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| Vascular lab report | Assessed by: Apurba Dahal (Trainee); Supervised by: Daniel Sims (CVS) | |
| Name: PEREIRA-GONZAGA, MARCELA | Hospital No: 902018726 | Date of Exams: 23/08/2019 |
| DOB: 16/11/1964 | NHS No: 639 657 7666 | Ip/Op: OP |
| Referrer: Mr ElGaddal | Hospital Site: QE | |
| Clinical Indications: Bilateral varicose veins, with skin discolouration | | |
| Lower Limb – BILATERAL Venous Insufficiency scan | | |
| **Left Leg:**  **Ant acc. Saphenous vein diameter:**  Prox thigh = 4.1mm  Mid-thigh = 4.4mm  **GSV diameter:**  Mid thigh = 7.2mm  Dist thigh = 6.5mm  Knee = 3.5mm  Prox Calf = 2.7mm  **No SFJ or proximal thigh GSV. Native GSV noted in the mid thigh.** **Ant acc. Saphenous vein incompetent in proximal-mid thigh. The reflux exits into native GSV in mid-thigh**  GSV outside fascia and slightly tortuous around knee and proximal calf  **Right Leg:**  **GSV measurements:**  Prox thigh: 8.5mm  Mid thigh: 9.8mm  Knee: 9.2mm  Prox calf: 8.0mm  Mid calf: 6.8mm  GSV straight and within fascia | | |
| Report:  **RIGHT LEG**  The Common Femoral Vein is patent with respirophasic flow detected indicating no proximal venous obstruction is present.  The Femoral, Popliteal, Posterior Tibial, Peroneal and Gastrocnemius veins are patent and competent; no scarring to note  **There is an incompetent perforator imaged in the mid-calf approximately 13cm below knee crease which communicates with the Great Saphenous Vein (GSV)**  **The Sapheno-Femoral Junction and the Great Saphenous vein are incompetent. A prominent varicose vein associated with the GSV is noted in the knee region which tracks in the anterior aspect of the leg down to the ankle. A varicose veins associated with the GSV is also noted in the medial aspect of the distal calf/ ankle.**  *GSV diameter*: Prox thigh= 8.5mm, Mid thigh= 9.8mm, Knee= 9.2mm, Prox calf= 8.0mm, Mid calf= 6.8mm (Straight and within the fascia)  **LEFT LEG**  The Common Femoral Vein is patent with respirophasic flow detected indicating no proximal venous obstruction is present.  The Femoral, Posterior Tibial, Peroneal and Gastrocnemius veins are patent and competent; no scarring to note  **There is a mild reflux noted in the Popliteal vein.**  **An incompetent perforator is imaged in the distal calf approximately 10cm above ankle.**  **The Sapheno-Femoral Junction and proximal-thigh GSV are not visualised; patient gives history of vein treatment.**    **The anterior accessory saphenous vein is imaged and noted to be incompetent in the proximal to mid-thigh. The reflux exits into the native GSV in the mid-thigh via a short communicating vein. The GSV reflux exits into a prominent varicose vein 5cm above the knee crease and the GSV is noted to be competent below this level. The varicose vein tracks in the posterior-medial aspect of the leg and re-joins GSV in the distal calf (10cm above medial malleolus) making distal-most GSV incompetent.**  *Anterior acc. Saphenous vein diameter*: Prox-thigh = 4.1mm, Mid-thigh = 4.4mm  *GSV diameter*: Mid-thigh = 7.2mm; Distal-thigh = 6.5mm; Knee = 3.5mm; Prox calf = 2.7mm (The vein is outside of fascia and slightly tortuous around knee region and proximal calf) | | |