

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

VARICOSE VEIN INVESTIGATION

Name:		Date of Test:	16/08/2021 10:38:31
Hospital Number:		Test Number:	3186735
Date of Birth:		Technician:	HEUGIL
Ordering Doctor:	Mr Sanjay Singh	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

Right lower limb

The deep venous system is patent and competent from CFV-proximal SFV. The mid SFV-proximal POPV is patent but **incompetent**. The distal POPV is patent and competent.

The SFJ is competent. Segmental LSV incompetence. The proximal and mid thigh LSV is incompetent measuring the following in diameter: proximal thigh: 3.8mm, mid thigh: 3.4mm. The distal thigh and proximal calf LSV is competent. The mid calf LSV becomes incompetent after communication with SSV VV. LSV remains incompetent to the ankle. The LSV is straight throughout and contains no superficial thrombophlebitis.

The SPJ is incompetent and slightly tortuous and is located 4cm proximally to the knee crease. The SSV is incompetent in the proximal calf where it measures the following in diameter: proximal calf: 8.7mm. VV arises from the SSV in the proximal calf, this tracks over the posterior and medial calf, communicating with the LSV in the mid calf. The SSV distal to this is competent to the ankle. SSV is linear, contains no superficial thrombophlebitis and would be suitable to RFA.

Reporter: Miss Heulwen Gilbert