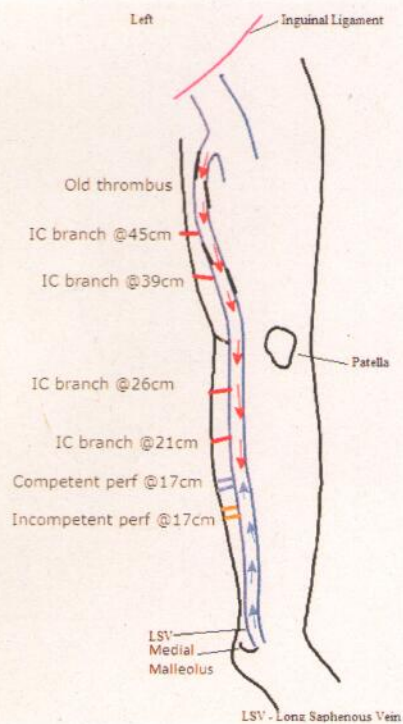
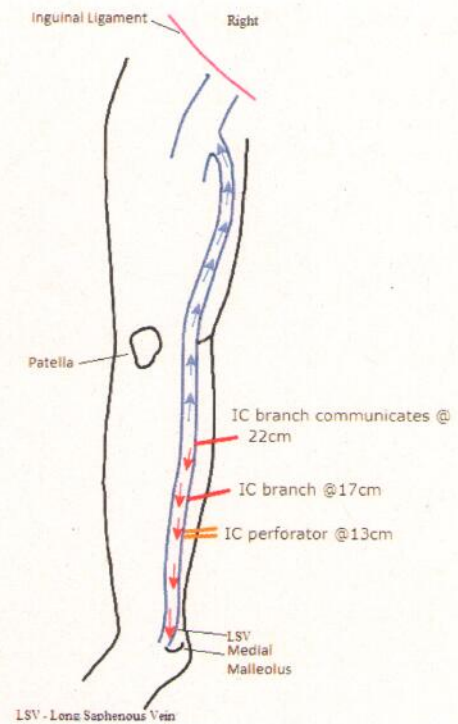
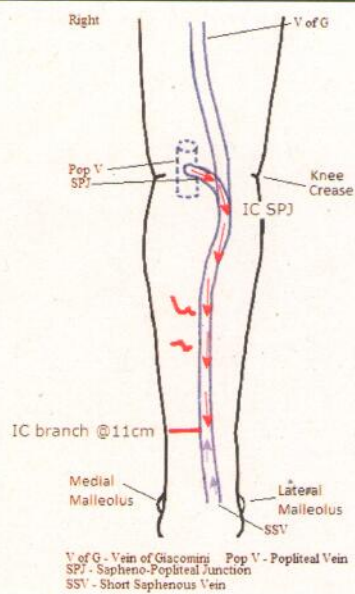
Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised proximal deep veins appear widely patent and competent with no evidence of previous DVT. Deep calf veins are patent. Isolated incompetence in the posterior tibial vein. All other deep calf veins are competent.

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

Sapheno-femoral junction (SFJ) is incompetent. Long Saphenous vein (LSV) is incompetent in the thigh with areas of old thrombus noted. Incompetent branches noted with small varicosities @45cm and again @39cm. LSV is patent and incompetent in the calf with incompetent branches noted @26cm and 21cm. There is a competent perforator vein @17cm - distal to this LSV is competent to ankle. There is an incompetent perforator vein noted @13cm.

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

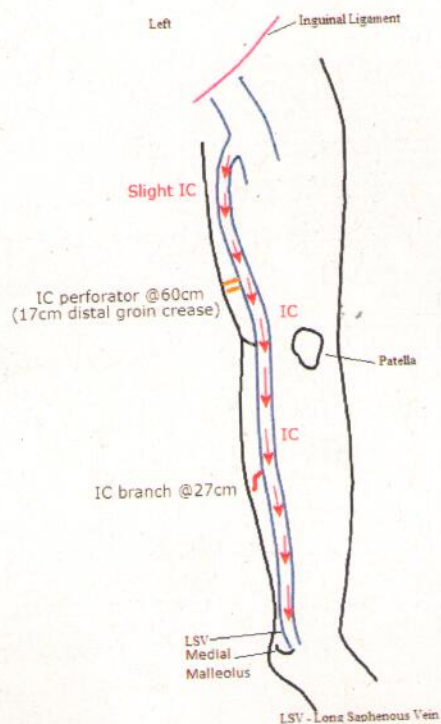
Transverse (AP) dimensions of LSV: Proximal thigh - 0.62cm, Mid- thigh -0.77cm, Distal thigh -0.51cm.
Proximal calf - 0.4cm, Mid - calf -0.35cm, Distal calf -0.21 cm



mid calf @27cm.

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

Transverse (AP) dimensions of LSV: Proximal thigh - 0.42cm, Mid- thigh - 0.76cm, Distal thigh - 0.75cm.
Proximal calf - 0.54 cm, Mid - calf -0.51cm, Distal calf - 0.44cm



Reason Varicose vein
Outcome Incompetence

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

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

*Difficult scan due to patient body habitus.

RIGHT:

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear 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) is linear and incompetent

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throughout the thigh to the proximal calf where an incompetent branch identified @36cm, which forms medial calf varicosities. LSV is then competent to mid calf - not identified mid-distal calf.

Transverse (AP) dimensions of LSV: Proximal thigh - 0.82cm, Mid- thigh -0.73cm, Distal thigh - 0.82cm.
Proximal calf - 0.57cm, Mid- Distal calf - Not identified

Sapheno-popliteal junction (SPJ) was not identified. Competent vein of Giacomini. Short Saphenous vein (SSV) is patent and competent in the prox-mid calf until varicosity communicates @20cm, causing the SSV to be incompetent to ankle, with another incompetent branch identified @10cm which supplies distal lateral calf varicosities.

Transverse (AP) dimensions of SSV: Proximal calf - 0.13cm, Mid - calf -0.29 cm, Distal calf - 0.59cm

LEFT:

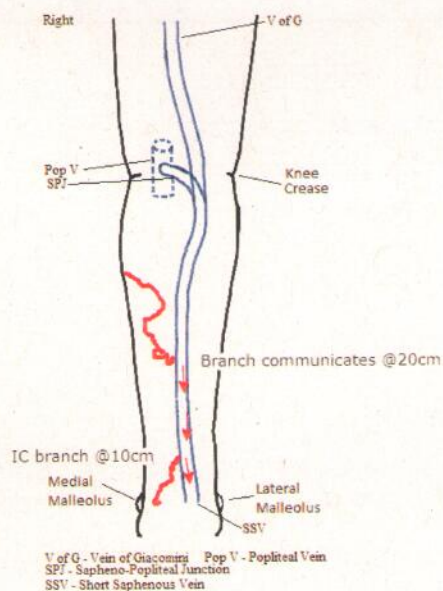
Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear patent and competent with no evidence of previous DVT.

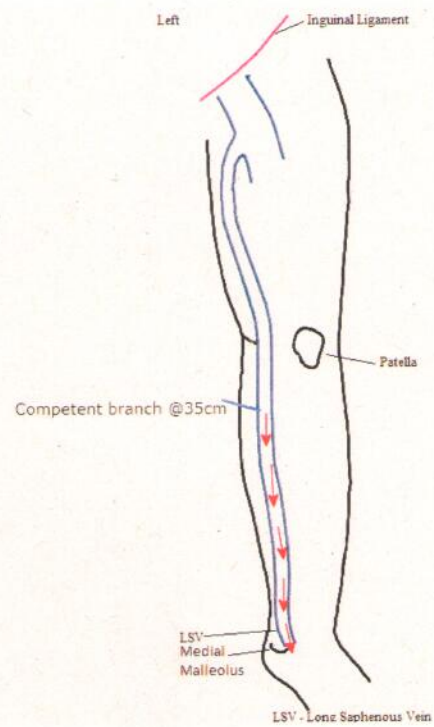
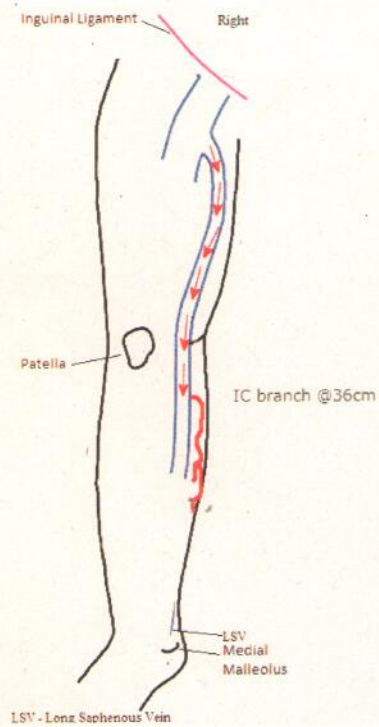
All measurements are proximal to the medial malleolus unless otherwise stated.

Sapheno-femoral junction (SFJ) is competent. Long Saphenous vein (LSV) is in competent in the thigh. A small competent branch communicates with LSV in the proximal calf @35cm, distal to this LSV is incompetent to ankle, however no visible varicosities identified.

Sapheno-popliteal junction (SPJ) is patent and competent. Short saphenous vein (SSV) is competent to ankle.

Transverse (AP) dimensions of LSV: Proximal thigh -0.42 cm, Mid- thigh -0.53 cm, Distal thigh - 0.51cm.
Proximal calf - 0.35 cm, Mid - calf -0.4 cm, Distal calf - 0.33 cm





Reason Varicose vein
Outcome Incompetence

	Right		Left	
	Patency	Competency	Patency	Competency
Deep Veins				
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Profunda Vein	Widely Patent	Competent	Widely Patent	Competent
Superficial Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Popliteal Vein	Widely Patent	Competent	Widely Patent	Competent
Posterior Tibial Vein	Patent	Incompetent	Patent	Competent
Anterior Tibial Vein	Patent	Competent	Patent	Competent
Peroneal Vein	Patent	Competent	Patent	Competent
Soleal Vein	Patent		Patent	Competent
Gastrocnemius	Patent	Competent	Patent	Competent
Superficial Veins				
Saphenofemoral Junction	Patent	Slight Incompetence	Patent	Competent
L Saphenous Vein Above	Patent	Isolated Incompetence	See notes	
L Saphenous Vein Below	See notes		See notes	
Vein of Giacomini	Patent	Competent	Patent	Competent
Saphenopopliteal Junction				
S Saphenous Vein			Patent	Competent
Evidence of D.V.T.				
Above the knee	No		No	
Popliteal	No		No	
Below the knee	No		No	

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

RIGHT:

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear widely patent with no evidence of previous DVT. 1 x posterior tibial vein identified as incompetent. All other deep veins appear competent.

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

SFJ is slightly incompetent. LSV is competent in the proximal thigh and not identified prox-mid thigh.

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Incompetent anterior thigh vein (ATV) identified which is patent for ~9cm (distal to groin crease) before supplying anterior thigh varicosities. Branch from ATV reforms the LSV @55cm. LSV is then incompetent for a short segment before incompetent perforator to SFV identified @49cm. LSV is then competent distal thigh.

LSV not identified prox-mid calf. Incompetent perforator to PTV identified @13cm. LSV is then patent and competent to ankle.

SPJ was not identified. SSV is competent and is continuous with a competent vein of Giacomini.

Transverse (AP) dimensions of ATV: Proximal thigh -0.63 cm, Prox/Mid- thigh -0.47 cm

LEFT:

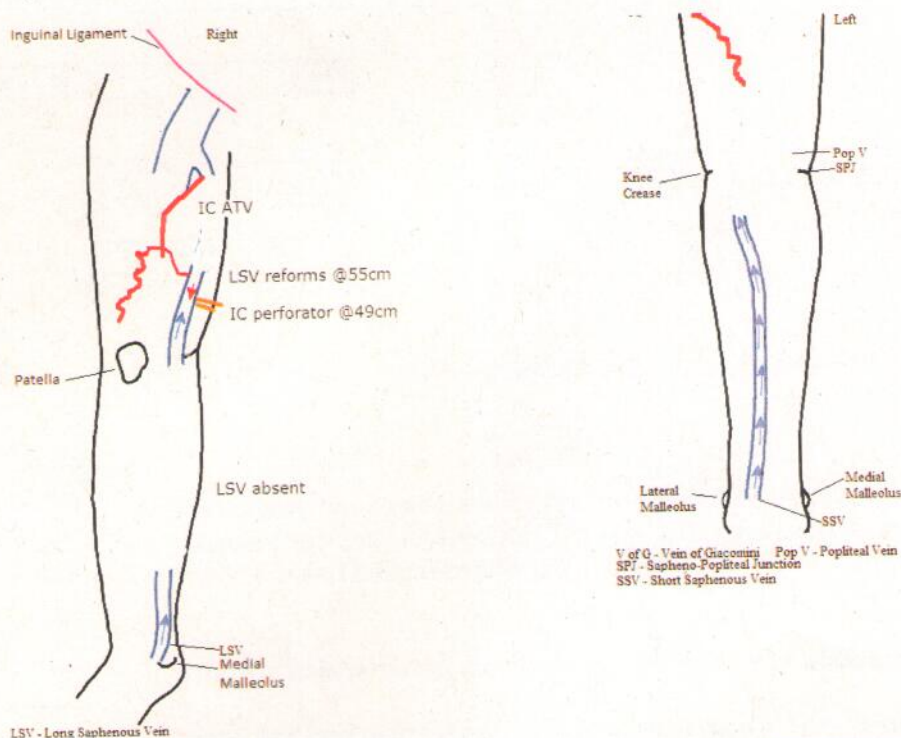
Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear widely patent and competent with no evidence of previous DVT.

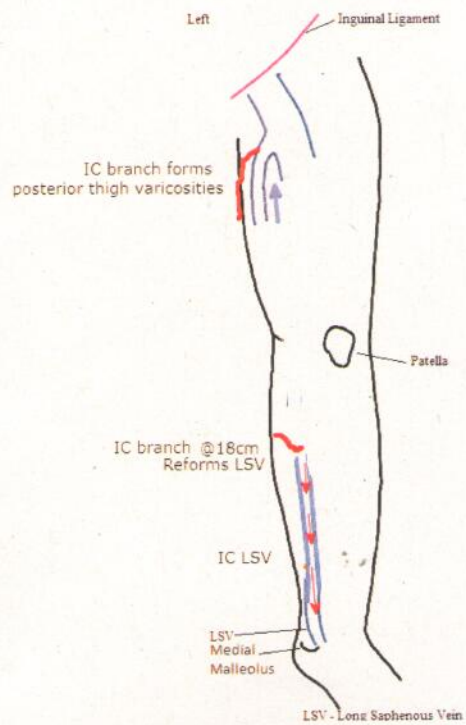
All measurements are proximal to the medial malleolus unless otherwise stated.

SFJ is competent. Incompetent medial branch identified which shares junction with the very proximal LSV and tracks postero-medial thigh, supplying varicosities in this area. LSV is competent in the proximal thigh. LSV not identified mid-distal thigh and proximal calf. Incompetent branch appears to reform the LSV in the mid calf @18cm. LSV is then incompetent to ankle.

SPJ and SSV are patent and competent.

Transverse (AP) dimensions of LSV: Mid calf - 0.22cm, Distal calf 0.27cm.





Reason Varicose vein
Outcome Incompetence

	Right		Left	
	Patency	Competency	Patency	Competency
Deep Veins				
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Patent	Competent	Patent	Competent
Profunda Vein	Patent	Competent	Patent	Competent
Superficial Femoral Vein	Patent	Competent	Patent	Competent
Popliteal Vein	Patent	Competent	Patent	Competent
Posterior Tibial Vein	Patent	Competent	Patent	Competent
Anterior Tibial Vein	Patent	Competent	Patent	Competent
Peroneal Vein	Patent	Competent	Patent	Competent
Soleal Vein	Patent		Patent	
Gastrocnemius	Patent		Patent	
Superficial Veins				
Saphenofemoral Junction	Patent	Competent	Patent	Competent
L Saphenous Vein Above	Patent	Isolated Incompetence	Patent	Competent
L Saphenous Vein Below	Patent	Competent	Patent	Competent
Vein of Giacomini	Patent	Competent	Patent	Competent
Saphenopopliteal Junction				
S Saphenous Vein	Patent	Competent	Patent	Competent
Evidence of D.V.T.				
Above the knee	No		No	
Popliteal	No		No	
Below the knee	No		No	

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

RIGHT:

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear 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 competent. Long Saphenous vein (LSV) becomes incompetent in the proximal thigh (3.8cm distal to SFJ) and is incompetent for a short segment before an incompetent branch

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(?anterior thigh vein (ATV)- tracks antero-medially along the thigh) identified @66cm which leaves the fascia @63cm and is fairly linear and incompetent to the proximal calf @23cm where it re-joins a competent LSV. LSV is small calibre and competent to ankle distal to this ATV in the thigh. No visible varicosities identified however.

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

Transverse (AP) dimensions of LSV: Proximal thigh -0.9cm

Transverse (AP) dimensions of ATV: Mid thigh - 0.52cm, Distal thigh - 0.49cm, Proximal calf - 0.43cm

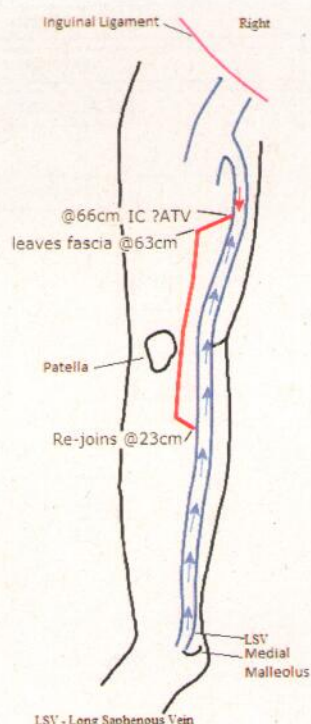
LEFT:

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear 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 competent. Long Saphenous vein (LSV) is competent along length. Sapheno-popliteal junction (SPJ) was not identified. Short Saphenous vein (SSV) is competent and is continuous with a competent vein of Giacomini.

Additional comment: Oedema in the legs bilaterally.



Assessed by Danny Rimmer

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Reason Varicose vein
Outcome 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	Patent			
Gastrocnemius	Patent			
Superficial Veins				
Saphenofemoral Junction	Not Identified			
L Saphenous Vein Above	Patent	Isolated Incompetence		
L Saphenous Vein Below	Patent	Isolated Incompetence		
Vein of Giacomini	Patent	Competent		
Saphenopopiteal Junction				
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 responds normally to a 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) not identified. Small neo-vascularisation in the groin reforms an incompetent anterior thigh vein (ATV - AP: 0.52cm - 0.43cm) which is patent and linear until mid thigh @62cm where it leaves the fascia and supplies anterior thigh varicosities. LSV reforms in the proximal thigh @66cm and is competent prox-mid thigh, becoming incompetent distal thigh until prox-mid calf. LSV is

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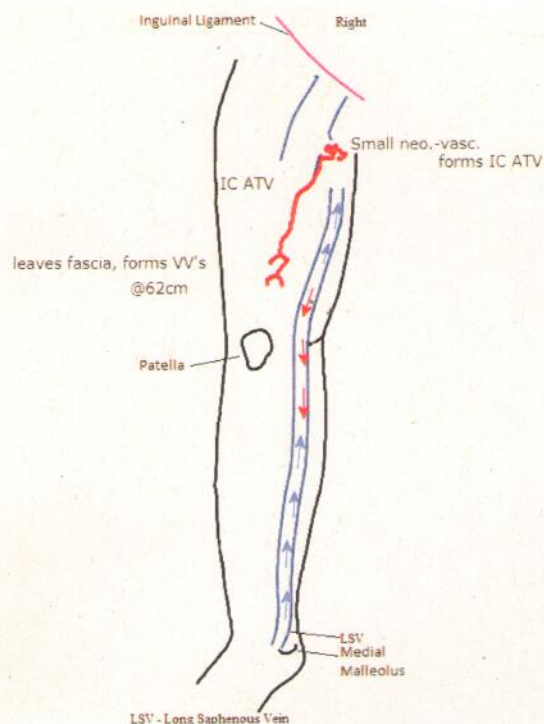
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competent again mid-distal calf. No significant varicosities arise from LSV.

Transverse (AP) dimensions of LSV: Proximal thigh - 0.27cm, Mid- thigh - 0.35cm, Distal thigh - 0.3cm.
Proximal calf - 0.3cm, Mid - calf - 0.25cm, Distal calf - 0.2cm

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

Additional comment: Baker's cyst identified in the right popliteal fossa (Measuring 1.4cm AP, ML).



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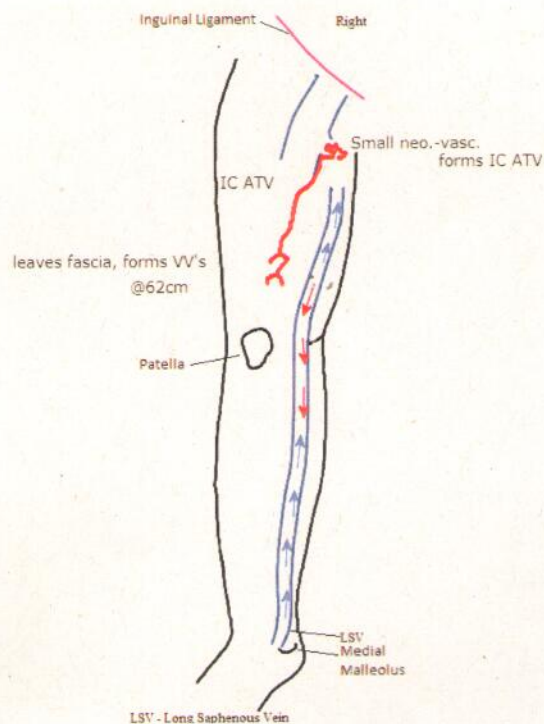
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competent again mid-distal calf. No significant varicosities arise from LSV.

Transverse (AP) dimensions of LSV: Proximal thigh - 0.27cm, Mid- thigh - 0.35cm, Distal thigh - 0.3cm.
Proximal calf - 0.3cm, Mid - calf - 0.25cm, Distal calf - 0.2cm

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

Additional comment: Baker's cyst identified in the right popliteal fossa (Measuring 1.4cm AP, ML).



Assessed by Danny Rimmer

Printed on 04/07/2019 at 12:29 pm

Checked by _____

Reason Varicose vein
Outcome Incompetence

	Right		Left	
	Patency	Competency	Patency	Competency
Deep Veins				
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			Patent	
Gastrocnemius			Patent	
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				
S Saphenous Vein			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 responds normally to a 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) is patent, linear and incompetent throughout the thigh until the proximal calf where an incompetent branch identified @28cm which supplies medial calf varicosities. LSV is then small calibre and competent to ankle.

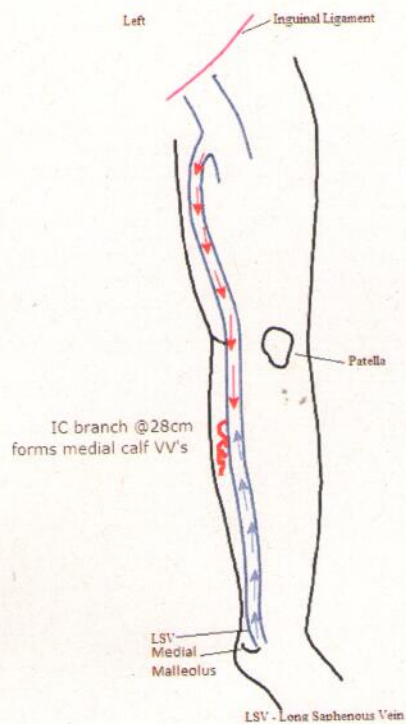
Assessed by Danny Rimmer

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

Transverse (AP) dimensions of LSV: Proximal thigh - 0.85cm, Mid- thigh -0.54 cm, Distal thigh -0.65 cm,
Proximal calf - 0.3cm, Mid calf - 0.21cm, Distal calf - 0.26cm.



Reason Varicose vein
Outcome Incompetence

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

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

RIGHT:

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear patent with no evidence of previous DVT. The superficial femoral vein and proximal popliteal vein appears incompetent. Isolated incompetence noted in the peroneal veins. All other deep veins appear competent.

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

SFJ is slightly incompetent due to communication with incompetent branch which tracks towards abdomen

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identified ?abdominal origin. This tortuous branch then forms varicosities in the proximal thigh and reforms an incompetent anterior thigh vein (ATV) @65cm (Dimensions ~0.46cm AP) which is patent and linear for 6cm before leaving fascia and becoming tortuous tracking laterally towards knee.

LSV is competent prox-mid thigh. Small calibre branch communicates @45cm, LSV is then incompetent in the distal thigh to ankle. Incompetent branch from LSV noted in the proximal and mid calf @26cm and 16cm respectively, which form small medial calf varicosities. Incompetent perforator from posterior tibial vein to varicosities noted @13cm.

Transverse (AP) dimensions of LSV: Proximal calf - 0.44cm, Mid - calf - 0.36cm, Distal calf - 0.32cm

SPJ was not identified. SSV is competent and is continuous with a competent vein of Giacomini. Large incompetent perforator from the proximal popliteal vein identified, situated 5cm proximal to the knee crease and 4cm lateral to the mid-line, which forms large visible varicosity which tracks to mid calf.

LEFT:

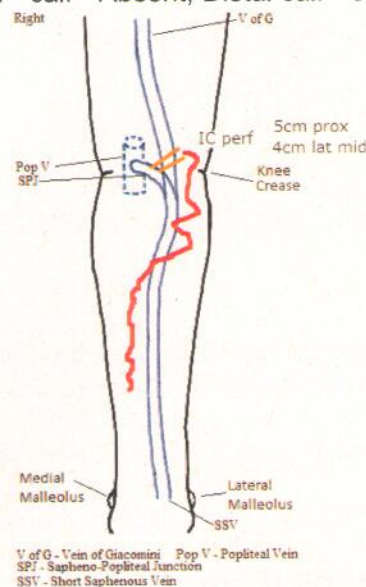
Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear patent with no evidence of previous DVT. Common femoral vein appears incompetent. The superficial femoral and popliteal veins appear incompetent. All deep calf veins appear competent.

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

SFJ appears competent. LSV is absent proximally. Tortuous incompetent branch arises from the SFJ and reforms the LSV in the proximal thigh @61cm (~15cm distal to groin crease). LSV is patent and incompetent throughout the thigh and proximal calf before a large branch @25cm which forms medial calf varicosities. LSV is then absent mid calf and reforms distally @11cm and is incompetent to ankle.

SPJ and SSV are patent and competent.

Transverse (AP) dimensions of LSV: Proximal thigh -0.59 cm, Mid- thigh -0.59 cm, Distal thigh -0.56 cm.
Proximal calf - 0.47cm, Mid - calf - Absent, Distal calf - 0.26cm



identified ?abdominal origin. This tortuous branch then forms varicosities in the proximal thigh and reforms an incompetent anterior thigh vein (ATV) @65cm (Dimensions ~0.46cm AP) which is patent and linear for 6cm before leaving fascia and becoming tortuous tracking laterally towards knee. LSV is competent prox-mid thigh. Small calibre branch communicates @45cm, LSV is then incompetent in the distal thigh to ankle. Incompetent branch from LSV noted in the proximal and mid calf @26cm and 16cm respectively, which form small medial calf varicosities. Incompetent perforator from posterior tibial vein to varicosities noted @13cm.

Transverse (AP) dimensions of LSV: Proximal calf - 0.44cm, Mid - calf - 0.36cm, Distal calf - 0.32cm

SPJ was not identified. SSV is competent and is continuous with a competent vein of Giacomini. Large incompetent perforator from the proximal popliteal vein identified, situated 5cm proximal to the knee crease and 4cm lateral to the mid-line, which forms large visible varicosity which tracks to mid calf.

LEFT:

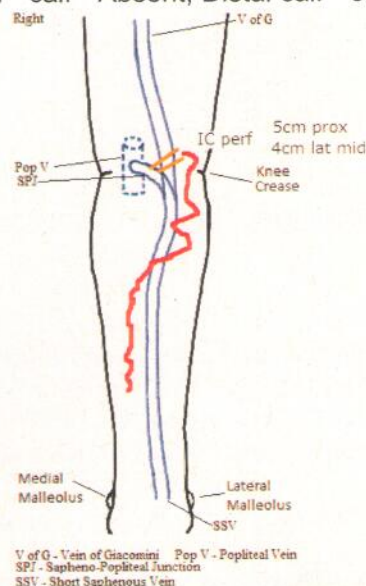
Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear patent with no evidence of previous DVT. Common femoral vein appears incompetent. The superficial femoral and popliteal veins appear incompetent. All deep calf veins appear competent.

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

SFJ appears competent. LSV is absent proximally. Tortuous incompetent branch arises from the SFJ and reforms the LSV in the proximal thigh @61cm (~15cm distal to groin crease). LSV is patent and incompetent throughout the thigh and proximal calf before a large branch @25cm which forms medial calf varicosities. LSV is then absent mid calf and reforms distally @11cm and is incompetent to ankle.

SPJ and SSV are patent and competent.

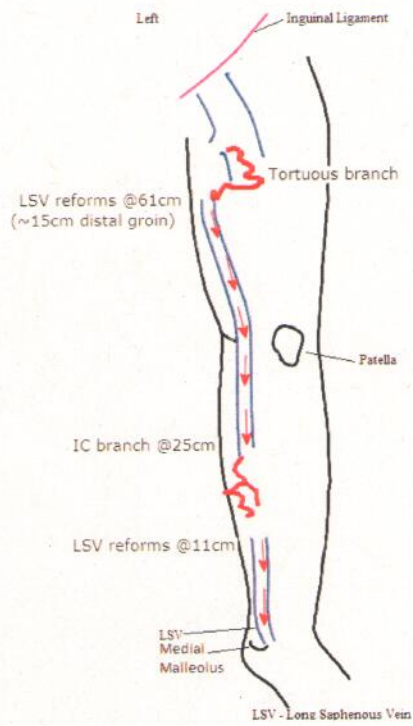
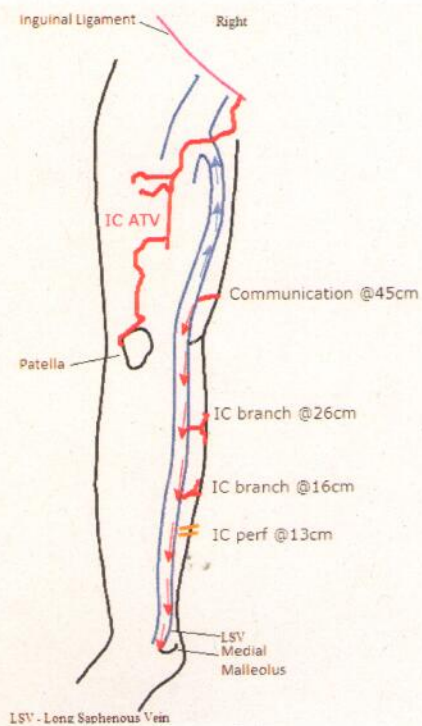
Transverse (AP) dimensions of LSV: Proximal thigh -0.59 cm, Mid- thigh -0.59 cm, Distal thigh -0.56 cm.
Proximal calf - 0.47cm, Mid - calf - Absent, Distal calf - 0.26cm



Assessed by Danny Rimmer

Printed on 04/07/2019 at 12:33 pm

Checked by _____



Reason Varicose vein
Outcome Widely patent , Incompetence

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

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

*Scanned using portable CX-50 machine during clinic.

RIGHT:

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear widely patent with no evidence of previous DVT. 1 X incompetent gastrocnemius vein identified. All other deep veins appear competent.

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

Assessed by Danny Rimmer

Printed on 04/07/2019 at 12:37 pm

Checked by _____

Sapheno-femoral junction (SFJ) is competent. Long Saphenous vein (LSV) becomes incompetent in the proximal thigh @66cm (12cm distal to groin crease) and remains incompetent to ankle. Competent perforator vein identified in the mid thigh @50cm. 2 x branches which appear to have syphon-type flow communicate with the LSV in the proximal calf @29cm and 27cm. Incompetent branches which form medial calf varicosities identified @24cm and 19cm and further varices around the ankle arise from incompetent branch off LSV @9cm.

Sapheno-popliteal junction (SPJ) was not identified. Competent vein of Giacomini. There is a tortuous and incompetent perforator vein which arises from a junction between an incompetent gastrocnemius vein and a competent popliteal vein which forms the main varicosities in the calf and situated 3cm proximal to the knee crease and 3cm lateral to the mid-line. The SSV itself is competent in the prox-mid calf until incompetent branch communicates @19cm causing isolated incompetence in the mid-distal calf.

Transverse (AP) dimensions of LSV: Proximal thigh - 0.49cm, Mid- thigh -0.35 cm, Distal thigh - 0.56cm.
Proximal calf - 0.56cm, Mid - calf -0.51cm, Distal calf - 0.28cm

Transverse (AP) dimensions of SSV: Proximal calf - 0.27cm, Mid - calf -0.3 cm, Distal calf - 0.23 cm

LEFT:

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear widely patent with no evidence of previous DVT. Isolated incompetence noted in the proximal common femoral vein, the superficial femoral vein along length. The popliteal and posterior tibial veins are incompetent. All other deep veins appear competent.

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

Sapheno-femoral junction (SFJ) is competent. Long Saphenous vein (LSV) is in competent in the prox-mid thigh (not identified mid thigh ?previously stripped). There is an incompetent perforator vein in the distal thigh @45cm which reforms an incompetent LSV. There is then an incompetent branch in the proximal calf @30cm which forms calf varicosities. LSV is then competent until varicosities communicate in the mid/distal calf @12cm and again @7cm. There is a large and incompetent perforator vein with the posterior tibial vein which forms medial calf varicosities @10cm. LSV remains incompetent to ankle distal to these branches.

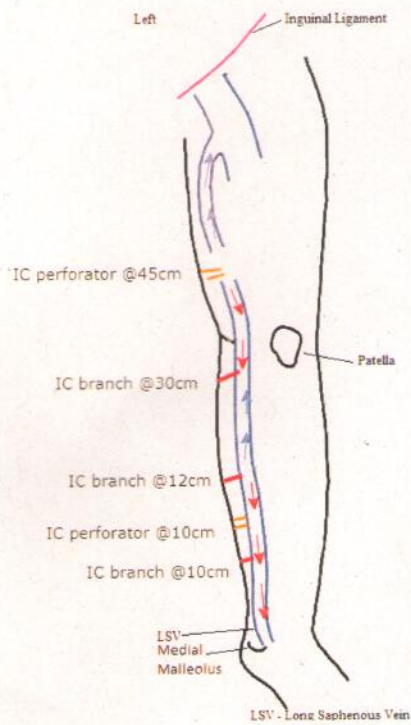
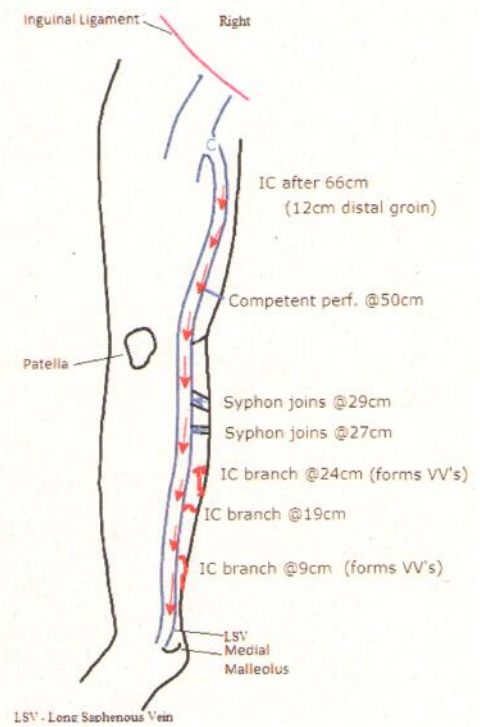
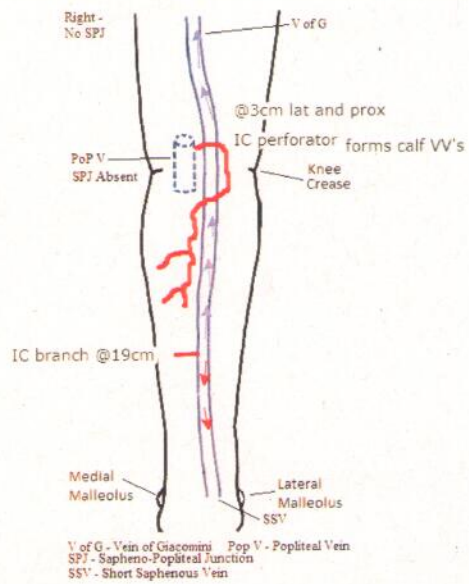
Sapheno-popliteal junction (SPJ) was not identified. Short Saphenous vein (SSV) is competent and is continuous with a competent vein of Giacomini.

Transverse (AP) dimensions of LSV: Proximal thigh - cm, Mid- thigh - cm, Distal thigh - 0.6cm.
Proximal calf - 0.3cm, Mid - calf -0.28cm, Distal calf - 0.28 cm

Assessed by Danny Rimmer

Printed on 04/07/2019 at 12:37 pm

Checked by _____



Assessed by Danny Rimmer
Printed on 04/07/2019 at 12:37 pm

Checked by _____

Reason Varicose vein
Outcome Incompetence

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

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

RIGHT:

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins proximal to and including the popliteal vein appear widely patent and competent with no evidence of previous DVT. Calf veins were difficult to visualise due to depth/oedema, however appear patent and competent with no evidence of previous DVT.

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

Assessed by Danny Rimmer

Printed on 03/07/2019 at 3:16 pm

Checked by



Sapheno-femoral junction (SFJ) is competent. Long Saphenous vein (LSV) becomes incompetent in the proximal thigh (distal to pre-terminal valve) and is linear and incompetent to the level of knee crease (@33cm) where incompetent branch noted which supplies varicosities in the proximal posterior calf. LSV is then competent in the proximal calf (not identified in mid calf) and patent and competent distally.

Transverse (AP) dimensions of LSV: Proximal thigh - 0.62cm, Mid- thigh -0.48cm, Distal thigh -0.55cm.

Sapheno-popliteal junction (SPJ) is patent and competent. Short Saphenous vein (SSV) is patent and competent along length.

LEFT:

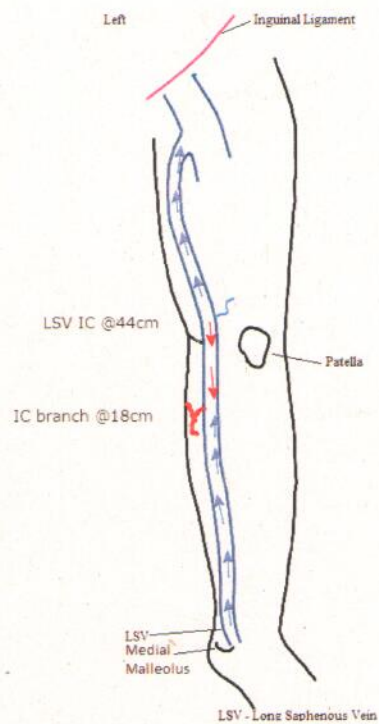
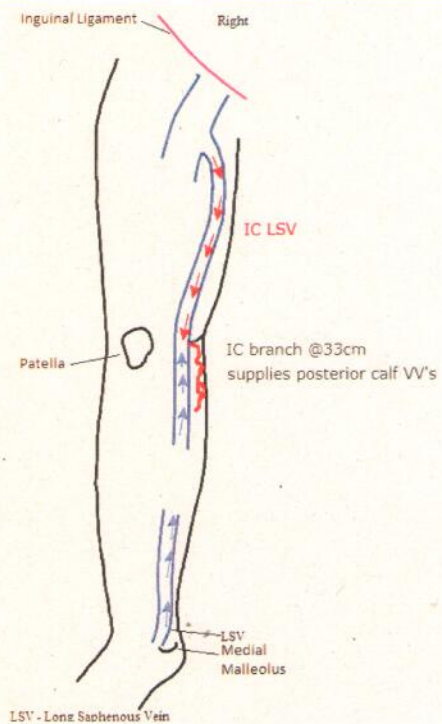
Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins proximal to and including the popliteal vein appear widely patent and competent with no evidence of previous DVT. Calf veins were difficult to visualise due to depth/oedema, however appear 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 competent. Long Saphenous vein (LSV) is linear and competent to the distal thigh; becomes incompetent at level of small competent branch @44cm; and is then incompetent to the prox/mid calf before an incompetent branch noted @18cm which supplies small calibre varicosities. LSV is then patent and competent distal to this to ankle.

Transverse (AP) dimensions of LSV: Proximal thigh - 0.49cm, Mid- thigh -0.48cm, Distal thigh -0.64cm; Proximal calf - 0.48cm, Mid calf - 0.38cm, Distal calf - 0.39cm.

Sapheno-popliteal junction (SPJ) is patent and competent. Short Saphenous vein (SSV) is patent and competent along length.



Assessed by Danny Rimmer
 Printed on 03/07/2019 at 3:16 pm

Checked by

Reason Varicose vein
Outcome Incompetence

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

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

RIGHT:

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 proximal deep veins appear widely patent and competent with no evidence of previous DVT. Deep calf veins were difficult to visualise due to depth/oedema but appear patent and competent.

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

RIGHT

Assessed by Danny Rimmer

Printed on 02/07/2019 at 12:10 pm

Checked by _____

Sapheno-femoral junction (SFJ) not identified ?previously stripped. Small calibre, highly tortuous ?anterior thigh vein (AP 0.5cm) (no junction with common femoral vein) identified as incompetent appears to supply varicosities in the proximal thigh. Long Saphenous vein (LSV) appears to reform in the distal thigh and is competent until the mid calf where an incompetent branch communicates @24cm, causing LSV to be incompetent to ankle with an additional incompetent branch @15cm which supplies medial varicosities around ankle.

Transverse (AP) dimensions of LSV:

Mid calf - 0.3cm, Distal calf - 0.25cm.

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

LEFT:

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 proximal deep veins appear widely patent and competent with no evidence of previous DVT. Deep calf veins were difficult to visualise due to depth/oedema but appear patent and competent.

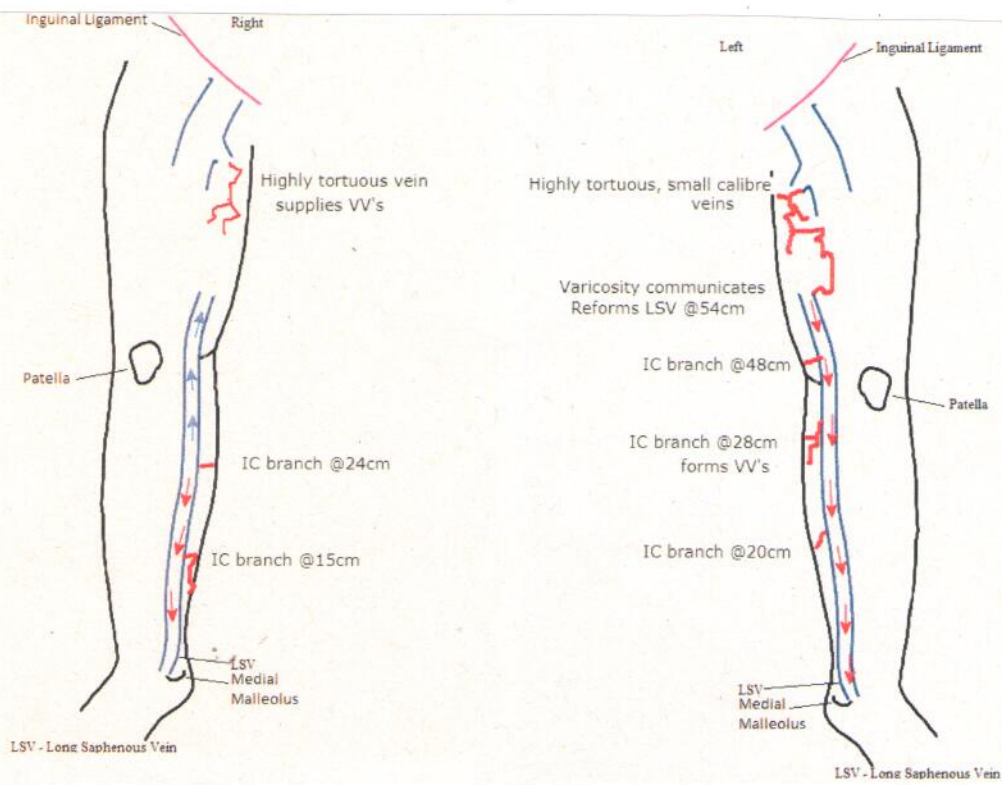
All measurements are proximal to the medial malleolus unless otherwise stated.

Sapheno-femoral junction (SFJ) not identified ?previously stripped. Highly tortuous ?anterior thigh vein which has junction with common femoral vein, before additional neo-vascularisation identified in the left groin forms varicosities in the proximal thigh. There is then an incompetent branch which reforms a linear and incompetent LSV in the mid thigh @54cm causing LSV to be incompetent to ankle. Incompetent branches noted mid-distal thigh @48cm and in the proximal calf @28cm (forms medial calf varicosities) and in mid calf @20cm.

Transverse (AP) dimensions of LSV:

Proximal thigh- Not identified, Mid thigh -0.34cm, Distal thigh -0.37cm, Proximal calf- 0.29cm, Mid calf -0.3cm, Distal calf -0.29cm.

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



Assessed by Danny Rimmer

Printed on 02/07/2019 at 12:10 pm

Checked by _____

Reason varicose vein
Outcome Widely patent , 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	Patent			
Gastrocnemius	Patent			
Superficial Veins				
Saphenofemoral Junction	Patent	Competent		
L Saphenous Vein Above	Patent	Competent		
L Saphenous Vein Below	Patent	Competent		
Vein of Giacomini	Not Identified			
Saphenopopliteal Junction	Patent	Competent		
S Saphenous Vein	Patent	Incompetent		
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.

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

Sapheno-femoral junction (SFJ) is competent. Long Saphenous vein (LSV) is competent along length. Sapheno-popliteal junction (SPJ) is patent and competent. Short Saphenous vein (SSV) becomes incompetent ~3.5cm distal to the SPJ and remains incompetent to this distal calf. 2 incompetent branches noted @16cm and 13cm which supply distal calf varicosities. SSV is then competent distally. (SPJ is

Assessed by Danny Rimmer

Printed on 02/07/2019 at 12:16 pm

Checked by _____

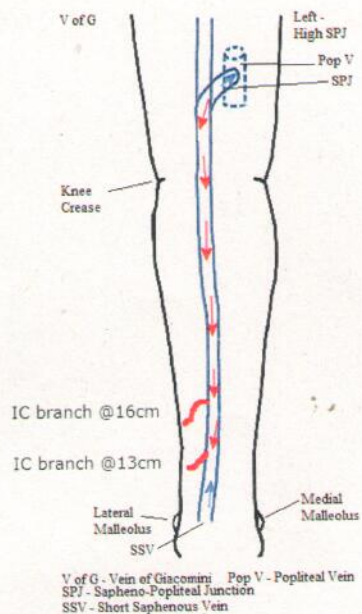
located 5cm proximal to knee crease and 1cm lateral to the mid-line.)

Transverse (AP) dimensions of SSV:

Proximal calf- 0.56cm,

Mid calf - 0.44cm,

Distal calf - 0.1cm.



Assessed by Danny Rimmer

Printed on 02/07/2019 at 12:16 pm

Checked by

Reason Varicose vein
Outcome Widely patent , Incompetence

	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Profunda Vein	Widely Patent	Competent	Widely Patent	Competent
Superficial Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Popliteal Vein	Widely Patent	Competent	Widely Patent	Competent
Posterior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
Anterior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
Peroneal Vein	Widely Patent	Competent	Widely Patent	Competent
Soleal Vein	Patent		Patent	
Gastrocnemius	Patent		Patent	
Superficial Veins				
Saphenofemoral Junction	Patent	Competent	Patent	Incompetent
L Saphenous Vein Above	Patent	Incompetent	Patent	Isolated Incompetence
L Saphenous Vein Below	Patent	Isolated Incompetence	Patent	Incompetent
Vein of Giacomini	Patent	Competent	Patent	Competent
Saphenopopliteal Junction				
S Saphenous Vein	Patent	Competent	Patent	Competent
Evidence of D.V.T.				
Above the knee	No		No	
Popliteal	No		No	
Below the knee	No		No	

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

RIGHT:

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 competent. Long Saphenous vein (LSV) is incompetent in the thigh distal to the pre-terminal valve (~3.5cm distal SFJ) and is linear and within fascia, remaining incompetent until a

Assessed by Danny Rimmer

Printed on 02/07/2019 at 12:18 pm

Checked by

incompetent branch noted mid thigh @53cm which supplies medial/distal thigh and anterior/lateral calf varicosities. LSV is competent distal to this branch until the proximal calf where incompetent branch communicates @32cm. LSV is then incompetent again until mid calf @29cm where incompetent branch noted which supplies medial/distal calf varicosities. LSV is then competent to ankle distal to this.

Transverse (AP) dimensions of LSV:

Proximal thigh- 0.5cm, Mid thigh - 0.47cm, Distal thigh - 0.4cm. Proximal calf- 0.53cm, Mid calf - 0.25cm, Distal calf - 0.24cm.

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

LEFT:

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 as there is an incompetent anterior thigh vein (ATV) which shares a common junction with the Long Saphenous vein (LSV). This ATV (AP ~0.64cm) is mildly tortuous and incompetent in the proximal thigh until it leaves the fascia @77cm (~14cm distal groin crease) and supplies anterior/medial thigh varicosities. LSV is linear and within fascia along length and competent in the proximal thigh until a varicosity communicates mid thigh @60cm, causing LSV to be incompetent to this distal calf where incompetent branch noted @11cm which supplies medial/distal calf varicosities. LSV is competent distal to this.

Transverse (AP) dimensions of LSV:

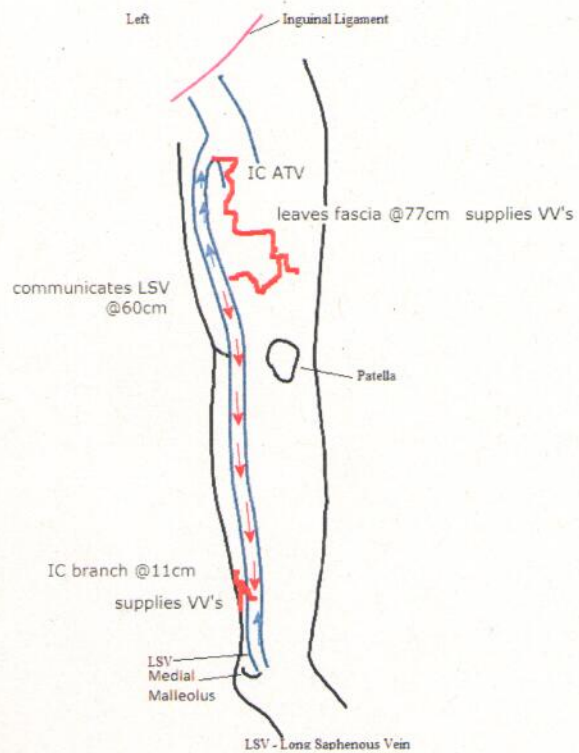
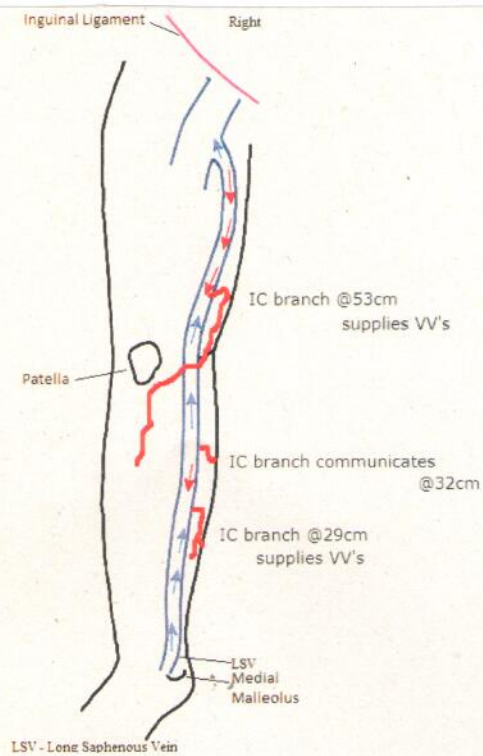
Proximal thigh- 0.4cm, Mid thigh - 0.66cm, Distal thigh - 0.6cm. Proximal calf- 0.6cm, Mid calf - 0.45cm, Distal calf - 0.3cm.

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

Assessed by Danny Rimmer

Printed on 02/07/2019 at 12:18 pm

Checked by _____



Assessed by Danny Rimmer

Printed on 02/07/2019 at 12:18 pm

Checked by

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

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

RIGHT:

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.

RIGHT

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

Assessed by Danny Rimmer

Printed on 02/07/2019 at 12:19 pm

Checked by

there is an incompetent perforator which arises from the posterior/lateral thigh @58cm and forms varicosities at distal/posterior thigh. Sapheno-popliteal junction (SPJ) was not identified. Short Saphenous vein (SSV) not identified proximally, reforms mid calf from an incompetent branch which communicates @29cm proximal to lateral malleolus and SSV is then incompetent to ankle.

Transverse (AP) dimensions of SSV:

Proximal calf- Not identified

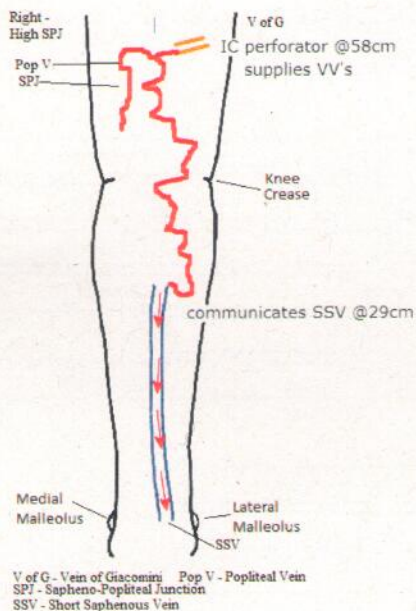
Mid calf - 0.36cm,

Distal calf - 0.3cm.

LEFT:

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



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Reason Varicose vein
Outcome Widely patent , Incompetence

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

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

RIGHT:

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) is linear, within fascia and incompetent in the thigh until an incompetent branch noted distal thigh @51cm which supplies medial distal

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thigh and calf varicosities. LSV is then competent distal to this to ankle.

Transverse (AP) dimensions of LSV:

Proximal thigh- 0.6cm, Mid thigh - 0.6cm, Distal thigh - 0.5cm. Proximal calf- 0.4cm, Mid calf - 0.37cm, Distal calf - 0.4cm.

Sapheno-popliteal junction (SPJ) was not identified. Competent vein of Giacomini and short saphenous vein is competent to mid calf until incompetent branch communicates @27cm, causing isolated incompetence until another incompetent branch @22cm. SSV is then competent distal calf.

Transverse (AP) dimensions of SSV:

Proximal calf- 0.31cm, Mid calf - 0.27cm, Distal calf - 0.25cm.

LEFT:

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 with no evidence of previous DVT. Incompetence noted in the common femoral vein (?due to SFJ reflux). Isolated incompetence in 1 x peroneal vein. All other deep veins appear competent.

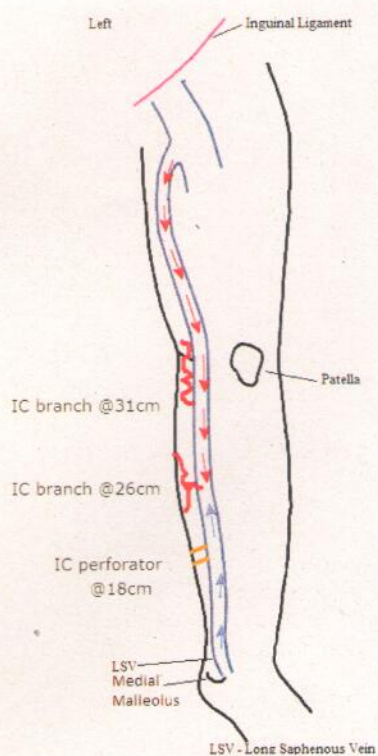
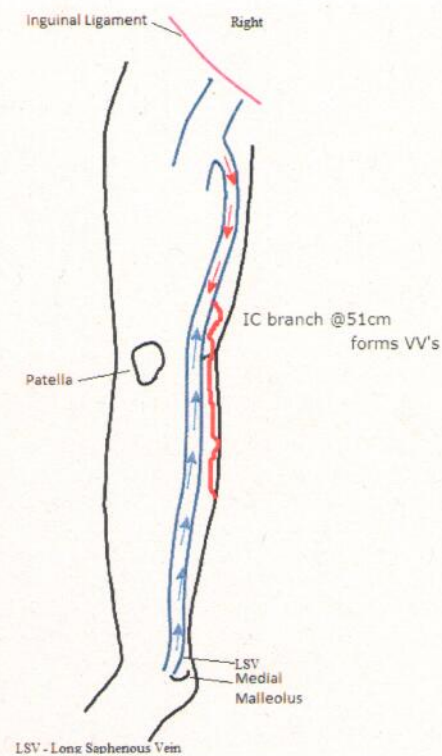
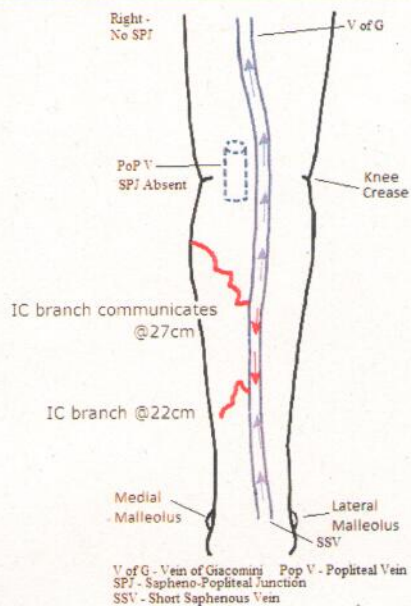
All measurements are proximal to the medial malleolus unless otherwise stated.

Sapheno-femoral junction (SFJ) is incompetent. Long Saphenous vein (LSV) is linear, within fascia and incompetent in the thigh. There is an incompetent branch identified in the proximal calf @31cm, which supplies varicosities around the distal thigh/knee level. LSV remains incompetent distal to this branch until another incompetent branch in the mid calf @26cm, which forms medial calf varicosities. LSV is then competent to ankle distal to this. Short incompetent perforator vein noted in the mid/distal calf @18cm.

Transverse (AP) dimensions of LSV:

Proximal thigh- 1.13cm, Mid thigh - 0.8cm, Distal thigh - 0.9cm. Proximal calf- 0.74cm, Mid calf - 0.39cm, Distal calf - 0.38cm.

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



Reason Varicose vein
Outcome Widely patent

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

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

RIGHT:

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) is linear, within the fascia and incompetent throughout the thigh, with a small incompetent branch distally @47cm before an additional

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incompetent branch in the proximal calf @28cm which supplies medial calf varicosities. LSV tapers out and becomes absent mid calf - reforms distal calf and is competent distal calf.

Transverse (AP) dimensions of LSV:

Proximal thigh- 0.54cm, Mid thigh - 0.4cm, Distal thigh - 0.6cm, Proximal calf- 0.47cm,

Sapheno-popliteal junction (SPJ) is patent and competent. Short Saphenous vein (SSV) has isolated incompetence proximal calf with an isolated incompetent branch mid calf @20cm. SSV is then competent distal to this.

Transverse (AP) dimensions of SSV:

Proximal calf- 0.4cm, Mid calf - 0.3cm, Distal calf - 0.25cm.

LEFT:

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 competent. Long Saphenous vein (LSV) is linear and within fascia along length and is competent prox-mid thigh until an incompetent perforator vein which arises from the SFV communicates @57cm, causing LSV to then be incompetent until an incompetent branch in the proximal calf @30cm which supplies medial calf varicosities. LSV is then competent to ankle distal to this. There is also an incompetent perforator vein @9cm which supplies small varicosities around medial ankle level.

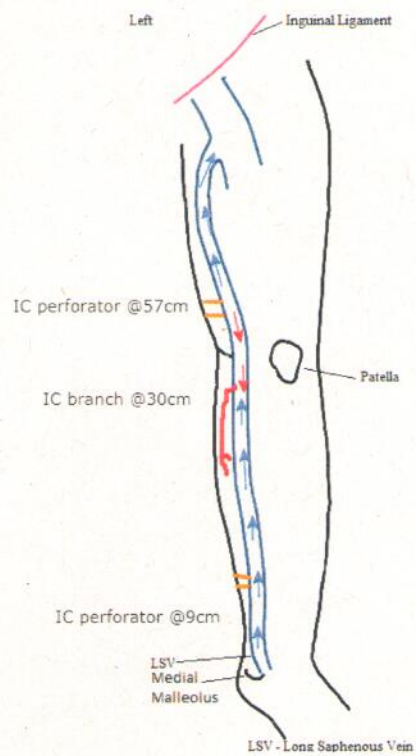
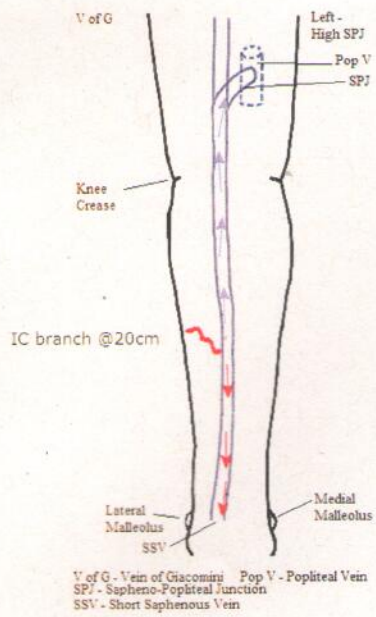
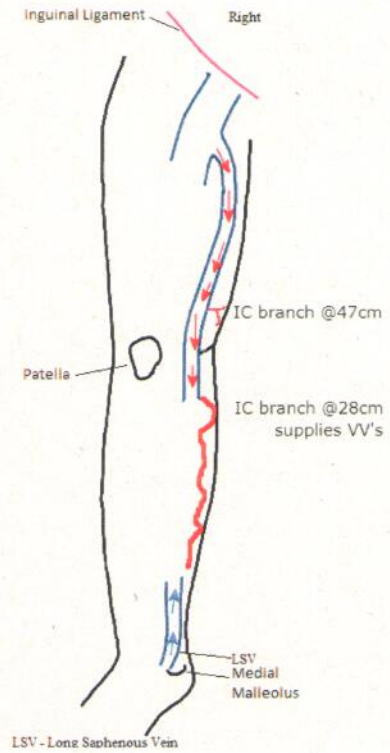
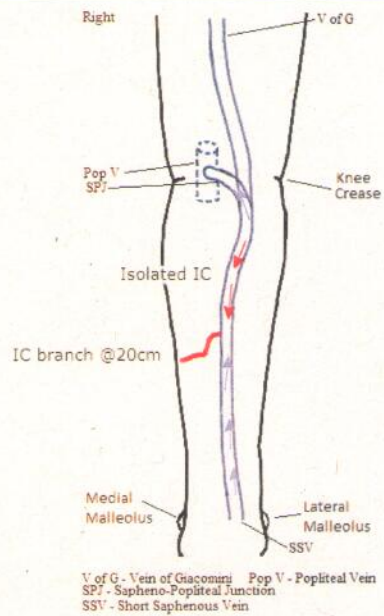
Transverse (AP) dimensions of LSV:

Proximal thigh- 0.5cm, Mid thigh - 0.52cm, Distal thigh - 0.5cm, Proximal calf- 0.6cm, Mid calf - 0.34cm, Distal calf - 0.24cm.

Sapheno-popliteal junction (SPJ) is patent and competent. Short Saphenous vein (SSV) is competent prox-mid calf until a varicosity communicates @20cm and is then incompetent to ankle.

Transverse (AP) dimensions of SSV:

Proximal calf- 0.33cm, Mid calf - 0.38cm, Distal calf - 0.38cm.



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Reason Varicose vein
Outcome Widely patent , 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	Patent			
Gastrocnemius	Patent			
Superficial Veins				
Saphenofemoral Junction	Patent	Incompetent		
L Saphenous Vein Above	Patent	Incompetent		
L Saphenous Vein Below	Patent	Isolated Incompetence		
Vein of Giacomini				
Saphenopopiteal Junction	Patent	Competent		
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.

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

RIGHT

Sapheno-femoral junction (SFJ) is incompetent. Long Saphenous vein (LSV) is linear, within fascia and incompetent in the prox-mid thigh until a large incompetent branch @57cm (28cm distal groin crease) which supplies medial thigh varicosities. LSV is then competent distal to this until an incompetent branch

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communicates in the very proximal calf @38cm, causing isolated LSV incompetence until another incompetent branch @34cm which supplies medial calf varicosities. LSV is then competent to ankle distal to this.

Transverse (AP) dimensions of LSV:

Proximal thigh- 1.2cm,

Mid thigh - 0.5cm,

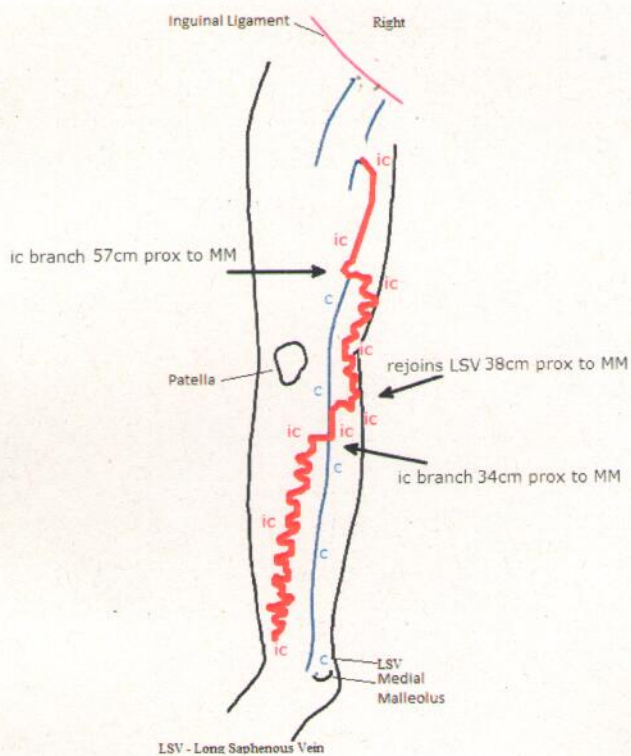
Distal thigh - 0.3cm.

Proximal calf- 0.8cm,

Mid calf - 0.1cm,

Distal calf - 0.2cm.

Sapheno-popliteal junction (SPJ) is patent and competent. Short Saphenous vein (SSV) is competent to ankle.



Reason Varicose vein
Outcome Incompetence

	Right		Left	
	Patency	Competency	Patency	Competency
Deep Veins				
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			Patent	
Gastrocnemius			Patent	
Superficial Veins				
Saphenofemoral Junction			Patent	Competent
L Saphenous Vein Above			Patent	Competent
L Saphenous Vein Below			Patent	Isolated Incompetence
Vein of Giacomini				
Saphenopopiteal Junction			Patent	Incompetent
S Saphenous Vein			Patent	Incompetent
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 competent. Long Saphenous vein (LSV) is competent in the prox-mid thigh until a varicosity communicates in the very distal thigh @34cm, causing the LSV to be incompetent to the mid calf. Incompetent branch noted in the proximal calf @23cm. A competent perforator noted @21cm, distal to this LSV is competent to ankle.

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Transverse (AP) dimensions of LSV:

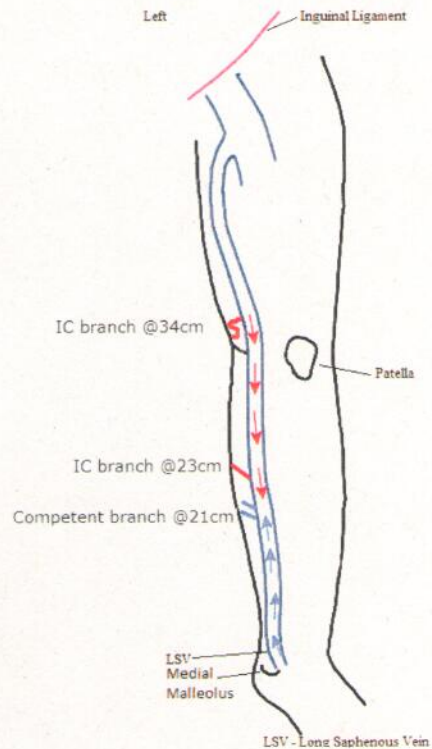
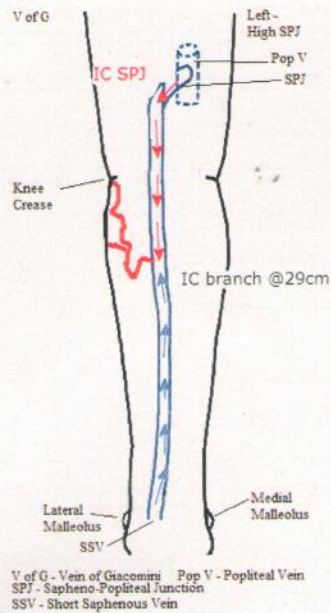
Proximal thigh- 0.2cm, Mid thigh - 0.2cm, Distal thigh - 0.3cm.

Proximal calf- 0.28cm, Mid calf - 0.21cm, Distal calf - 0.21cm.

Sapheno-popliteal junction (SPJ) is patent and incompetent and is situated 5cm proximal to knee crease and 4cm lateral to the mid line. Short saphenous vein is then patent linear and incompetent to the prox-mid calf, before large incompetent branch noted @29cm causing visible posterior calf varicosities. SSV is then competent to ankle distal to this branch.

Transverse (AP) dimensions of SSV:

Proximal calf- 0.74cm, Mid calf - 0.21cm, Distal calf - 0.19cm.



Transverse (AP) dimensions of LSV:

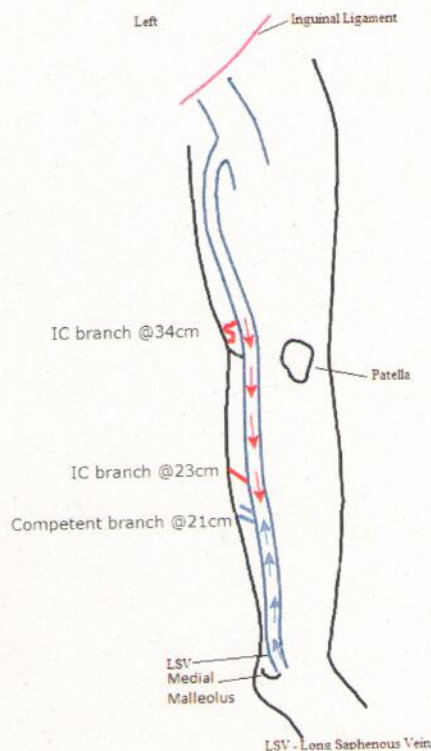
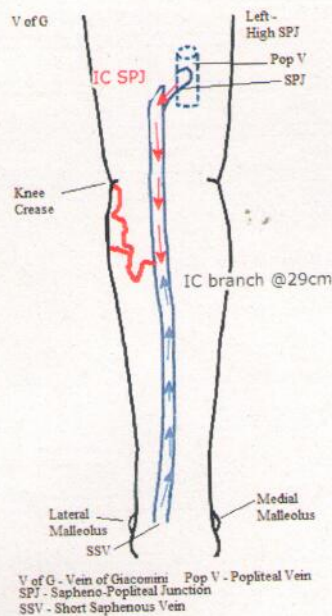
Proximal thigh- 0.2cm, Mid thigh - 0.2cm, Distal thigh - 0.3cm.

Proximal calf- 0.28cm, Mid calf - 0.21cm, Distal calf - 0.21cm.

Sapheno-popliteal junction (SPJ) is patent and incompetent and is situated 5cm proximal to knee crease and 4cm lateral to the mid line. Short saphenous vein is then patent linear and incompetent to the prox-mid calf, before large incompetent branch noted @29cm causing visible posterior calf varicosities. SSV is then competent to ankle distal to this branch.

Transverse (AP) dimensions of SSV:

Proximal calf- 0.74cm, Mid calf - 0.21cm, Distal calf - 0.19cm.



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Reason Varicose vein
Outcome Incompetence

	Right		Left	
	Patency	Competency	Patency	Competency
Deep Veins				
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	Patent			
Gastrocnemius	Patent			
Superficial Veins				
Saphenofemoral Junction	Patent	Incompetent		
L Saphenous Vein Above	Patent	Incompetent		
L Saphenous Vein Below	Patent	Incompetent		
Vein of Giacomini				
Saphenopopiteal Junction	Patent			
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.

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

RIGHT

Sapheno-femoral junction (SFJ) is incompetent. Long Saphenous vein (LSV) is incompetent along length. Incompetent branch noted in the proximal calf @37cm, forming the medial and anterior calf varicosities.

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Printed on 02/07/2019 at 12:34 pm

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SPJ is patent and competent. Short Saphenous vein (SSV) is patent and competent along length.

Transverse (AP) dimensions of LSV:

Proximal thigh- 0.62cm,

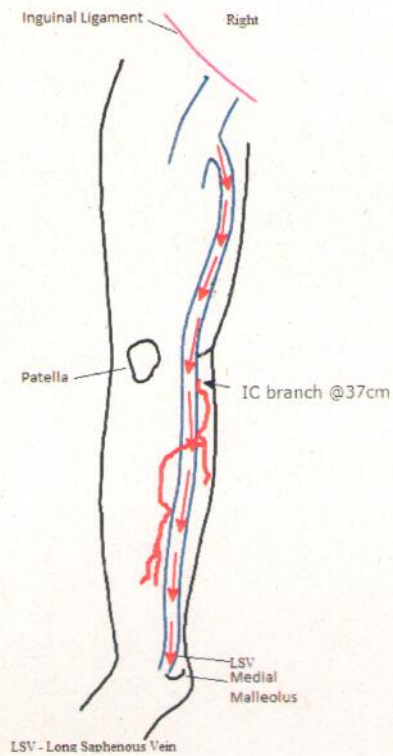
Mid thigh - 0.6cm,

Distal thigh - 0.55cm.

Proximal calf- 0.43 cm,

Mid calf - 0.47cm,

Distal calf - 0.34cm.



Assessed by Danny Rimmer

Printed on 02/07/2019 at 12:34 pm

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Reason Varicose vein
Outcome 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	Patent			
Gastrocnemius	Patent	Competent		
Superficial Veins				
Saphenofemoral Junction	Not Identified			
L Saphenous Vein Above	See notes	Isolated Incompetence		
L Saphenous Vein Below	Patent	Isolated Incompetence		
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.

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

RIGHT

Sapheno-femoral junction (SFJ) not identified (previous high-tie). Long Saphenous vein (LSV) is absent till distal thigh, where it then reforms and is incompetent for a short section to the proximal calf where incompetent branch identified @31cm, which forms small medial and anterior calf viscosities. LSV is then

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small calibre and competent to the ankle. Small and competent perforator to Posterior tibial vein noted @7cm.

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

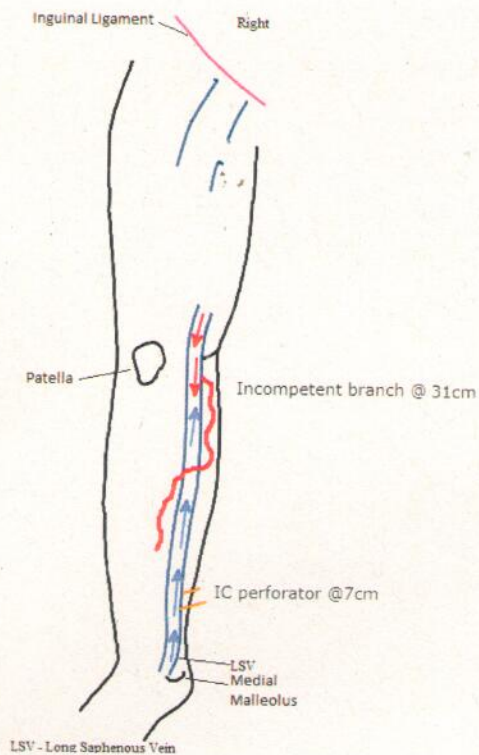
Transverse (AP) dimensions of LSV:

Distal thigh - 0.38cm.

Proximal calf- 0.28 cm,

Mid calf - 0.18cm,

Distal calf - 0.3cm.



Assessed by Danny Rimmer

Printed on 02/07/2019 at 12:39 pm

Checked by _____

Reason Varicose vein
Outcome Incompetence, Superficial thrombophlebitis

	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Profunda Vein	Widely Patent	Competent	Widely Patent	Competent
Superficial Femoral Vein	Widely Patent	Isolated Incompetence	Widely Patent	Competent
Popliteal Vein	Widely Patent	Competent	Widely Patent	Competent
Posterior Tibial Vein	Widely Patent	Isolated Incompetence	Widely Patent	Isolated Incompetence
Anterior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
Peroneal Vein	Widely Patent	Competent	Widely Patent	Competent
Soleal Vein	Patent	Competent	Patent	
Gastrocnemius	Patent	Competent	Patent	
Superficial Veins				
Saphenofemoral Junction	Areas of Thrombus	Old Thrombus	Patent	Incompetent
L Saphenous Vein Above	Areas of Thrombus	Old Thrombus	Patent	Incompetent
L Saphenous Vein Below	Areas of Thrombus	Old Thrombus	Patent	Isolated Incompetence
Vein of Giacomini	Patent	Competent	Patent	
Saphenopopliteal Junction			Patent	
S Saphenous Vein	Areas of Thrombus	Old Thrombus	Patent	Competent
Evidence of D.V.T.				
Above the knee	No		No	
Popliteal	No		No	
Below the knee	Yes	Old	No	

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

RIGHT:

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 proximal deep veins appear widely patent with no evidence of previous DVT. Isolated incompetence noted in the proximal superficial femoral vein. All other proximal deep veins appear competent. Old non-occlusive thrombus noted in 1 x gastrocnemius vein. 1 x posterior tibial vein appears incompetent. All other deep calf veins appear competent.

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

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Sapheno-femoral junction (SFJ) is incompetent with old recanalised superficial thrombophlebitis identified. Neo-vascularisation at the level of the SFJ appears to form proximal thigh small varicosities. The long saphenous vein is incompetent along length however diffuse areas of old superficial thrombophlebitis identified throughout the thigh and proximal calf. Incompetent branches from LSV identified @27cm and 24cm which also contain areas of old thrombus. Incompetent perforator from LSV to PTV identified in the distal calf @9cm. Incompetent branch also identified @6cm which forms varicosities on dorsal aspect of foot.

Sapheno-popliteal junction (SPJ) was not identified. Short Saphenous vein (SSV) is competent prox-mid calf and is continuous with a competent vein of Giacomini. Incompetent branch communicates @17cm proximal to lateral malleolus, SSV then has areas of isolated incompetence with old superficial thrombophlebitis identified mid-distal calf.

Transverse (AP) dimensions of LSV:

Proximal thigh- 0.66cm,
Mid thigh - 0.57cm,
Distal thigh - 0.65cm.
Proximal calf- 0.83cm,
Mid calf - 0.43cm,
Distal calf - 0.50cm.

(SSV >0.3cm along length).

LEFT:

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 with no evidence of previous DVT. 1 x posterior tibial vein appears incompetent. All other deep veins appear competent.

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

Sapheno-femoral junction (SFJ) is incompetent. Dilated varices identified in the groin ?pelvic tributary - difficult to assess competency. Long Saphenous vein (LSV) is large calibre proximal thigh (AP 1.3cm) and incompetent throughout the thigh and proximal calf before incompetent branch identified @24cm forms medial calf varicosities. Perforator to posterior tibial vein also identified at this level (@24cm) which appears dilated and appears related to varices. LSV is then competent to ankle.

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

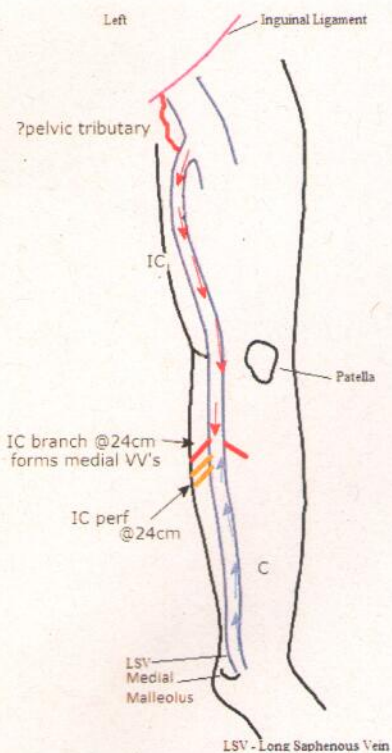
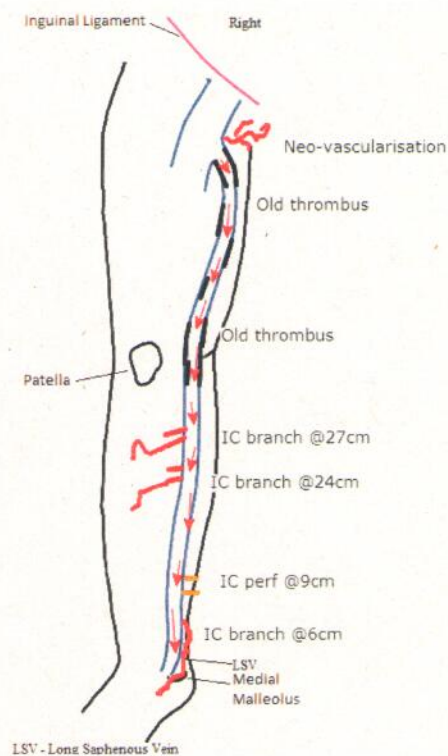
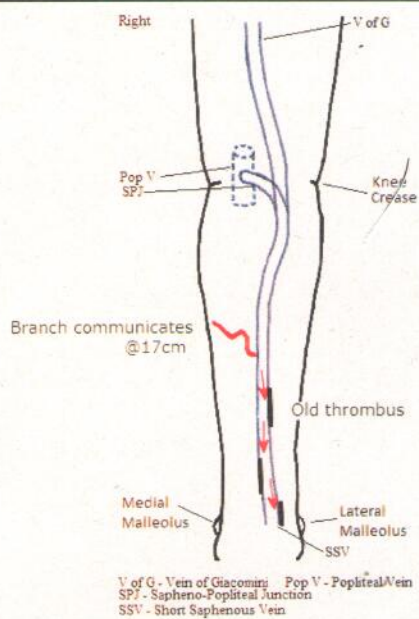
Transverse (AP) dimensions of LSV/SSV:

Proximal thigh- 1.3cm,
Mid thigh - 0.67cm,
Distal thigh - 0.68cm.
Proximal calf- 0.71 cm,
Mid calf - 0.21cm,
Distal calf - 0.21cm.

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Reason Varicose vein
Outcome Incompetence

	Right		Left	
	Patency	Competency	Patency	Competency
Deep Veins				
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Profunda Vein	Widely Patent	Competent	Widely Patent	Competent
Superficial Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Popliteal Vein	Widely Patent	Competent	Widely Patent	Competent
Posterior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
Anterior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
Peroneal Vein	Widely Patent	Competent	Widely Patent	Competent
Soleal Vein	Patent		Patent	
Gastrocnemius	Patent		Patent	
Superficial Veins				
Saphenofemoral Junction	Patent	Incompetent	Patent	Competent
L Saphenous Vein Above	Patent	Competent	Patent	Competent
L Saphenous Vein Below	Patent	Isolated Incompetence	Patent	Isolated Incompetence
Vein of Giacomini	Patent	Competent	Patent	Competent
Saphenopopliteal Junction				
S Saphenous Vein	Patent	Competent	Patent	Competent
Evidence of D.V.T.				
Above the knee	No		No	
Popliteal	No		No	
Below the knee	No		No	

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

RIGHT:

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. Incompetent accessory thigh vein identified which tracks from the SFJ which is linear before it leaves fascia @71cm prox MM (~9cm distal groin crease) becoming

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tortuous and forms medial visible thigh varicosities and antero-lateral calf varicosities. LSV is competent above knee until communication from thigh varicosity @42cm and is then incompetent to the proximal calf. Incompetent branch identified proximal calf @31cm which forms medial calf varices. LSV is then competent to the distal calf before incompetent branch communicates @10cm, LSV is then incompetent to ankle.

Transverse (AP) dimensions of Accessory thigh vein: (Prox thigh: 0.92cm; Prox-mid thigh: 0.68cm).

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

Transverse (AP) dimensions of LSV:

Proximal thigh- Absent

Mid thigh - Absent

Distal thigh - 0.70cm.

Proximal calf- 0.39cm,

Mid calf - 0.14cm,

Distal calf - 0.28cm.

LEFT:

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 competent. Long Saphenous vein (LSV) is small calibre (~0.15 cm AP) and competent in the thigh. Anterior thigh vein (ATV) identified which appears competent proximally however becomes incompetent distal thigh. ATV communicates with LSV in the proximal calf @30cm, causing LSV to be incompetent for a short segment before large incompetent branch @25cm which supply medial calf varicosities. LSV is then absent in the mid calf and is patent and competent distally.

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

Transverse (AP) dimensions of ATV:

Proximal thigh- 0.31cm,

Mid thigh - 0.44cm,

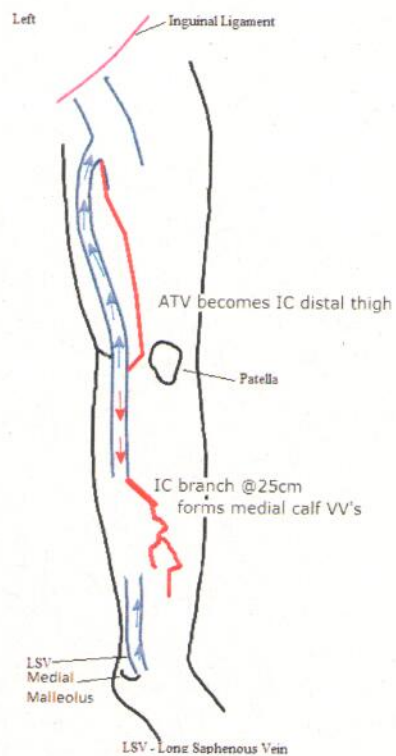
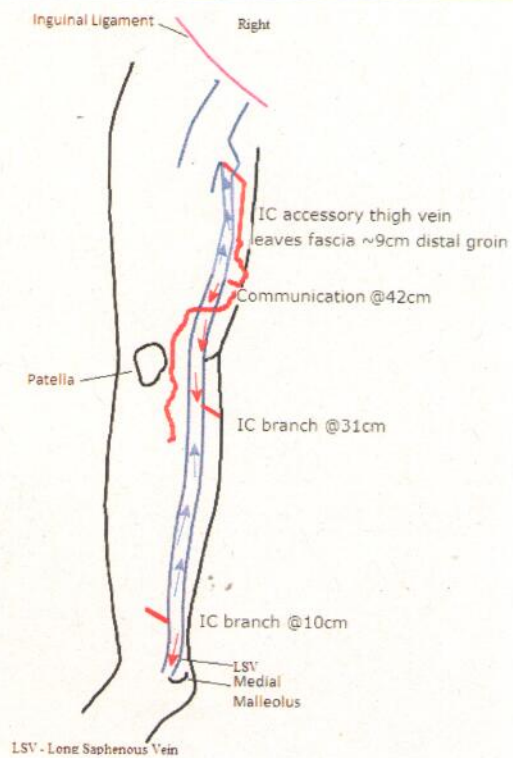
Distal thigh - 0.45cm.

LSV: Proximal calf- 0.5cm

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Reason Varicose vein
Outcome Incompetence

	Right		Left	
	Patency	Competency	Patency	Competency
Deep Veins				
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	Patent			
Gastrocnemius	Patent			
Superficial Veins				
Saphenofemoral Junction	Patent	Incompetent		
L Saphenous Vein Above	Not Identified			
L Saphenous Vein Below	Patent	Isolated Incompetence		
Vein of Giacomini	Patent	Competent		
Saphenopopliteal Junction				
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.

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

RIGHT

Sapheno-femoral junction (SFJ) is incompetent. Incompetent accessory thigh vein identified which tracks medially and is linear until 64cm prox MM (~9cm distal groin crease) before it leaves the fascia and forms visible thigh varicosities. LSV is absent prox-mid thigh (?previously stripped) and reforms via

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communication from thigh varicosity @55cm. LSV is then incompetent to the mid calf where an incompetent branch was identified @28cm which forms medial calf varicosities. LSV is then competent to ankle.

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

Transverse (AP) dimensions of Accessory thigh vein:

Proximal thigh- 0.59cm,

Prox-mid thigh - 0.51cm.

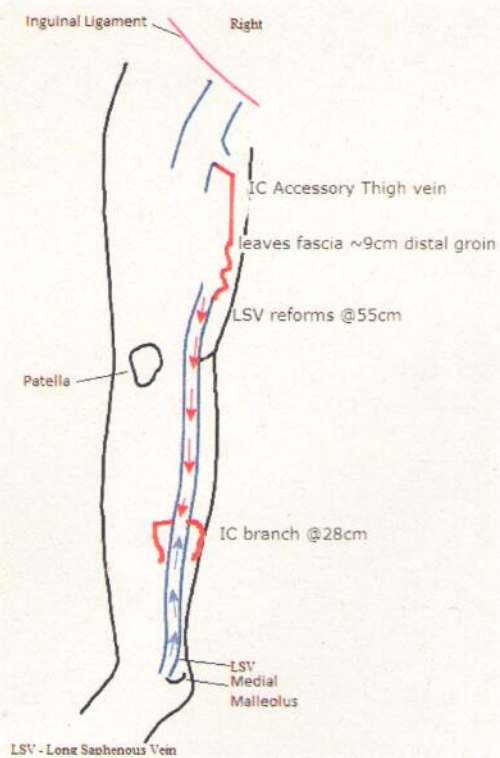
LSV Dimensions:

Distal thigh - 0.59cm

Proximal calf- 0.54cm,

Mid calf - 0.2cm,

Distal calf - 0.19cm.



Reason Varicose vein
Outcome Incompetence

	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Widely Patent	Incompetent		
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			
Superficial Veins				
Saphenofemoral Junction	Patent	Incompetent		
L Saphenous Vein Above	Patent	Incompetent		
L Saphenous Vein Below	Patent	Isolated Incompetence		
Vein of Giacomini	Patent	Competent		
Saphenopopiteal Junction	Not Identified			
S Saphenous Vein	Patent	Isolated Incompetence		
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. Common femoral vein is incompetent due to SFJ reflux. All other 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.

RIGHT

Sapheno-femoral junction (SFJ) is incompetent. Long Saphenous vein (LSV) is linear and incompetent in the prox-distal thigh before a large incompetent branch identified @41cm which supplies proximal calf

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varicosities. LSV is then small calibre and competent to the mid calf, before incompetent branch communicates @21cm, LSV is then incompetent to ankle.

Transverse (AP) dimensions of LSV:

Proximal thigh- 1.3cm,

Mid thigh - 0.9cm,

Distal thigh - 0.75cm.

Proximal calf- 0.22cm,

Mid calf - 0.32cm,

Distal calf - 0.32cm.

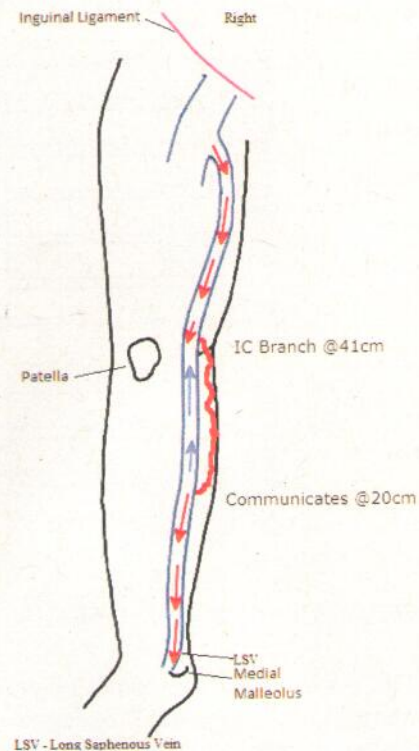
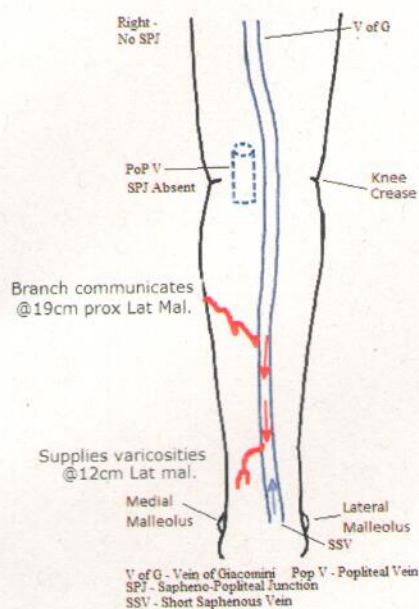
Sapheno-popliteal junction (SPJ) was not identified. Competent vein of Giacomini identified. Short saphenous vein (SSV) is competent prox-mid calf before incompetent branch which tracks from the LSV communicates @19cm proximal to Lateral malleolus, causing SSV to be incompetent mid-distal calf, supplying varicosities in the distal calf @12cm proximal lateral malleolus, SSV is then competent to ankle.

Transverse (AP) dimensions of SSV:

Proximal calf- 0.31cm,

Mid calf - 0.33cm,

Distal calf - 0.31cm.



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D.O.B.

31/08/1947

Patient Ref 5326181

Reason

Varicose vein

Outcome

Widely patent , Incompetence

	Right		Left	
	Patency	Competency	Patency	Competency
Deep Veins				
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Widely Patent	Competent	Widely Patent	Incompetent
Profunda Vein	Widely Patent	Competent	Widely Patent	Competent
Superficial Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Popliteal Vein	Widely Patent	Competent	Widely Patent	Slight Incompetence
Posterior Tibial Vein	Widely Patent	Competent	Widely Patent	Slight Incompetence
Anterior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
Peroneal Vein	Widely Patent	Competent	Widely Patent	Competent
Soleal Vein	Patent		Patent	
Gastrocnemius	Patent		Patent	
Superficial Veins				
Saphenofemoral Junction	Patent	Incompetent	Patent	Incompetent
L Saphenous Vein Above	Patent	Incompetent	Patent	Incompetent
L Saphenous Vein Below	Patent	Isolated Incompetence	Patent	Isolated Incompetence
Vein of Giacomini	Patent	Competent		
Saphenopopliteal Junction			Patent	Incompetent
S Saphenous Vein	Patent	Competent	Patent	Isolated Incompetence
Evidence of D.V.T.				
Above the knee	No		No	
Popliteal	No		No	
Below the knee	No		No	

Notes**BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT****RIGHT:**

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a 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) is incompetent throughout the thigh until a large incompetent branch noted mid-distal thigh @62cm which supplies extensive medial thigh

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and medial calf varicosities. Distal to this branch, LSV becomes small calibre and competent until a varicosity communicates in the proximal calf @34cm, causing incompetence until an incompetent branch @27cm which supplies further medial calf varicosities. LSV is then competent with isolated incompetence very distal calf.

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

Transverse (AP) dimensions of LSV: Proximal thigh - 1.14cm, Mid- thigh -1.18cm, Distal thigh -0.2cm; Proximal calf - 0.6cm, Mid - calf -0.28cm, Distal calf - 0.25cm.

LEFT:

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and responds normally to a Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear widely patent with no evidence of previous DVT. The common femoral vein is incompetent proximally due to SFJ reflux. Slight incompetence noted in the popliteal vein and 1 x posterior tibial vein. All other deep veins appear competent.

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

Sapheno-femoral junction (SFJ) is incompetent. Long Saphenous vein (LSV) is incompetent throughout the thigh with a large incompetent branch noted distally @48cm which supplies collection of varicosities medial thigh. LSV remains incompetent distal to this until proximal calf where another incompetent branch which supplies further medial calf varicosities was noted @33cm. LSV is then competent distal to this until a varicosity communicates @20cm, causing LSV to be incompetent distal calf. There is also an incompetent perforator from the posterior tibial vein noted @9cm.

Transverse (AP) dimensions of LSV: Proximal thigh - 1.1cm, Mid- thigh -0.98cm, Distal thigh - 0.9cm; Proximal calf - 0.44cm, Mid - calf -0.24cm, Distal calf - 0.44cm.

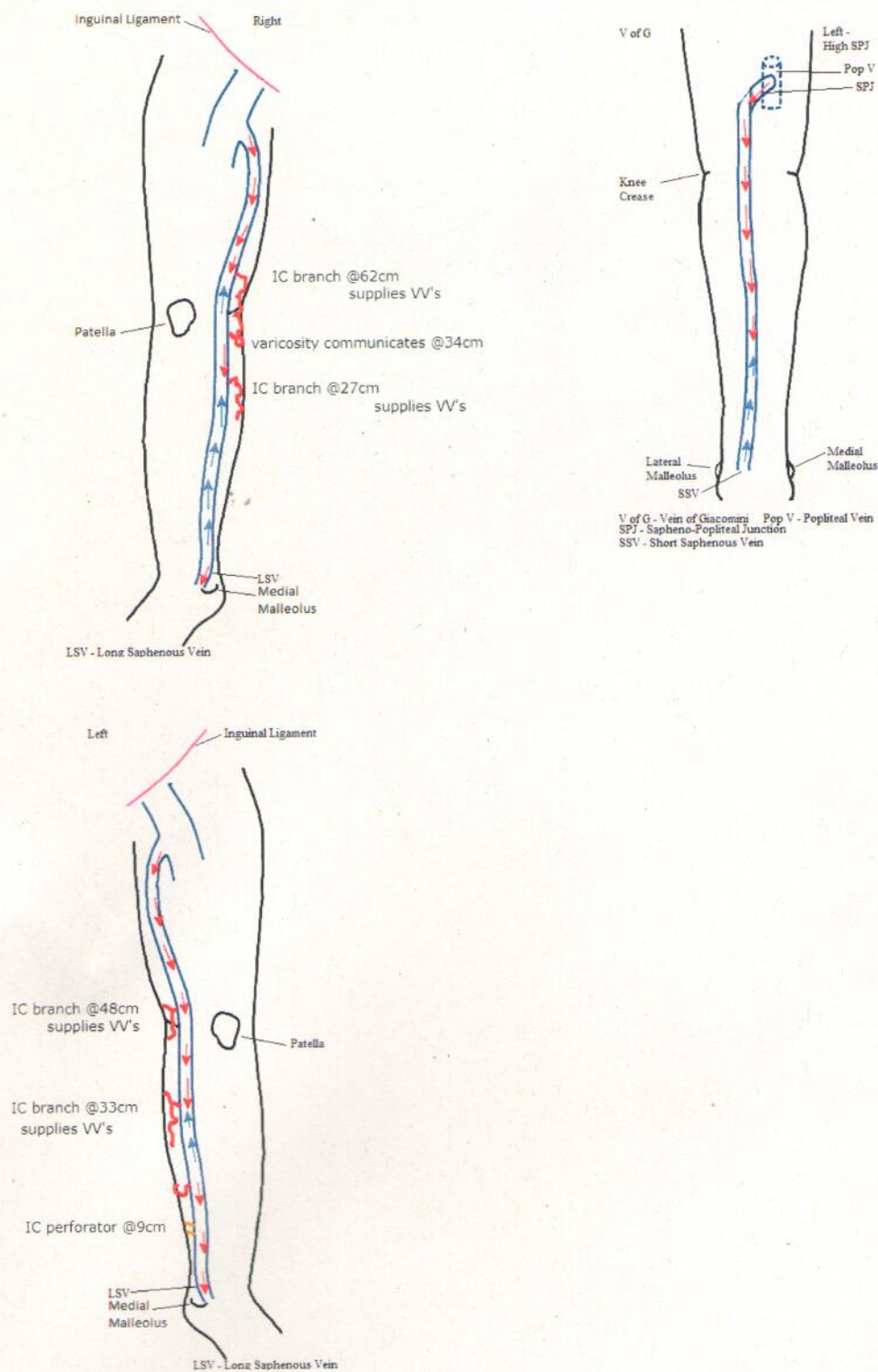
Sapheno-popliteal junction (SPJ) is patent and incompetent, and situated 4cm proximal to the knee crease and at the level of the mid-line. Short saphenous vein (SSV) is incompetent proximal calf however becomes slightly incompetent mid calf and competent distally and does not supply any noticeable varicosities.

Transverse (AP) dimensions of SSV: Proximal calf - 0.46cm, Mid - calf -0.4cm, Distal calf - 0.3cm.

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