|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Patient: |  | | | |
| Date of Birth: |  | | | |
| District Number: |  |  | |  |
| Date of Scan: |  | | | |
| Referring Doctor: |  | | | |
| Indications: | Known IHD. Right anterior circulation TIA on 28/07/2021 | | | |
|  |
| **Carotid Artery Duplex** | | | | |
| 79  100  250  249  PSV = 178, EDV = 24  PSV = 76, EDV = 11  Arterial velocities in cm/s | | | | |
| Plaque Type: | Homogenous Heterogenous Calcific Smooth Surface Irregular Surface | | | | |
|  | Right | | Left | | |
| Vessel Geometry: | Normal | | Normal | | |
| Vertebral Arteries: | Antegrade | | Antegrade | | |
| ICA % Stenosis: | 50-59 % | | <30 % | | |
| ICA/CCA Ratio: | 2.3 | | 0.76 | | |
| ECA % Stenosis: | 50-74 % | | 50-74 % | | |
|  |  | | | | |
| Comments: | Right: IMT = 17mm. There is a 2.6cm in length of smooth mixed echogenicity (predominately brightly echogenic) plaque detected in the distal CCA extending into proximal ICA causing a 50-59% stenosis (56% diameter reduction), and ECA causing a 50-74% stenosis. | | | | |
|  | Left: 2.3cm in length smooth mixed echogenicity (predominately brightly echogenic) plaque detected in the proximal ICA/bulb, this does not cause any haemodynamic changes, however, causes a 68% diameter reduction at this level. | | | | |
| Scanned by: | Alwin Yeung – Clinical Vascular Scientist | | | | |