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| --- | --- | --- |
| Patient: |  | |
| Date of Birth: |  | |
| District Number: |  | |
| Date of Scan: |  | |
| Referring Doctor: |  | |
| Indications: | bilateral rest and night pain. previous SFA angioplasties at ADH. ? reocclusion ? appropriate vein for bypass. please do toe pressures, repeat arterial duplex and vein map bilaterally. | |
|  |
| **Bilateral Lower Extremity Arterial Duplex** | | |
| 175/59  M 36  M 46  M 67  M 28  M 47  M 26  o  M 27  O  M 55  M 71  B 125  O  O  O  M 49  O  B 175  B 138  B 167  B 173  TBI = 0.28  44mmHg  TBI = 0.14  22mmHg  158mmHg  T……...Triphasic  B……....Biphasic M….Monophasic  O…..…Occluded  Arterial velocities in cm/s | | |
| Plaque Type: | Homogenous Heterogenous Calcific Smooth Surface Irregular Surface | | |
|  |  | |
| Comments: | Moderate amount of diffuse atheroma bilaterally. | |
| Aortoiliac Segment: | Unable to visualize due to bowel gas | |
|  | **Right** | **Left** |
| Common Femoral Artery: | Patent | Patent |
| Proximal Profunda Femoris: | Patent at origin | Patent at origin |
| Superficial Femoral Artery: | Occluded near origin – mid. | Patent, mid SFA 50-74% stenosis. |
| Popliteal Artery: | Patent | TPT occluded |
| Calf: | 2 vessel run off. ATA occluded. | PTA occluded throughout. ATA occludes mid-distal. Pero A reformed at origin. |
| Scanned by: | Alwin Yeung - Clinical Vascular Scientist | |