



Reason Claudication
Outcome Stenosis severe, Occlusion

Right

Brachial

Common Femoral

High Thigh

Low Thigh

Popliteal

High Calf

Peroneal

Anterior Tibial

Posterior Tibial

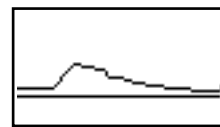
Dorsalis Pedis

Toe Pressure

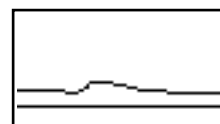
Post Exercise

Left

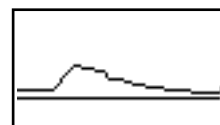
Reduced



Weak



Weak



Notes

LEFT LOWER LIMB ARTERIAL DUPLEX

The aorta appears patent with no evidence of focal dilation, maximum inner-to-inner dimension in L.S plane is 1.4cm. Good biphasic waveforms.

CIA - appears patent proximally with good biphasic waveforms, PSV 94cm/s. Distal vessel was obscured by acoustic shadowing.

EIA - proximal to mid vessel appears patent with slightly reduced monophasic waveforms, PSV 41cm/s. The very distal vessel appears moderately stenosed with velocities increasing from PSV 47cm/s to PSV

Assessed by Sharifa Kiyegga

Printed on 16/12/2019 at 3:28 am

Checked by



148cm/s.

CFA - severely stenosed with velocities increasing from PSV 27cm/s to PSV 399cm/s.

The SFA/PFA bifurcation was obscured for ~0.7cm.

PFA origin - obscured at the origin ?patency. Patent distal to the obscured region with damp monophasic waveforms, PSV 15cm/s.

SFA - vessel origin is obscured by calcium shadowing. Turbulent monophasic flow noted distal to the obscured region - suggestive of significant disease within the obscured region. The proximal to mid vessel appears patent with reduced monophasic waveforms. SFA in the distal thigh was obscured by calcium shadowing but appears to occlude at 45cm proximal to the MM and appears to reform at the above knee popliteal artery.

PopA - Partially obscured proximally. Distal vessel appears patent with reduced monophasic waveforms, PSV 22cm/s.

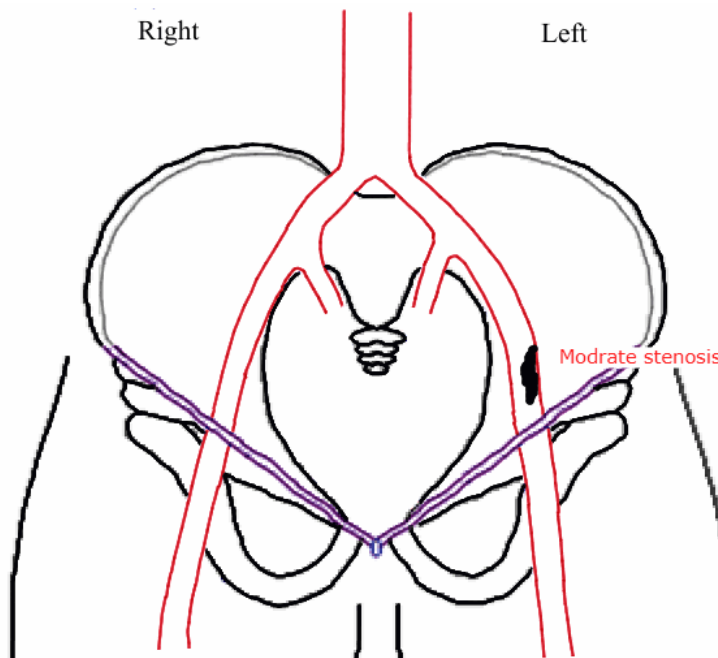
TPT is calcified distally but appears patent. 3 run-off origins noted.

ATA - patent along length, damp monophasic waveforms at the ankle, PSV 12cm/s.

PTA - proximal to mid vessel appears patent. Vessel appears to occlude in the distal calf and reforms at the ankle, damp monophasic waveforms, PSV 9cm/s.

Pero A - patent the ankle, damp monophasic waveforms, PSV 13cm/s.

Left resting ABPI attempted, however signal too weak.





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