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| **RTBPI = 0.21**  **LTBPI =0.64**  **LEFT LEG:**  EIA = Biphasic  CFA = Biphasic  PFA = >50% stenosis.  SFA = Biphasic  Pop = Biphasic with a 50-75% stenosis mid pop. Distal pop previously noted to have a >75% stenosis, not duplicated today.  **Run off: Heavily and diffusely calcified with signal loss.**  ATA = ATA occludes although reforms dampened monophasic at the ankle, (12cm/s)  PTA = Occluded although reforms monophasic 38cm/s.  Peroneal = Previously reported to be occlude, similar findings today.  **Abdominal Aorta diameter** = 1.9cm  **RIGHT LEG:**  EIA = Biphasic  CFA = Biphasic  PFA = Biphasic  SFA = Significant disease in the proximal SFA stent with multiple stenoses. Monophasic mid-distal thigh.  Pop = Monophasic  **Run off: Heavily and diffusely calcified with signal loss.**  ATA = occluded throughout.  PTA = occluded proximally reformed monophasic at ankle.  Peroneal = Occluded proximally, monophasic at ankle. | | |
| Report:  **Abdomen**  The abdominal Aorta is patent and of normal calibre. The Common and External Iliac arteries are patent with Biphasic waveforms noted and no significant stenosis.  **US Doppler lower limb arteries Rt:**  The Common Femoral is patent with biphasic waveform with diffuse calcific atheroma noted. A previous 50-75% stenosis is noted. Diffuse calcific atheroma is noted. A max measurement of 2.4m/s is noted, similar findings today.  The Profunda Femoral is patent with biphasic waveforms  The Superficial Femoral is observed to have an in situ stent tracking into the popliteal. The proximal stent is noted to have intimal hyperplasia with a max PSV of 1.17m/s with a PSVR of 4.17 suggesting a >75% stenosis. Waveforms become monophasic at the mid-thigh to the adductors canal, these findings are suggestive of significant proximal disease.  The Popliteal artery is patent with a max PVS of 2.4m/s and a PSVR of 4.15, suggestive of a >75% stenosis. Pulsatile monophasic waveforms are noted in the distal popliteal, 1.05m/s.  The Tibio-Peroneal Trunk, Posterior Tibial (39cm/s), and Peroneal arteries (24.8cm/s) present with monophasic waveforms at the ankle. The peroneal artery was previously reported to be occluded with reformation.  The ATA is occluded throughout, no colour or Doppler detected at the ankle.  **US Doppler lower limb arteries Lt:**  The Common Femoral is patent with biphasic waveforms.  The profunda femoris is patent with a max PSV of 3.3 suggestive of a >50% stenosis.  The SFA is patent with an in situ stent throughout with a mild amount of intimal hyperplasia. However, no significant focal stenosis is noted.  The popliteal is noted to have max PSV of 1.9m/s with a PSVR of 2.02 suggestive of a 50-75% stenosis, biphasic waveforms are noted to the distal popliteal. Diffuse irregular calcific atheroma is noted.  The PTA is previously noted to occlude 15cm of above the medial malleolus, similar findings today. Monophasic at the ankle.  The ATA is previously noted to have 2 occlusions, with reformation. Similar findings today, dampened monophasic waveforms at the ankle, 12cm/s.  The Peroneal is not well visualised, previously reported to be occluded. | | |
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