



**Reason** TIA  
**Outcome** Mild disease

Right	Diameter (cm)	PSV (m/s)	EDV (m/s)	Stenosis
<b>Common</b>		0.70		< 25%
Plaque	Normal			
Disease length from BIF				
<b>Bifurcation</b>				< 30%
Plaque	Mixed			
Disease length from BIF				
<b>Internal</b>		0.91		< 40%
Plaque	Dense Calcified			
Disease length from BIF		<b>Pk ICA/Pk CCA = 1.3</b>		
<b>External</b>		1.51		< 30%
Plaque	Intimal Thickening			
Disease length from BIF				
<b>Vertebral</b>	Open Orthograde			
<b>Subclavian</b>	No Turbulence	Good signal	Biphasic	Widely Patent

Left	Diameter (cm)	PSV (m/s)	EDV (m/s)	Stenosis
<b>Common</b>		0.84		< 30%
Plaque	Intimal Thickening			
Disease length from BIF				
<b>Bifurcation</b>				< 30%
Plaque	Intimal Thickening			
Disease length from BIF				
<b>Internal</b>		0.64		< 30%
Plaque	Intimal Thickening			
Disease length from BIF		<b>Pk ICA/Pk CCA = 0.8</b>		
<b>External</b>		1.28		< 30%
Plaque	Intimal Thickening			
Disease length from BIF				
<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

Dense and calcified plaques identified in the right internal carotid artery, forming a less than 40% stenosis. Intimal thickening identified in the left internal carotid artery, forming a less than 30% reduction in luminal diameter.

Assessed by Sharifa Kiyegga

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