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| **Abdominal Aorta diameter** = Not visualised due to overlying bowel gas.  **LEFT LEG:**  CIA = Not visualised  EIA = Triphasic  CFA = Triphasic  PFA = Triphasic  SFA = Tri-Biphasic  Pop = Tri-Biphasic  TPT = Tri-Biphasic  **Run off: Diffusely calcified arteries**  ATA = Patent to the mid-calf with biphasic waveforms, artery occluded with no colour Doppler signal.  PTA = Acoustic shadowing therefore segmentally observed however, Tri-biphasic were sampled.  Peroneal = not well visualised however distally, small diameter with no colour or Doppler signal suggestive of occlusion. | | |
| Report:  **Abdomen:**  The Aorta and CIA’s were not visualised due to overlying bowel gas. The EIA’s bilaterally were patent with triphasic waveforms noted.  **Left lower extremity:**  The CFA, Profunda Femoris, and Superficial Femoral arteries are patent with calcific atheroma noted. The SFA is segmentally imaged although, where sampled tri-biphasic flow is noted.  The popliteal and TPT are patent with tri-biphasic waveforms with diffuse calcific atheroma.  The ATA is patent to the mid-calf with diffuse calcific atheroma causing acoustic shadowing; bi-triphasic waveforms are noted. The ATA from the mid-calf was observed to have no colour or Doppler signal to the ankle suggestive of total occlusion. The DPA is reformed with dampened monophasic waveforms.  The PTA is diffusely calcified with acoustic shadowing to the ankle however; tri-biphasic waveforms are noted where imaged.  The Peroneal was difficult to visualise due to disease. The distal peroneal is of small diameter with no colour or Doppler flow detected suggestive of occlusion. | | |
| Kindly schedule follow-up in 6 months’ time. | | |