

# Ultrasonic Angiology

Patient:  
Hospital Number:  
Address:

Hospital:  
Consultant:

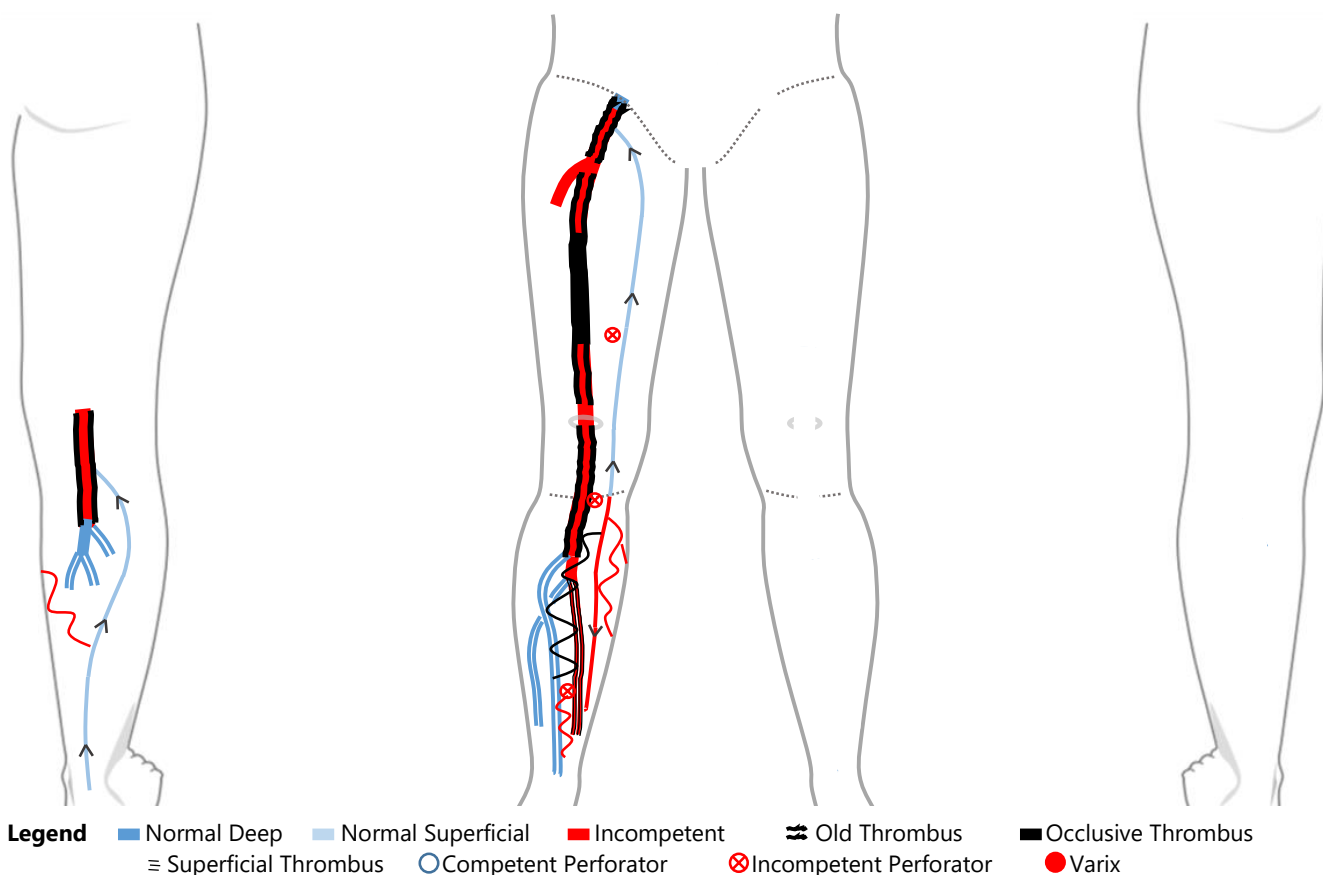
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## DUPLEX ASSESSMENT LOWER LIMB VENOUS

Date: 01.07.2021

Right leg:

Left leg:



### Conclusion:

#### RIGHT LEG

1. CFV below stent (3.2s) and PFV at groin (2.3s) incompetent with evidence of old thrombus.
2. (R) FV patent at groin with old thrombus and recanalisation. No flow visualised in FV from 15cm BSC to mid thigh, suggests thrombosed. Evidence of recanalisation detected in FV in distal thigh, FV incompetent at knee.
3. POPV (2.1s) and PTVs (2.3s) incompetent with evidence of old thrombus.
4. LSV patent and competent at SFJ. Incompetent perforator vein communicates with LSV at mid thigh, LSV remains competent AK. Further incompetent perforator vein communicates with LSV 5cm BK causing incompetence. Medial, anterior and posterior calf VVs arise from LSV BK. Posterior VV communicates with SSV. Anterior VV thrombosed. LSV calibre 3.2mm BK.
5. Incompetent perforator vein arises from PTVs at ankle and gives rise to VV.
6. SSV and ATVs patent and competent.

See iliac vein duplex report (01.07.2021) for assessment of (R) iliac vein stents.

**Reported by:** L. Smith  
Clinical Scientist