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| Vascular lab report | Assessed by: Apurba Dahal (Trainee); Supervised by: Daniel Sims (CVS) | |
| Name: Jackman, Benjamin | Hospital No: G030096 | Date of Exams: 16/05/2019 |
| DOB: 07/11/1977 | NHS No: 438 802 2039 | Ip/Op: Outpatient |
| Referrer: Mr Donati | Hospital Site: UHL | |
| Clinical Indications: Recurrent varicose vein after left SSV EVLT | | |
| Left Lower Limb Venous Insufficiency scan | | |
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| Report:  The Sapheno-Femoral Junction and the Great Saphenous Vein are patent and competent.  The Sapheno-Popliteal Junction and proximal 3-3.5cm segment of the Short Saphenous vein above knee is patent **but grossly incompetent.**  **The SSV is noted to be obliterated post EVLT. However, the varicose vein associated with the SSV that branches-off just below the knee is still patent (partial chronic thrombus is present in 1st 4-5cm of the vein). The reflux from SPJ/ proximal-most SSV is still exiting into the varicose vein. The vein courses laterally and anteriorly into the shin area tracking distally to the ankle.**  Post treatment, there now appears to be a 2nd SSV present, previously not imaged which is of small calibre and competent in prox-mid calf. A small communicating vein from the above mentioned varicose vein joins the 2nd SSV approximately 10cm above ankle. The 2nd SSV is noted to be incompetent below this level.  All the Deep veins are patent and competent. No incompetent perforators imaged. | | |