

LAWRENCE, BARRY THOMAS

35 DOOLEY ROAD, HALSTEAD, ESSEX, CO9 1JW

Ref. Locn. : **STROKE UNIT GAINSBOROUGH WING**Referrer : **NGEH JKT**

Ref Spec: STROKE MEDICINE

DoB : **16-Dec-1949**Hosp. No. : **D5151698**CRIS No. : **21553971**NHS No : **452 499 4203****VERIFIED** Verified By : Das Rajib Vascular Studies 04-May-2021

Typed By : Das Rajib Vascular Studies 04-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25938998]****Right Side:**

Mild wall thickening seen in the common carotid artery and carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 93 cm/sec, EDV 19 cm/sec) , internal carotid artery (PSV 66 cms/sec, EDV 20 cms/sec) and external carotid artery (PSV 57 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall thickening seen in the common carotid artery and carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 74 cm/sec, EDV 19 cm/sec) , internal carotid artery (PSV 73 cms/sec, EDV 19 cms/sec) and external carotid artery (PSV 74 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25461427

Courier :

Examination Date : **04-May-2021**

Ref. Source : NGEH JKT, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER R

Examinations : **US Doppler carotid artery Both**

TERRY, EILEENDoB: **02-Aug-1930****4 THE DALES, DOVERCOURT, HARWICH, CO12 4XH**Hosp. No. **D0311312**Ref. Locn. : **Gainsborough - Clinic**CRIS No. **21414868**Referrer : **NGEH JKT**Ref Spec: **STROKE MEDICINE**NHS No. **414 308 8983****VERIFIED** Verified By : Das Rajib Vascular Studies 04-May-2021

Typed By : Das Rajib Vascular Studies 04-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25939325] :****Right Side:**

Mild calcification seen in the common carotid artery and carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 43cm/s and EDV 15cm/s) , internal carotid artery (PSV 49 cms/sec,EDV 20 cms/sec) and external carotid artery (PSV 73 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild calcification seen in the common carotid artery, Irregular, heterogeneous plaque with irregular surface seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 61 cm/sec, EDV 13 cm/sec) , internal carotid artery (PSV 57 cms/sec ,EDV 19 cms/sec) and external carotid artery (PSV 79 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25461709

Courier :

Examination Date : **04-May-2021**

Ref. Source : NGEH JKT, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER ROAD

Examinations : **US Doppler carotid artery Both**

SPARROW, DAREN JEFFREYDoB : **19-May-1969****1 UPPER BRANSTON ROAD, CLACTON ON SEA, ESSEX, CO15 3JS**Hosp. No. : **D0055317**Ref. Locn. : **Gainsborough - Clinic**CRIS No. : **20591599**Referrer : **NGEH JKT**Ref Spec: **STROKE MEDICINE**NHS No. : **426 647 3958****VERIFIED** Verified By : Das Rajib Vascular Studies 04-May-2021

Typed By : Das Rajib Vascular Studies 04-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25939395] :**

Right side

CCA widely patent with normal doppler signals, PSV 86 cm/s and EDV 23 cm/s.

Carotid bulb is clear.

ECA is widely patent with normal doppler signals, PSV 109cm/s.

ICA is widely patent with normal doppler signals, PSV 74 cm/s and EDV 32 cm/s.

Vert A is patent with normal antegrade doppler signals.

Left side

CCA widely patent with normal doppler signals, PSV 94 cm/s and EDV 25 cm/s.

Carotid bulb is clear.

ECA is widely patent with normal doppler signals, PSV 136 cm/s.

ICA is widely patent with normal doppler signals, PSV 53 cm/s and EDV 22 cm/s.

Lt Vert A is relative smaller the right side, Vert A is patent with normal antegrade doppler signals.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25461774

Courier :

Examination Date : **04-May-2021**

Ref. Source : NGEH JKT, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER R

Examinations : **US Doppler carotid artery Both**

WARREN, PATRICK ROBERTDoB: **11-Feb-1952****16 GRANGE FARM PARK, WHITEHALL ROAD, COLCHESTER, CO2 8AL**Hosp. No. **D0692105**Ref. Locn.: **Gainsborough - Clinic**CRIS No.: **10035885**Referrer: **NGEH JKT**Ref Spec: **STROKE MEDICINE**NHS No. **466 078 4037****VERIFIED** Verified By : Das Rajib Vascular Studies 04-May-2021

Typed By : Das Rajib Vascular Studies 04-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25939464] :****Right Side:**

Mild calcification seen in the common carotid artery, Irregular , heterogeneous with irregular surface plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 111 cm/sec, EDV 18 cm/sec) , internal carotid artery (PSV 123 cms/sec, EDV 18 cms/sec) and external carotid artery (PSV 140 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Normal Doppler signals in the common carotid artery (PSV 70 cm/sec, EDV 13 cm/s).

There is some irregular heterogeneous plaques, with irregular surface seen in the carotid bulb, extended into the proximal ICA and ECA.

Doppler signals in the internal carotid artery are enhanced PSV 155 cm/sec, EDV 35 cm/sec, with downstream turbulence. The PSV_{ic}/EDV_{cc} ratio is 12 The PSV_{ic}/PSV_{cc} ratio is 2.21 which implies a 50-59 % ICA stenosis extending over ~ 1 cms.

Normal Doppler signals in the external carotid artery (PSV 109 cm/sec).

Patent vertebral artery with antegrade flow.

Summary/Diagnosis:

Right Side - There is no evidence of any significant extracranial Carotid disease.

Left Side - There is 50-59% stenosis of the proximal ICA.

NASCET method used for velocity criteria.

Event Number : E-25461836

Courier :

Examination Date : **04-May-2021**

Ref. Source : NGEH JKT, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER R

Examinations : **US Doppler carotid artery Both**

REGAN, PAULA MAY

DoB 27-Nov-1964

109 MONKWICK AVENUE, COLCHESTER, CO2 8LR

Hosp. No. D0572678

Ref. Locn. : OUTPATIENT DEPT CGH

CRIS No. 20053742

Referrer : SAKSENA RAJESH

Ref Spec:STROKE MEDICINE

NHS No. 476 877 9042

VERIFIED Verified By : Das Rajib Vascular Studies 04-May-2021

Typed By : Das Rajib Vascular Studies 04-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25938844] :****Right Side:**

Mild calcification seen in the common carotid artery smooth, homogeneous plaque (hypoechoic), with smooth surface seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 80 cm/sec, EDV 23 cm/sec) , internal carotid artery (PSV 98 cms/sec,EDV 36 cms/sec) and external carotid artery (PSV 120 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall thickening /calcification seen in the common carotid artery, Irregular, heterogeneous plaque, with irregular surface seen in carotid bulb and proximal internal carotid artery and external Carotid artery.

Normal Doppler signals in the common carotid artery (PSV 63 cm/sec, EDV 19 cm/sec) , internal carotid artery (PSV 58 cms/sec,EDV 23 cms/sec)

Velocity into the external carotid artery is enhanced (PSV 132 cm/sec) with flow disturbance, haemodynamically suggestive of 50-60% stenosis.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: There is 50-60% stenosis of the extracranial ECA.

NASCET method used for velocity criteria.

Event Number : E-25461289

Courier :

Examination Date : 04-May-2021

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler carotid artery Both**

GAILEY, GEORGINA

DoB : 28-Sep-1963

10 KIRBY ROAD, WALTON ON THE NAZE, ESSEX, CO14 8QP

Hosp. No. : D5039779

Ref. Locn. : Gainsborough - Clinic

CRIS No. : 10072890

Referrer : SAKSENA RAJESH

Ref Spec: STROKE MEDICINE

NHS No. 482 044 1515

VERIFIED Verified By : Das Rajib Vascular Studies 05-May-2021

Typed By : Das Rajib Vascular Studies 05-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25940043] :****Right Side:**

Mild wall thickening seen in the common carotid artery, Irregular, heterogeneous plaque with irregular surface (predominantly calcified) seen in carotid bulb and proximal internal carotid artery, length of the plaques measures ~2.3cm (carotid bulb/ICA), causing acoustic shadowing, therefore ~1.0 cm segment of the Carotid bulb and Proximal ICA is poorly assessed.

Normal Doppler signals in the common carotid artery (PSV 65 cm/sec, EDV 20 cm/sec), internal carotid artery (PSV cms/sec, EDV cms/sec) but with mild spectral broadening which implies a < 50% stenosis), and external carotid artery (PSV 110 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall thickening seen in the common carotid artery, Irregular, heterogeneous plaque with irregular surface (predominantly calcified) seen in carotid bulb and proximal internal carotid artery, length of the plaques measures ~1.9 cm (carotid bulb/ICA), causing acoustic shadowing, therefore short segment of the Carotid bulb and Proximal ICA is poorly assessed.

Normal Doppler signals in the common carotid artery (PSV 70 cm/sec, EDV 22 cm/sec), internal carotid artery (PSV 86 cms/sec, EDV 29 cms/sec) but with mild spectral broadening which implies a < 50% stenosis), and external carotid artery (PSV 97 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Another modality of imaging recommended.

Event Number : E-25462359

Courier :

Examination Date : 05-May-2021

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : US Doppler carotid artery Both

WHELAN, PAUL

DoB : 27-Aug-1952

39 WADE REACH, WALTON-ON-THE-NAZE, ESSEX, CO14 8RE

Hosp. No. : D5229721

Ref. Locn. : Gainsborough - Clinic

CRIS No. : 20037662

Referrer : SAKSENA RAJESH

Ref Spec:STROKE MEDICINE

NHS No. 456 384 5027

VERIFIED Verified By : Das Rajib Vascular Studies 05-May-2021

Typed By : Das Rajib Vascular Studies 05-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25940482]****Right Side:**

Mild calcification seen in the common carotid artery and carotid bulb.

Normal Doppler signals in the common carotid artery (PSV 111 cm/sec, EDV 7.0 cm/sec) , internal carotid artery (PSV 65 cms/sec,EDV 18 cms/sec) and external carotid artery (PSV 92 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall thickening seen in the common carotid artery, Irregular, heterogeneous plaque with irregular surface (predominantly echogenic) seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 103 cm/sec, EDV 25 cm/sec) , internal carotid artery (PSV cms/sec,EDV cms/sec) and external carotid artery (PSV 101 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25462749

Courier :

Examination Date : 05-May-2021

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler carotid artery Both**

TAYLOR, MICHAEL JOHN

DoB : 15-Jun-1944

8 HICKORY AVENUE, COLCHESTER, ESSEX, CO4 3NY

Hosp. No. : D0600212

Ref. Locn. : EAU Short Stay Unit

CRIS No. : 10016223

Referrer : TOH VIVIEN KAH

Ref Spec: ENDOCRINOLOGY

NHS No. 400 697 2784

VERIFIED Verified By : Das Rajib Vascular Studies 05-May-2021

Typed By : Das Rajib Vascular Studies 05-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25940636]****Right Side:**

Mild wall seen in the common carotid artery and carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 64 cm/sec, EDV 11 cm/sec) , internal carotid artery (PSV 50 cms/sec, EDV 10 cms/sec) and external carotid artery (PSV 77 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall thickening seen in common carotid artery, Smooth , homogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 74 cm/sec, EDV 14 cm/sec) , internal carotid artery (PSV 121 cms/sec, EDV 35 cms/sec) but with mild spectral broadening which implies a < 50% stenosis.), ECA is also patent with normal doppler signals.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: There is some smooth homogenous plaques into the carotid bulb and proximal ICA, causing <50% stenosis.

NASCET method used for velocity criteria.

Event Number : E-25462895

Courier :

Examination Date : 05-May-2021

Ref. Source : TOH VIVIEN KAH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURI

Examinations : US Doppler carotid artery Both

CARR, DOROTHY ANNDoB: **14-Dec-1951****26 REIGATE AVENUE, CLACTON-ON-SEA, CO16 8FB**Hosp. No.: **D0688695**Ref. Locn.: **Gainsborough - Clinic**CRIS No.: **10093808**Referrer: **RAMACHANDRAN SIVAKUMAR** Ref Spec: **STROKE MEDICINE**NHS No.: **452 577 3081****VERIFIED** Verified By : Das Rajib Vascular Studies 06-May-2021

Typed By : Das Rajib Vascular Studies 06-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25941977] :****Right Side:**

Mild calcification seen in the common carotid artery and carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 72 cm/sec, EDV 19 cm/sec) , internal carotid artery (PSV 65 cms/sec,EDV 17 cms/sec) and external carotid artery (PSV 115 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild calcification seen in the common carotid artery and carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 59 cm/sec, EDV 9.0 cm/sec) , internal carotid artery (PSV 70 cms/sec,EDV 23 cms/sec) and external carotid artery (PSV 91 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25464081

Courier :

Examination Date : **06-May-2021**

Ref. Source : RAMACHANDRAN SIVAKUMAR, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HC

Examinations : **US Doppler carotid artery Both**

COLE, ROBERT

DoB: 28-Aug-1951

BENACHIE, BEECH HILL, LEXDEN, COLCHESTER, CO3 4DU

Hosp. No.: D0541545

Ref. Locn.: STROKE UNIT GAINSBOROUGH WING

CRIS No.: 20021918

Referrer: SAKSENA RAJESH

Ref Spec: STROKE MEDICINE

NHS No.: 458 099 4876

VERIFIED Verified By : Das Rajib Vascular Studies 07-May-2021

Typed By : Das Rajib Vascular Studies 07-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25943202] :****Right side**

CCA widely patent with normal doppler signals, PSV 90 cm/s and EDV 19 cm/s.

Carotid bulb is clear.

ECA is widely patent with normal doppler signals, PSV 108 cm/s.

ICA is widely patent with normal doppler signals, PSV 84 cm/s and EDV 43 cm/s.

Vert A is patent with normal antegrade doppler signals.

Left side

CCA widely patent with normal doppler signals, PSV 82 cm/s and EDV 17 cm/s.

Carotid bulb is clear.

ECA is widely patent with normal doppler signals, PSV 130 cm/s.

ICA is widely patent with normal doppler signals, PSV 66 cm/s and EDV 20 cm/s.

Vert A is patent with normal antegrade doppler signals.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25465202

Courier :

Examination Date : 07-May-2021

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler carotid artery Both**

BENNETT, ROGER EDWARDDoB : **10-Oct-1950****62 JUBILEE AVENUE, CLACTON-ON-SEA, CO16 9QT**Hosp. No. **D0950857**Ref. Loch. : **Primary Care Centre (EP) - 1st Floor**CRIS No. **21485173**Referrer : **BANSAL VIVEK**

Ref Spec:OPHTHALMOLOGY

NHS No **456 355 2380****VERIFIED** Verified By : Das Rajib Vascular Studies 08-May-2021

Typed By : Das Rajib Vascular Studies 08-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25941482] :****Right Side:**

Mild calcification seen in the common carotid artery and carotid bulb.

Normal Doppler signals in the common carotid artery (PSV 82 cm/sec, EDV 15 cm/sec) , internal carotid artery (PSV 80 cms/sec,EDV 18 cms/sec) and external carotid artery (PSV 48 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild calcification seen in the common carotid artery and carotid bulb.

Normal Doppler signals in the common carotid artery (PSV 100 cm/sec, EDV 25 cm/sec) , internal carotid artery (PSV 85 cms/sec,EDV 24 cms/sec) and external carotid artery (PSV 90 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25463643

Courier :

Examination Date : **08-May-2021**

Ref. Source : BANSAL VIVEK, PRIMARY CARE CENTRE, PRIMARY CARE CENTRE, TURNER ROAD, COLCHESTER

Examinations : **US Doppler carotid artery Both**

BUSH, CLARE BRENDADoB **09-Jan-1968****49 HIGH STREET, ROWHEDGE, CO5 7ET**Hosp. No. **D0064455**Ref. Locn. : **OUTPATIENT DEPT CGH**CRIS No. **20011529**Referrer : **SAKSENA RAJESH**Ref Spec: **STROKE MEDICINE**NHS No. **426 680 1726****VERIFIED** Verified By : Das Rajib Vascular Studies 11-May-2021

Typed By : Das Rajib Vascular Studies 11-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25945946] :****Right Side:**

Mild calcification seen in the common carotid artery, Irregular , heterogeneous plaque with smooth surface, mainly hypoechoic, measures (2.4 X 4.4)mm TS, seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 86 cm/sec, EDV 25 cm/sec) , internal carotid artery (PSV 81 cms/sec,EDV 26 cms/sec) and external carotid artery (PSV 71 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild calcification seen in the common carotid artery and carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 84 cm/sec, EDV 29 cm/sec) , internal carotid artery (PSV 77 cms/sec,EDV 28 cms/sec) and external carotid artery (PSV 76 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25467605

Courier :

Examination Date : **11-May-2021**

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler carotid artery Both**

BENNETT, SHARON

DoB: 16-Mar-1968

VALLEY VIEW, MIDDLEFIELD, HALSTEAD, ESSEX, CO9 2EP

Hosp. No.: D0345856

Ref. Locn.: OUTPATIENT DEPT CGH

CRIS No.: 10052101

Referrer: SAKSENA RAJESH

Ref Spec: STROKE MEDICINE

NHS No.: 430 074 9477

VERIFIED Verified By : Das Rajib Vascular Studies 11-May-2021

Typed By : Das Rajib Vascular Studies 11-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25946044] :**

Right side

CCA widely patent with normal doppler signals, PSV 74 cm/s and EDV 28 cm/s.

Carotid bulb is clear.

ECA is widely patent with normal doppler signals, PSV 102 cm/s.

ICA is widely patent with normal doppler signals, PSV 82 cm/s and EDV 42 cm/s.

Vert A is patent with normal antegrade doppler signals.

Left side

CCA widely patent with normal doppler signals, PSV 95 cm/s and EDV 42 cm/s.

Carotid bulb is clear.

ECA is widely patent with normal doppler signals, PSV 88 cm/s.

ICA is widely patent with normal doppler signals, PSV 71 cm/s and EDV 32 cm/s.

Vert A is patent with normal antegrade doppler signals.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25467693

Courier :

Examination Date : 11-May-2021

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler carotid artery Both**

MITCHELL, GORDON JOHNDoB : **23-Jul-1948****259 BERECHURCH HALL ROAD, COLCHESTER, ESSEX, CO2 9NP**Hosp. No. : **D0538474**Ref. Locn. : **STROKE UNIT GAINSBOROUGH WING**CRIS No. : **10094370**Referrer : **NGEH JKT**Ref Spec: **STROKE MEDICINE**NHS No. : **452 497 0975****VERIFIED** Verified By : Das Rajib Vascular Studies 11-May-2021

Typed By : Das Rajib Vascular Studies 11-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25946388] :****Right Side:**

Mild wall thickening seen in the common carotid artery, there is some heterogenous plaques seen in the carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 76 cm/sec, EDV 12 cm/sec) , internal carotid artery (PSV 96 cms/sec, EDV 24 cms/sec) and external carotid artery (PSV 111 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

CCA and ECA is patent with normal doppler signals, velocities measures within the normal range.

ICA endarterectomy is patent with no evidence of any significant stenosis.

Vert A demonstrated normal antegrade doppler signals.

Summary/Diagnosis:

Right Side - There is no evidence of any significant extracranial Carotid disease.

Left Side - There is no evidence of any significant extracranial Carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25468011

Courier :

Examination Date : **11-May-2021**

Ref. Source : NGEH JKT, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER ROAD

Examinations : **US Doppler carotid artery Both**

CRANFIELD, MARILYN MABELDoB: **05-Nov-1951****10 NIGHTINGALE CLOSE, COLCHESTER, CO4 3XS**Hosp. No.: **D0087592**Ref. Locn.: **Gainsborough - Clinic**CRIS No.: **21350520**Referrer: **SAKSENA RAJESH**Ref Spec: **STROKE MEDICINE**NHS No.: **452 559 9421****VERIFIED** Verified By : Das Rajib Vascular Studies 14-May-2021

Typed By : Das Rajib Vascular Studies 14-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25949683]****Right Side:**

Mild wall thickening seen in the common carotid artery and carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 54 cm/sec, EDV 16 cm/sec) , internal carotid artery (PSV 73 cms/sec,EDV 26 cms/sec) and external carotid artery (PSV 50 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall calcifications seen in the common carotid artery and carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 80 cm/sec, EDV 21 cm/sec) , internal carotid artery (PSV 61 cms/sec,EDV 16 cms/sec) and external carotid artery (PSV 55 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25470965

Courier :

Examination Date : **14-May-2021**

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler carotid artery Both**

WHITING, BRENDA EMMELINE

DoB: 31-Oct-1938

2 HAYCOCKS LANE, WEST MERSEA, COLCHESTER, CO5 8SS

Hosp. No. D0549085

Ref. Locn. : STROKE UNIT GAINSBOROUGH WING

CRIS No. 21151358

Referrer : RAMACHANDRAN SIVAKUMAR Ref Spec: STROKE MEDICINE

NHS No. 414 314 7033

VERIFIED Verified By : Das Rajib Vascular Studies 15-May-2021

Typed By : Das Rajib Vascular Studies 15-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25950646] :**

Tortuous carotid arteries.

Right Side:

Mild calcification seen in the common carotid artery and carotid bulb. Irregular and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 99 cm/sec, EDV 19 cm/sec) , internal carotid artery (PSV 66 cms/sec, EDV 20 cms/sec) and external carotid artery (PSV 80 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild calcification seen in the common carotid artery and carotid bulb. Irregular and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 89 cm/sec, EDV 15 cm/sec) , internal carotid artery (PSV 68 cms/sec, EDV 11 cms/sec) and external carotid artery (PSV 92 cm/sec) with no significant flow disturbance.

Doppler waveforms of the Vert A, suggestive of partial steal syndrome.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25471830

Courier :

Examination Date : 15-May-2021

Ref. Source : RAMACHANDRAN SIVAKUMAR, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HC

Examinations : **US Doppler carotid artery Both**

MAYES, SARAH CAROLINEDoB: **26-Sep-1959****16 CHERRY TREE CLOSE, HALSTEAD, ESSEX, CO9 2UA**Hosp. No. : **D5165665**Ref. Locn. : **STROKE UNIT GAINSBOROUGH WING**CRIS No. : **21345299**Referrer : **NGEH JKT**Ref Spec: **STROKE MEDICINE**NHS No. **476 729 1348****VERIFIED** Verified By : Das Rajib Vascular Studies 15-May-2021

Typed By : Das Rajib Vascular Studies 15-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25950669] :****Right side**

CCA widely patent with normal doppler signals, PSV 71cm/s and EDV 21cm/s.

Carotid bulb is clear.

ECA is widely patent with normal doppler signals, PSV 80 cm/s.

ICA is widely patent with normal doppler signals, PSV 83 cm/s and EDV 31 cm/s.

Vert A is patent with normal antegrade doppler signals.

Left side

CCA widely patent with normal doppler signals, PSV 85 cm/s and EDV 22 cm/s.

Carotid bulb is clear.

ECA is widely patent with normal doppler signals, PSV 93 cm/s.

ICA is widely patent with normal doppler signals, PSV 70 cm/s and EDV 32 cm/s.

Vert A is patent with normal antegrade doppler signals.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25471851

Courier :

Examination Date : **15-May-2021**

Ref. Source : NGEH JKT, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER R

Examinations : **US Doppler carotid artery Both**

UNWIN, PHILIP NEWMAN

DoB : 15-Aug-1965

33 RIVERSIDE WAY, KELVEDON, COLCHESTER, CO5 9LX

Hosp. No. : D0820596

Ref. Locn. : EMS-EMERGENCY SERVICES

CRIS No. : 21461810

Referrer : TATARANU A

Ref Spec: ACCIDENT & EMERGENCY

NHS No. 426 437 3573

VERIFIED Verified By : Das Rajib Vascular Studies 17-May-2021

Typed By : Das Rajib Vascular Studies 17-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25951482] :**

Right side

CCA widely patent with normal doppler signals, PSV 99 cm/s and EDV 26 cm/s.

Carotid bulb is clear.

ECA is widely patent with normal doppler signals, PSV 119 cm/s.

ICA is widely patent with normal doppler signals, PSV 62 cm/s and EDV 24 cm/s.

Vert A is patent with normal antegrade doppler signals.

Left side

CCA widely patent with normal doppler signals, PSV 100 cm/s and EDV 25 cm/s.

Carotid bulb is clear.

ECA is widely patent with normal doppler signals, PSV 95 cm/s.

ICA is widely patent with normal doppler signals, PSV 67 cm/s and EDV 22 cm/s.

Vert A is patent with normal antegrade doppler signals.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25472546

Courier :

Examination Date : 17-May-2021

Ref. Source : TATARANU A, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER

Examinations : **US Doppler carotid artery Both**

SCRIVENER, DAVID ANDREW

DoB : 11-Nov-1963

139 HARWICH ROAD, COLCHESTER, ESSEX, CO4 3DB

Hosp. No. : D0532907

Ref. Locn. : OUTPATIENT DEPT CGH

CRIS No. : 10079247

Referrer : SALARI NATALIA

Ref Spec: NEUROLOGY

NHS No : 476 858 2575

VERIFIED Verified By : Das Rajib Vascular Studies 21-May-2021

Typed By : Das Rajib Vascular Studies 21-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25943335] :**

Right side

CCA widely patent with normal doppler signals, PSV 75 cm/s and EDV 19 cm/s.

Carotid bulb is clear.

ECA is widely patent with normal doppler signals, PSV 62 cm/s.

ICA is widely patent with normal doppler signals, PSV 59 cm/s and EDV 14 cm/s.

Vert A is patent with normal antegrade doppler signals.

Left side

CCA widely patent with normal doppler signals, PSV 83 cm/s and EDV 24 cm/s.

Carotid bulb is clear.

ECA is widely patent with normal doppler signals, PSV 58 cm/s.

ICA is widely patent with normal doppler signals, PSV 61 cm/s and EDV 23 cm/s.

Vert A is patent with normal antegrade doppler signals.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria

Event Number : E-25465320

Courier :

Examination Date : 21-May-2021

Ref. Source : SALARI NATALIA, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURI

Examinations : **US Doppler carotid artery Both**

PILGRIM, ANDREW STEPHENDoB: **20-Sep-1960****VICTORIA INN, 10 NORTH STATION ROAD, COLCHESTER, CO1 1RB**Hosp. No. **D5401174**Ref. Locn. : **EAU Observation Unit**CRIS No. **21523814**Referrer : **KEMAL T**Ref Spec: **GENERAL MEDICINE**NHS No. **486 250 9150****VERIFIED** Verified By : Das Rajib Vascular Studies 26-May-2021

Typed By : Das Rajib Vascular Studies 26-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25960836] :****Right Side:**

There is some heterogenous plaques with smooth surface seen in the common carotid artery and carotid bulb, extended into the proximal ICA and ECA.

Normal Doppler signals in the common carotid artery (PSV 109 cm/sec, EDV 25 cm/sec) , internal carotid artery (PSV 73 cms/sec, EDV 45 cms/sec) and external carotid artery (PSV 113 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

There is some homogenous hypoechoic smooth plaques seen in the common carotid artery, causing narrowing and enhanced velocities into the mid and distal CCA, PSV 149cm/s and EDV 42cm/s, haemodynamically suggestive of >50% stenosis (as per NASCET velocity criteria).

ECA is patent with normal doppler signals, PSV 114cm/s.

There is some hypoechoic homogenous smooth plaques seen into the carotid bulb and proximal ICA, causing enhanced velocities, PSV 158cm/s and EDV 39cm/s, haemodynamically suggestive of >50% stenosis of the proximal ICA. Mid and distal ICA is patent with normal doppler signals.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: Haemodynamically there is >50% stenosis of the CCA , Also there is >50% stenosis of the proximal ICA.

NASCET method used for velocity criteria.

Another modality of imaging recommended if clinically indicated.

Event Number : E-25480917

Courier :

Examination Date : **26-May-2021**

Ref. Source : KEMAL T, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER RO.

Examinations : **US Doppler carotid artery Both**

MEGICKS, TINA PEGGYDoB : **26-Mar-1965****1 WALTON HALL COTTAGES, OLD HALL LANE, WALTON ON THE NAZE, ESSEX, CO14**Hosp. No. : **D5096271**Ref. Locn. : **OUTPATIENT DEPT CGH**CRIS No. : **10063435**Referrer : **OSMAN HASSAN**Ref Spec: **GENERAL MEDICINE**NHS No. : **476 863 1223****VERIFIED** Verified By : Das Rajib Vascular Studies 26-May-2021

Typed By : Das Rajib Vascular Studies 26-May-2021

Clinical History :**US Doppler carotid artery Both [RDE25931929] :**

Limited scan due to patient body habitus.

Right side

CCA patent with normal doppler signals, PSV 88 cm/s and EDV 15 cm/s.

There is some heterogenous irregular plaques with irregular surface seen in Carotid bulb and proximal internal carotid artery.

ECA is patent with normal doppler signals, PSV 123 cm/s.

Doppler signals in the internal carotid artery are enhanced PSV 218 cm/sec, EDV 55 cm/sec with downstream turbulence. The PSVic/EDVcc ratio is 14 The PSVic/PSV cc ratio is 2.47 which implies a 50 to 60 % ICA stenosis extending into the mid ICA.

Vert A is patent with normal antegrade doppler signals.

Left side

CCA patent with normal doppler signals, PSV 127 cm/s and EDV 25 cm/s.

There is some heterogenous plaques seen in the carotid bulb, extended into the Proximal ICA and ECA.

ECA is patent with normal doppler signals, PSV 164 cm/s, but with mild spectral broadening which implies a < 50% stenosis.

ICA is patent with normal doppler signals, PSV 111 cm/s and EDV 32 cm/s, with mild spectral broadening which implies a < 50% stenosis.

Vert A is patent with normal antegrade doppler signals.

Summary / Diagnosis:

Right Side: There is 50 to 60% stenosis of the ICA.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25455190

Courier :

Examination Date : **26-May-2021**

Ref. Source : OSMAN HASSAN, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TUR

Examinations : **US Doppler carotid artery Both**

NICHOLLS, IAN JDoB : **17-Mar-1950****30 ROMAN ROAD, COLCHESTER, CO1 1UP**Hosp. No. : **D0524608**Ref. Locn. : **STROKE UNIT GAINSBOROUGH WING**CRIS No. : **21261370**Referrer : **SAKSENA RAJESH**Ref Spec: **STROKE MEDICINE**NHS No. : **444 897 4812****VERIFIED** Verified By : Das Rajib Vascular Studies 03-Jun-2021

Typed By : Das Rajib Vascular Studies 03-Jun-2021

Clinical History :**US Doppler carotid artery Both [RDE25968450] :**

Right side

There is mild wall thickening of the CCA and Carotid bulb, extended into the proximal ICA.

CCA is patent with normal doppler signals, PSV 73cm/s and EDV 13cm/s.

ECA is patent with normal doppler signals, PSV 116cm/s.

ICA is also patent with normal doppler signals, PSV 77cm/s and EDV 13cm/s.

Vert A demonstrated normal antegrade doppler signals.

left side

There is mild wall thickening of the CCA and Carotid bulb, extended into the proximal ICA.

CCA is patent with normal doppler signals, PSV 85 cm/s and EDV 12 cm/s.

ECA is patent with normal doppler signals, PSV 103 cm/s.

ICA is also patent with normal doppler signals, PSV 62 cm/s and EDV 36cm/s.

Vert A demonstrated normal antegrade doppler signals.

There is no evidence of any significant extracranial Carotid disease.

NASCET method is followed for velocity criteria.

Event Number : E-25487648

Courier :

Examination Date : **03-Jun-2021**

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler carotid artery Both**

MORTIMER, VALERIE**19 ROSE GARDENS, HARWICH, CO12 4FU**Ref. Locn. : **STROKE UNIT GAINSBOROUGH WING**Referrer : **RAMACHANDRAN SIVAKUMAR** Ref Spec: STROKE MEDICINEDoB: **03-May-1948**Hosp. No. : **D0106353**CRIS No. : **21324342**NHS No. : **408 802 9364****VERIFIED** Verified By : Das Rajib Vascular Studies 11-Jun-2021

Typed By : Das Rajib Vascular Studies 11-Jun-2021

Clinical History :**US Doppler carotid artery Both [RDE25976081] :****Right Side:**

Mild wall thickening seen in the common carotid artery, there is some hypoechoic homogenous smooth, homogeneous plaque seen in carotid bulb and proximal internal carotid artery and external carotid artery. Normal Doppler signals in the common carotid artery (PSV 83 cm/sec, EDV 14 cm/sec) , internal carotid artery (PSV 102 cms/sec, EDV 24 cms/sec).

Velocity in the external carotid artery is enhanced, PSV 174cm/s, PSVR 2, haemodynamically suggestive of 50 to 60% stenosis.

Hypoplastic Vert A, which is difficult to visualised, only a short segment is visualised which is patent with antegrade doppler signal.

Left Side:

Mild wall thickening seen in the common carotid artery and carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 104 cm/sec, EDV 22 cm/sec) , internal carotid artery (PSV 100 cms/sec, EDV 26cms/sec) and external carotid artery (PSV 115 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: There is 50 to 60% stenosis of extracranial ECA disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25494466

Courier :

Examination Date : **11-Jun-2021**

Ref. Source : RAMACHANDRAN SIVAKUMAR, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HC

Examinations : **US Doppler carotid artery Both**

DONOVAN, SALLY

DoB: 05-Jan-1953

35 CONSTABLE AVE, CLACTON, CO16 8DA

Hosp. No.: D0332907

Ref. Locn.: STROKE UNIT GAINSBOROUGH WING

CRIS No.: 21512818

Referrer: SAKSENA RAJESH

Ref Spec: STROKE MEDICINE

NHS No.: 452 594 8477

VERIFIED Verified By : Das Rajib Vascular Studies 18-Jun-2021

Typed By : Das Rajib Vascular Studies 18-Jun-2021

Clinical History :**US Doppler carotid artery Both [RDE25983088] :****Right Side:**

Tortuous CCA, Mild wall calcification seen in the common carotid artery, Irregular , heterogeneous plaque with irregular surface seen in carotid bulb and proximal internal carotid artery, which is not associated with enhanced velocities.

Normal Doppler signals in the common carotid artery (PSV 70 cm/sec, EDV 20 cm/sec) , internal carotid artery (PSV 72 cms/sec, EDV 24 cms/sec) and external carotid artery (PSV 89 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall thickening /calcification seen in the common carotid artery. Smooth , homogeneous hypoechoic plaque seen in carotid bulb , causing total occlusion of the internal carotid artery, and significant stenosis of the proximal ECA.

Normal Doppler signals in the common carotid artery (PSV 28 cm/sec, EDV 4.0 cm/sec).

There is no colour flow spectral doppler signals detected of the internal carotid artery, which is occluded.

Velocity in the external carotid artery is enhanced, (PSV 198 cm/sec), PSVR >7, seen with significant flow disturbance, haemodynamically suggestive of >90% stenosis, distal ECA is patent.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: Extracranial ICA is occluded.

There is >90% stenosis of the Proximal ECA.

NASCET method used for velocity criteria.

Opinion

Urgent vascular/Stroke team review is advised.

Event Number : E-25500682

Courier :

Examination Date : 18-Jun-2021

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler carotid artery Both**

DONOVAN, SALLY

DoB: 05-Jan-1953

35 CONSTABLE AVE, CLACTON, CO16 8DA

Hosp. No. D0332907

Ref. Locn. : STROKE UNIT GAINSBOROUGH WING

CRIS No. 21512818

Referrer : SAKSENA RAJESH

Ref Spec: STROKE MEDICINE

NHS No. 452 594 8477

*** URGENT ***

The above report contains URGENT clinical findings which are either unexpected based on the clinical information provided on the request or which have not already been documented based on the available clinical history. This report must be urgently highlighted to a SENIOR CLINICIAN for appropriate further management.

Event Number : E-25500682

Courier :

Examination Date : 18-Jun-2021

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : US Doppler carotid artery Both

BRIERLEY, MARION WENDYDoB: **02-Aug-1947****17 NEW HALL LODGE PARK, LOW ROAD, HARWICH, ESSEX, CO12 3TS**Hosp. No. **D0656442**Ref. Locn. : **Primary Care Centre (EP) - 2nd Floor**CRIS No. : **21298088**Referrer: **MCFERRAN DJ**

Ref Spec: ENT

NHS No **452 446 9303**

VERIFIED Verified By : Das Rajib Vascular Studies 27-Jun-2021
Typed By : Das Rajib Vascular Studies 27-Jun-2021

Clinical History :**US Doppler carotid artery Both [RDE25970335] :**

Right Side:

Mild wall calcification seen in the common carotid artery and carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 82 cm/sec, EDV 17 cm/sec) , internal carotid artery (PSV 95 cms/sec, EDV 26 cms/sec) and external carotid artery (PSV 89 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall calcification seen in the common carotid artery and carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 71 cm/sec, EDV 14 cm/sec) , internal carotid artery (PSV 72 cms/sec, EDV 16 cms/sec) and external carotid artery (PSV 69 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-25489342

Courier :

Examination Date : **27-Jun-2021**

Ref. Source : MCFERRAN DJ, PRIMARY CARE CENTRE, PRIMARY CARE CENTRE, TURNER ROAD, COLCHESTER

Examinations : **US Doppler carotid artery Both**