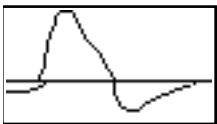




**Reason** Claudication  
**Outcome** Stenosis severe, Occlusion, Calcified

## Right



Good



Good



Slightly Reduced



Absent

Brachial

Common Femoral

High Thigh

Low Thigh

Popliteal

High Calf

Peroneal

Anterior Tibial

Posterior Tibial

Dorsalis Pedis

Toe Pressure

Post Exercise

## Left

## Notes

### RIGHT LOWER LIMB ARTERIAL DUPLEX

CFA - widely patent with mildly turbulent flow, good tri/biphasic waveforms, PSV 180cm/s.

PFA origin - not identified ?patency ?occluded

SFA - appears patent with mild to moderate calcified disease, good biphasic waveforms, PSV 94-101cm/s.

PopA - patent with mild to moderate disease, good biphasic waveforms, PSV 47-67cm/s.

TPT is patent. 3 run-off origins noted.

ATA - calcified with multiple obscured regions. Proximal vessel is patent with good biphasic waveforms.

Assessed by Sharifa Kiyegga

Printed on 16/12/2019 at 2:29 am

Checked by



Severe stenosis identified in the mid vessel, velocities increase from PSV 51cm/s to 240cm/s. Distal vessel is patent, slightly reduced monophasic at the ankle, PSV 46cm/s.  
PTA - calcified and is partially obscured. Vessel appears patent proximally. Mid vessel appears occluded with collateral vessels noted in this region. Vessel reforms distally and appears to occlude at the ankle.  
Pero A - calcified with intermittent flow.

Right resting ABPI not performed due to crural vessel calcification.

