

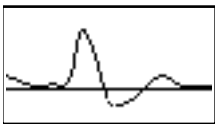


Reason Claudication
Outcome Stenosis moderate

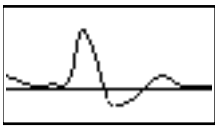
Right

140

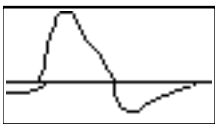
1.00



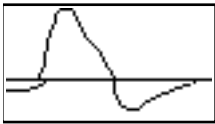
Good



Good



Good



Good

120

0.86

Brachial

Common Femoral

High Thigh

Low Thigh

Popiteal

High Calf

Peroneal

Anterior Tibial

Posterior Tibial

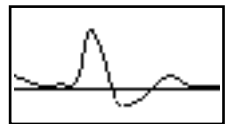
Dorsalis Pedis

Toe Pressure

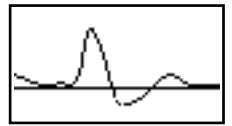
Post Exercise

Left

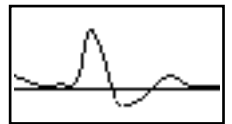
Good



Good



Good



Good

150

1.07



Notes

BILATERAL LOWER LIMB ARTERIAL DUPLEX

Aorta - appears patent with no evidence of focal dilation (measure 1.9cm in L.S), triphasic waveforms.

RIGHT:

CIA - appears moderately stenosed, PSV >300cm/s.

EIA - appears patent, good triphasic waveforms.

CFA, PFA origin, SFA and PopA - patent with mild disease, triphasic waveforms, 87-42cm/s.

Assessed by Sharifa Kiyegga

Printed on 16/12/2019 at 2:55 am

Checked by



TPT is patent. 3 run-off origins noted.
ATA and PTA - patent along length, good bi/triphasic waveforms at the ankle, PSSV 42cm/s.

LEFT:

CFA - widely patent with mild disease, triphasic waveforms, PSV 103cm/s.
PFA origin - appears moderately stenosed, PSV 226cm/s.
SFA and PopA - widely patent with mild disease, triphasic waveforms, PSV 59-143cm/s.
TPT is patent. 3 run-off origins noted.
ATA and PTA - patent along length, triphasic waveforms at the ankle, PSV 33-67cm/s.

Right ABPI's within normal limits (0.86) and reduced to 0.79 post a 1-minute calf raises exercise challenge
Left ABPI is good (1.07) with no significant reduction in systolic ankle pressure following a 1-minute calf raises exercise challenge.

