



Patient	NHS No
D.O.B.	Patient Ref

Reason	TIA clinic
Outcome	Stenosis moderate, Calcified, Poor images

Right	Diameter (cm)	PSV (m/s)	EDV (m/s)	Stenosis
<b>Common</b>		1.13		< 50%
Plaque	Dense Mixed			
Disease length from BIF				
<b>Bifurcation</b>				40% - 49%
Plaque	Dense Mixed Calcified			
Disease length from BIF				
<b>Internal</b>		2.11	0.33	50% - 59%
Plaque	Dense Mixed Calcified			
Disease length from BIF	0.80cm			
		<b>Pk ICA/Pk CCA = 1.9</b>		
<b>External</b>		1.62		40% - 49%
Plaque	Dense Mixed Calcified			
Disease length from BIF				
<b>Vertebral</b>	Open Orthograde			
<b>Subclavian</b>	Mild/Moderate Turbulence	Good Signal	Biphasic	Widely Patent

Left	Diameter (cm)	PSV (m/s)	EDV (m/s)	Stenosis
<b>Common</b>		1.05		< 40%
Plaque	Dense Mixed			
Disease length from BIF				
<b>Bifurcation</b>				< 50%
Plaque	Dense Mixed Calcified			
Disease length from BIF				
<b>Internal</b>		1.33	0.19	40% - 49%
Plaque	Dense Mixed Calcified			
Disease length from BIF	but is obscured			
		<b>Pk ICA/Pk CCA = 1.3</b>		
<b>External</b>		1.14		40% - 49%
Plaque	Dense Mixed Calcified			
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 ASSESSMENT**

Difficult assessment due to vessel morphology and extensive calcification.

Mixed, dense and calcified plaques identified at the origin of the right internal carotid artery forming an ~50-59% stenosis based on velocities and grey-scale imaging.

ICA becomes obscured just distal to its origin; unable to confirm the patency of the mid-distal vessel.

Mixed, dense and calcified plaques at the origin of the left internal carotid artery forming a 40-49% stenosis.

Assessed by Lukasz Koprowski

Checked by \_\_\_\_\_



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The slightly elevated velocities at the ICA origin ?due to vessel angulation / morphology.

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Assessed by

Lukasz Koprowski

Checked by

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