**Image recording protocol for Picture Archive and Communication system (PACS)**

Vascular Image Protocol for PACS

All images must be labelled with anatomy and orientation.

Ensure all patient data is entered as appropriate.

This list is not exhaustive, it is a minimum requirement. Other images can be captured at the users discretion especially if abnormal/ unusual pathology is noted.

All images should be recorded and appropriately labelled.

1. **Carotid** –
   1. Right/Left side - CCA, ECA and ICA (bifurcation if diseased) demonstrating colour and waveforms. Vertebral and subclavian arteries demonstrating flow direction in vertebral, colour and waveforms. High quality grey scale image of ICA and bifurcation.
2. **TCD** – no images taken
3. **Peripheral Arterial and waveform assessment** – Right and left CFA, POP, PTA and ATA waveforms.
4. **Lower limb arterial** – CFA, PFA, SFA origin, mid and distal unless diseased and then demonstrate stenosis with waveforms. Popliteal and TPT. Waveforms at ankle.
5. **Lower limb venous DVT-**
   1. Right/left leg - CFV including Valsalva, PFV, SFV origin and distal, Popliteal. Only take image in the calf if DVT identified or differential diagnosis eg. Muscle tear, Baker’s cyst, superficial oedema or thrombo-phlebitus. Need to record images with measurements of abnormal masses such as enlarged lymph nodes, Bakers cysts, muscle tears. If required to demonstrate occlusive vein or compressibility use dual image function to show venous compression.
6. **Lower limb venous Varicose veins –** 
   1. Right and left legs
      1. Follow deep venous protocol as above
      2. Superficial junctions demonstrating incompetence.
      3. Sections of LSV in thigh and calf demonstrating incompetence and TS images showing diameters for VNUS suitability if required
      4. Section of SSV in mid calf demonstrating incompetence and TS images showing diameters for VNUS suitability if required