|  |  |
| --- | --- |
| Patient: |  |
| Date of Birth: | Age: 43 |
| District Number: | DIS0304674 |
| Date of Scan | Tuesday, 16 June 2020 |
| Ward/Dept: |  |
| Referring Doctor | Mr SC Harrison |
| Indications: | Sudden onset short distance claudication. Smoker. |
|  |
| **Right Lower Extremity Arterial Duplex** | |
| 50-74%  M75/28  M331/65  75-99%  M42  M16  T135  T95  M50  M44  M35  M15  T75  T100  T80  Patent  T72  T158  T77  T100  T……...Triphasic  B……....Biphasic M….Monophasic  O…..…Occluded  Arterial velocities in cm/s | |
| Plaque Type: | Homogenous Heterogenous Calcific Smooth Surface Irregular Surface | |
|  |  |
| Comments: | **Exercise ABPI performed and reported separately.** |
| Aortoiliac Segment: | Patent. No significant arterial disease seen. Normal calibre Aorta. |
| Common Femoral Artery: | Patent. No significant arterial disease seen. |
| Proximal Profunda Femoris: | Patent at origin. |
| Superficial Femoral Artery: | Patent. 75-99% distal SFA stenosis. |
| Popliteal Artery: | Patent. No significant arterial disease seen. |
| Calf: | 3 vessel run off seen to cross the ankle. 50-74% proximal ATA stenosis. |
| Scanned by: | Robert James - Clinical Vascular Scientist |