



**Reason** Stroke  
**Outcome** Intimal thickening

Right	Diameter (cm)	PSV (m/s)	EDV (m/s)	Stenosis
<b>Common</b> Plaque Mixed Disease length from BIF		0.85		< 30%
<b>Bifurcation</b> Plaque Dense Calcified Disease length from BIF				< 30%
<b>Internal</b> Plaque Intimal Thickening Disease length from BIF		0.91		< 30%
<b>External</b> Plaque Intimal Thickening Disease length from BIF		1.18		< 30%
<b>Vertebral</b>	Open Orthograde			
<b>Subclavian</b>	No Turbulence	Good signal	Triphasic	Widely Patent

Left	Diameter (cm)	PSV (m/s)	EDV (m/s)	Stenosis
<b>Common</b> Plaque Mixed Disease length from BIF		0.83		< 30%
<b>Bifurcation</b> Plaque Dense Disease length from BIF				< 30%
<b>Internal</b> Plaque Normal Disease length from BIF		0.91		< 30%
<b>External</b> Plaque Normal Disease length from BIF		1.18		< 30%
<b>Vertebral</b>	Open Orthograde			
<b>Subclavian</b>	No Turbulence	Good signal	Biphasic	Widely Patent

#### Stenosis based on NASCET velocity criteria.

Joint recommendations for reporting carotid ultrasound investigations in the United Kingdom'. Oates et al. Eur J Vasc Endovasc Surg. 2009 Mar;37(3):251-61

#### Notes

##### CAROTID DUPLEX:

Mixed and dense plaques identified in the right carotid bifurcation forming a less than 30% stenosis. Intimal thickening identified in the right internal carotid artery, forming a less than 30% reduction in luminal diameter.

Dense plaques identified in the left carotid bifurcation forming a less than 30% stenosis. The left internal carotid artery appears widely patent with no evidence of any plaque morphology, intimal dissection or other abnormality identified.

Assessed by Sharifa Kiyegga

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