

**Clinical Measurement Services**  
**UNIVERSITY HOSPITALS OF DERBY & BURTON NHS FOUNDATION TRUST**  
**Vascular Ultrasound Report**

ARTERIAL STUDY - LOWER LIMB

Name:	Date of Test:	03/08/2021 01:56:11
Hospital Number:	Test Number:	3171911
Date of Birth:	Technician:	HEUGIL
Ordering Doctor:	Miss Greta Saggu	Dept/Ward: Derby OPD

**Symptoms and Surgical Procedures**

**Doppler Pressures**

**At Rest**

Brachial mmHg  
Right DP mmHg Left DP mmHg  
Right PT mmHg Left PT mmHg

**After Exercise**

Brachial mmHg  
Right DP mmHg Left DP mmHg  
Right PT mmHg Left PT mmHg

**Arterial Arm Dopplers**

Brachial Right : mmHg Left: mmHg  
Radial Right: mmHg Left: mmHg  
Ulna Right: mmHg Left: mmHg

Clinical presentation: Rest pain. Patient unable to walk due to disabling calf claudication. Not diabetic. Ex-smoker (16yrs).

**Aorto-iliac segment**

Aorta: Patent with no significant stenosis seen, and is of normal and uniform calibre throughout. Triphasic waveforms, PSV 0.79m/s.

Left CIA: Patent with no significant stenosis seen. Triphasic waveforms, PSV 0.98m/s.

Left EIA: Patent with no significant stenosis seen. Triphasic waveforms, PSV 1.21m/s.

**Left lower limb:**

CFA: Patent with no significant arterial disease seen, pulsatile monophasic waveforms, PSV 1.71m/s.

PFA: Patent at origin with no obvious significant arterial disease seen proximally, however increased velocities to PSV 2.59m/s (pulsatile monophasic) noted.

SFA: **Vessel is patent for ~4mm before becoming chronically occluded.** Flow reforms in the distal thigh where moderate diffuse calcified disease is identified, damped monophasic waveforms, PSV 0.14m/s. Vessel is patent but with moderate diffuse calcified disease through the adductor canal.

POPA: Patent. Moderate diffuse calcified disease but no significant arterial disease seen. Damped monophasic waveforms, PSVs: proximal 0.26m/s, distal 0.30m/s.

TPT: Patent with no significant arterial disease seen but moderately calcified. Damped monophasic waveforms, PSV 0.39m/s.

**Crural arteries**

PTA: The proximal vessel is patent but calcified with no significant disease seen, damped monophasic waveforms. Intermittent colour-filling noted throughout the mid vessel due to ultrasound drop out, however where seen vessel appears patent. The distal vessel is patent but calcified with damped monophasic waveforms, PSV 0.26m/s.

ATA: Vessel origin is patent with damped monophasic waveforms, PSV 0.43m/s. **The proximal vessel is occluded for a short section. Flow reforms in the proximal calf, just distal to where the vessel is re-filling there is a >75% stenosis with velocities increasing from PSV 0.31m/s to PSV 1.29m/s.** The mid and distal vessel is patent with mild calcification and damped monophasic waveforms, PSV 0.18m/s.

PEROA: The proximal vessel is patent but calcified with no significant disease seen, damped monophasic waveforms. Intermittent colour-filling noted throughout the mid vessel due to ultrasound drop out, however where seen vessel appears patent. The distal vessel is patent but calcified with damped monophasic waveforms, PSV 0.09m/s.

**Summary: Chronic SFA occlusion. Proximal ATA occlusion and >75% stenosis.**

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Reporter: Miss Heulwen Gilbert