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| Patient: |  |
| Date of Birth: | Age: 87 |
| District Number: |  |
| Date of Scan: | Tuesday, 16 June 2020 |
| Ward/Dept. |  |
| Referring Doctor: |  |
| Indications: | 87 yo gentleman with blue left foor for 3/52, no palpable dorsalis Pedis. Noteable dry gangrene on big toe and third toe. Doppler to assess arterial patency. |
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| **Left Lower Extremity Arterial Duplex** | |
| T203  50-74%  M28  M22  M12  M36/176  M134  T59  M22  M25  M21  O  M28  M67  M24  M36  M17  M20  M29  M17  M16  O  O  Patent  T……...Triphasic  B……....Biphasic M….Monophasic  O…..…Occluded  Arterial velocities in cm/s | |
| Plaque Type: | Homogenous Heterogenous Calcific Smooth Surface Irregular Surface | |
| Aortoiliac Segment:  Fem-Fem XO graft: | Previous EVAR noted (under surveillance). The residual aneurysm sac has a maximum transverse diameter of 5.1cm and anteroposterior diameter of 4.9cm, showing no change in size since August 2019. No endoleak seen. The left CIA and EIA are occluded. Diffuse calcific narrowing throughout the right EIA, with no focal stenosis seen.  Previous Fem-Fem cross over graft noted. This is patent with no stenosis seen throughout. |
| Common Femoral Artery: | Patent. Mild calcific atheroma with no focal stenosis seen. |
| Proximal Profunda Femoris: | Patent at origin. |
| Superficial Femoral Artery: | Patent. 50-74% focal mid SFA stenosis, with diffuse calcific atheroma throughout. |
| Popliteal Artery: | Patent. Diffuse calcification throughout. No focal stenosis seen. |
| Calf: | The mid-distal PTA is occluded, refilling distally. Diffuse calcification throughout all vessels. |
| Scanned by: | Robert James - Clinical Vascular Scientist |