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| **LEFT LEG:**  CIA = Not visualised  EIA = Triphasic  CFA = Triphasic  PFA = Triphasic  SFA = Triphasic, low velocity, ? cardiac abnormality, arrhythmia low cardiac output.  Pop = Triphasic, low velocity.  TPT = Triphasic  **Run off:**  ATA = Triphasic  PTA = Triphasic  Peroneal = Triphasic low velocity at ankle. Vessel becomes visually narrowed tracking to the ankle.  **Abdominal Aorta diameter** = 0.0cm max AP  **RIGHT LEG:**  CIA = Not visualised.  EIA = Triphasic  CFA = Triphasic  PFA = Triphasic  SFA = Triphasic  Pop = Popliteal Aneurysm observed 3.5cm AP, patent lumen 1.96cm.  TPT = Patent/Occluded/Stenosis  Triphasic/Biphasic//Monophasic  **Run off:**  ATA = Triphasic  PTA = Triphasic  Peroneal = Triphasic to the mid-calf, occludes to distal calf, no reformation noted. | | |
| Report:  **Abdomen**  The abdominal Aorta is patent and of normal calibre at the proximal level. The mid-distal AO and CIA’s were not visualised due to overlying bowel gas. The External Iliac arteries are both patent with triphasic waveforms noted and no significant stenosis.  **US Doppler lower limb arteries Rt:**  The Common Femoral, Profunda Femoral, Superficial Femoral are all patent with a diffusely calcified arterial wall, no significant stenosis noted.  The Popliteal artery is aneurysmal 3.5cm AP with an intra-mural thrombus reducing the patent lumen to 1.9cm. Triphasic waveforms are noted to the TPT.  The cural arteries are heavily calcified and segmentally observed however, the following is noted.  The Tibio-Peroneal Trunk is patent with triphasic waveforms.  The Posterior Tibial is patent with triphasic waveforms noted to the ankle, however the vessel becomes visually narrowed at the ankle.  The Anterior Tibial is patent with triphasic waveforms noted to the ankle.  The Peroneal artery is patent from the proximal to mid-calf, no colour or Doppler with a visualised reduced lumen diameter is noted. These findings are suggestive of total occlusion to the ankle. No reformation is noted.  **US Doppler lower limb arteries Lt:**  The Common Femoral, Profunda Femoral, Superficial Femoral are all patent with a diffusely calcified arterial wall, no significant stenosis noted. The distal SFA is triphasic although, low velocity, ? cardiac abnormality.  The Popliteal artery is patent with triphasic low velocity waveforms.  The cural arteries are heavily calcified and segmentally observed however, the following is noted.  The Tibio-Peroneal Trunk is patent with triphasic waveforms.  The ATA is patent with triphasic waveforms noted throughout.  The PTA is observed to have triphasic waveforms where imaged to the ankle.  The Peroneal is observed to have triphasic although low velocity waveforms to the ankle. The vessel becomes visually narrowed tracking from the origin to the distal calf. | | |
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