

Indications:

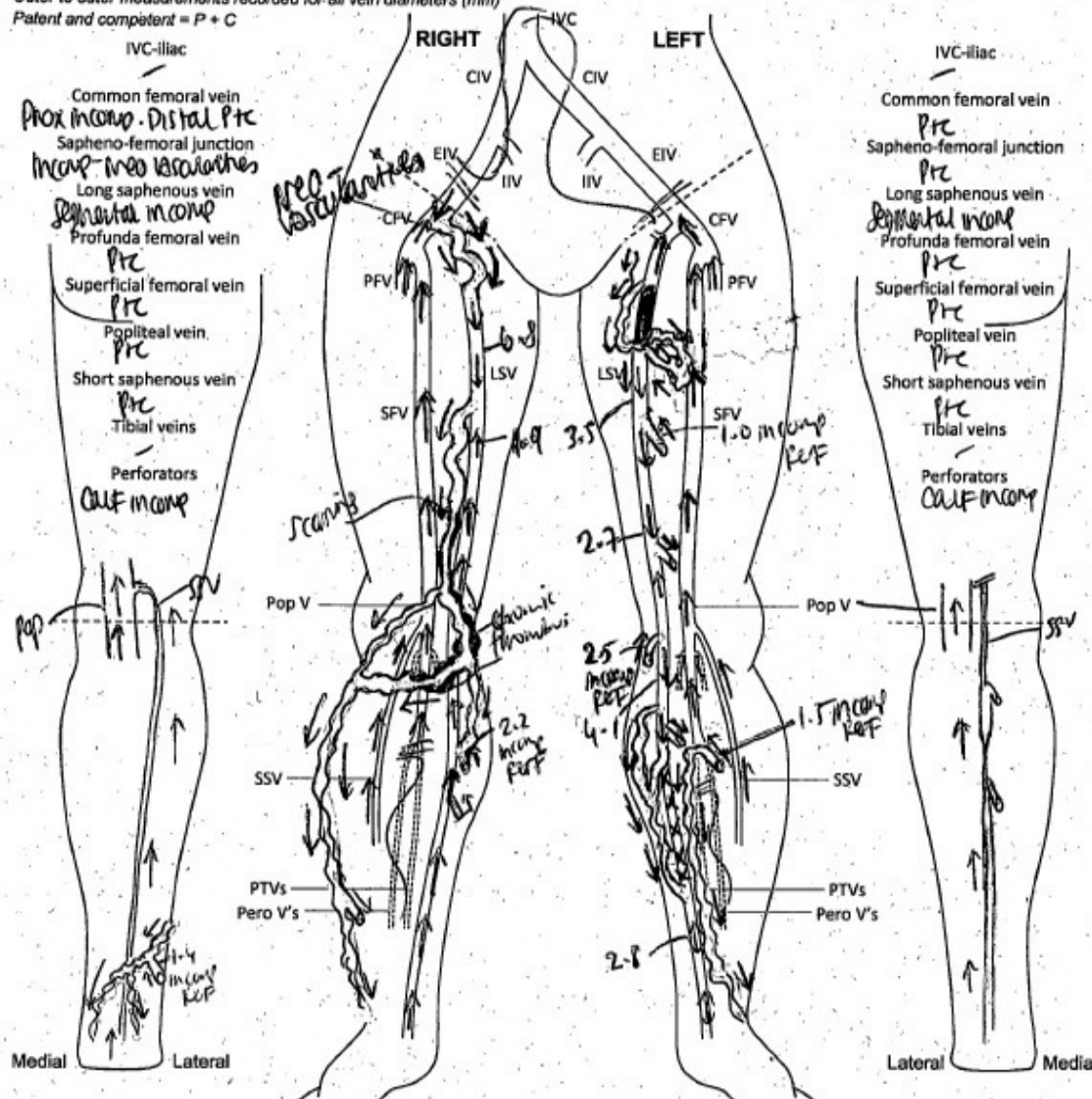
Consultant: **Dr. P. V. S.**

Recurrent VV's

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments: Bilaterally - imaged deep veins were patent and competent

① Measculitis at the groin \Rightarrow LSV \Rightarrow VV's. Scarring + Chronic thrombus within distal thigh. knee level varicosities

② Segment of prox thigh LSV occluded? previous treatment. Branches restore LSV \Rightarrow VV's. Incompetent Perforators \Rightarrow LSV + calf VV's.

Clinical Vascular Scientist: *[Signature]*

Date: 5/11/21

Indications:

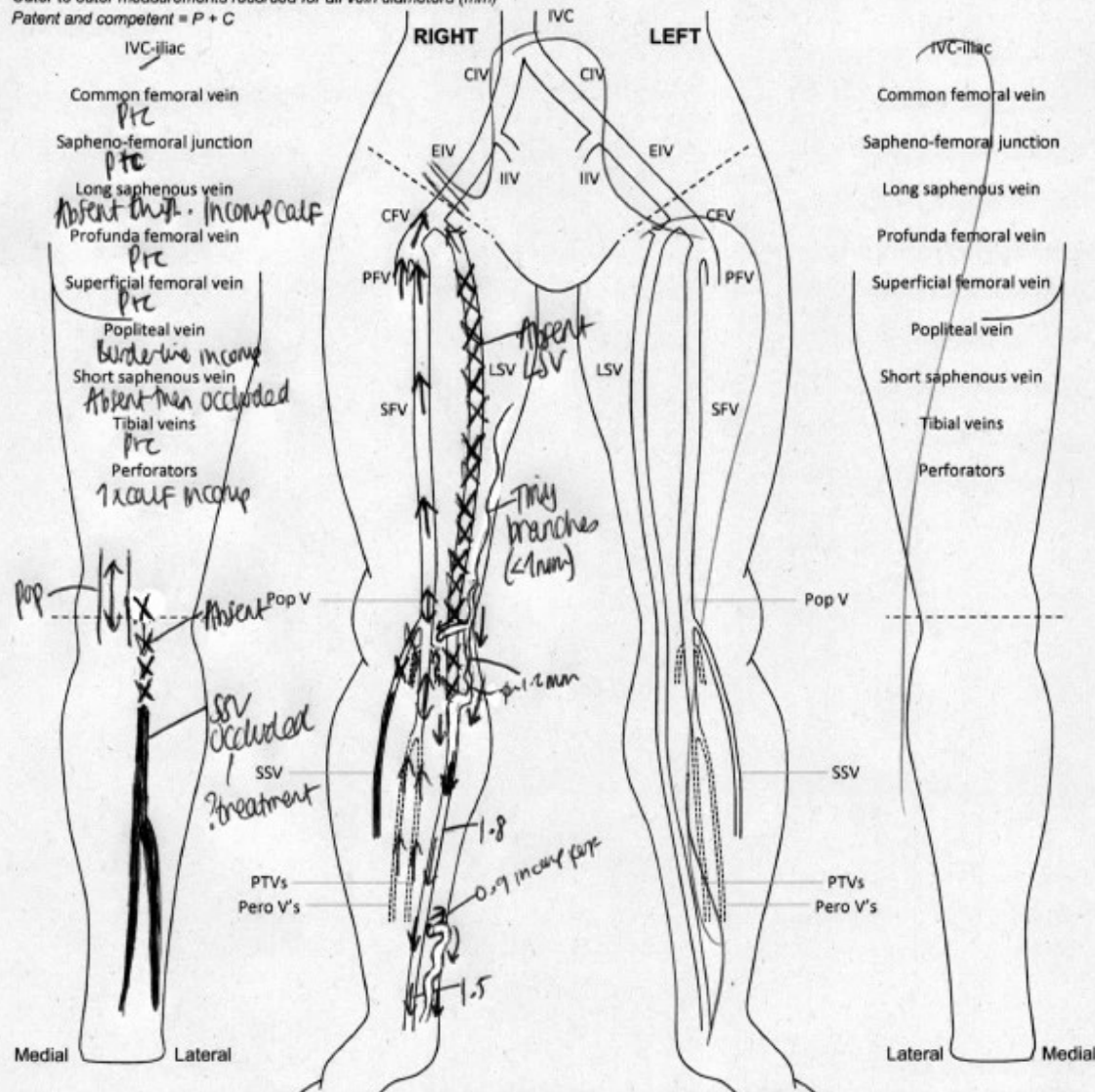
Consultant RIGA

Previous W treatment. Recurrent ulcers

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

- Borderline popliteal vein competence. All other major deep veins patent + competent
- LV absent to mid calf, then incompetent. Restored by very small superficial branches 2/3 calf
- Distal medial calf perforator → small w's
- Proximal SSV absent. Mid-distal SSV occluded

Clinical Vascular Scientist:

Ch Wick

AVS: Yes/No Date: 20/10/24

Indications:

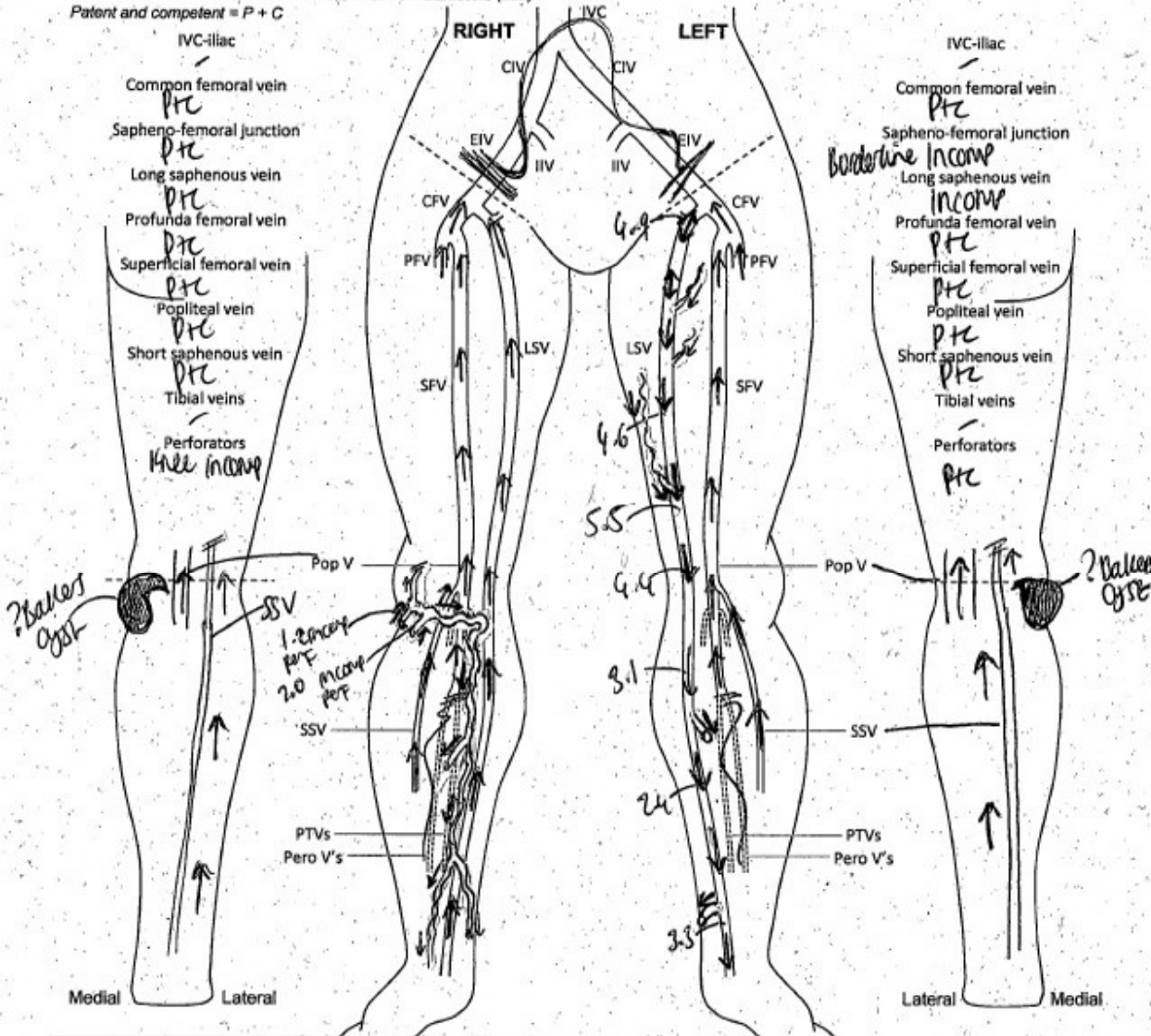
Consultant **Dr. IES**

Bilateral VV's

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

Bilaterally - imaged deep veins were patent + competent
- widespread thread veins

① knee perforators ⇒ small calf W's

② PT inductance incomp: LSV incompetent from small branches - ? pelvic source

Indications:

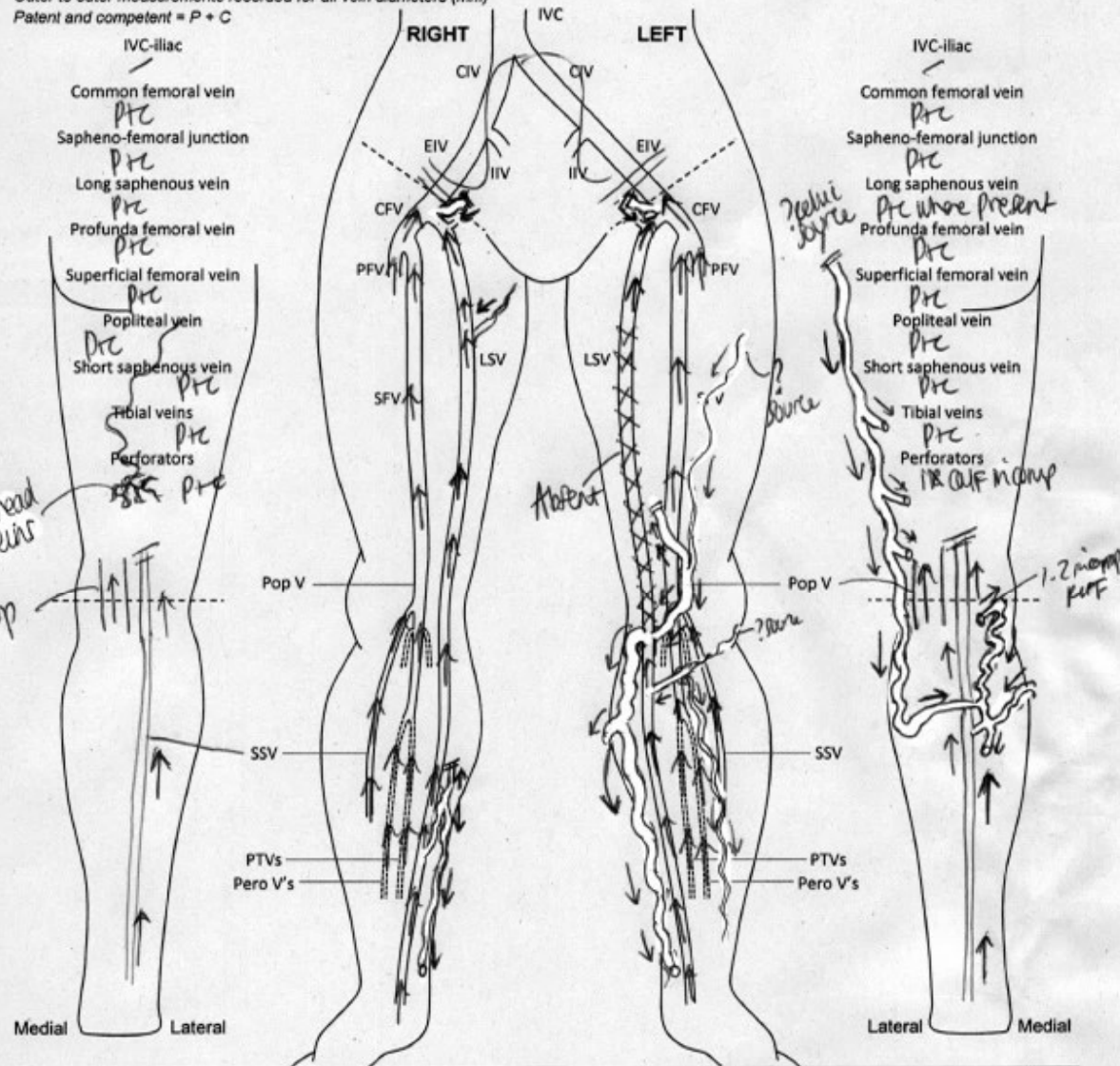
Bilateral V's. Leg recurrent

Consultant JAFFER

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

② Deep veins patent + competent. LSV + SSV patent + competent.
Small incompetent medial calf branch

① Deep veins patent + competent. LSV competent where present. SSV competent.
Medial calf V's from ? pelvic source. Medial calf V's - ? source

Indications:

Consultant

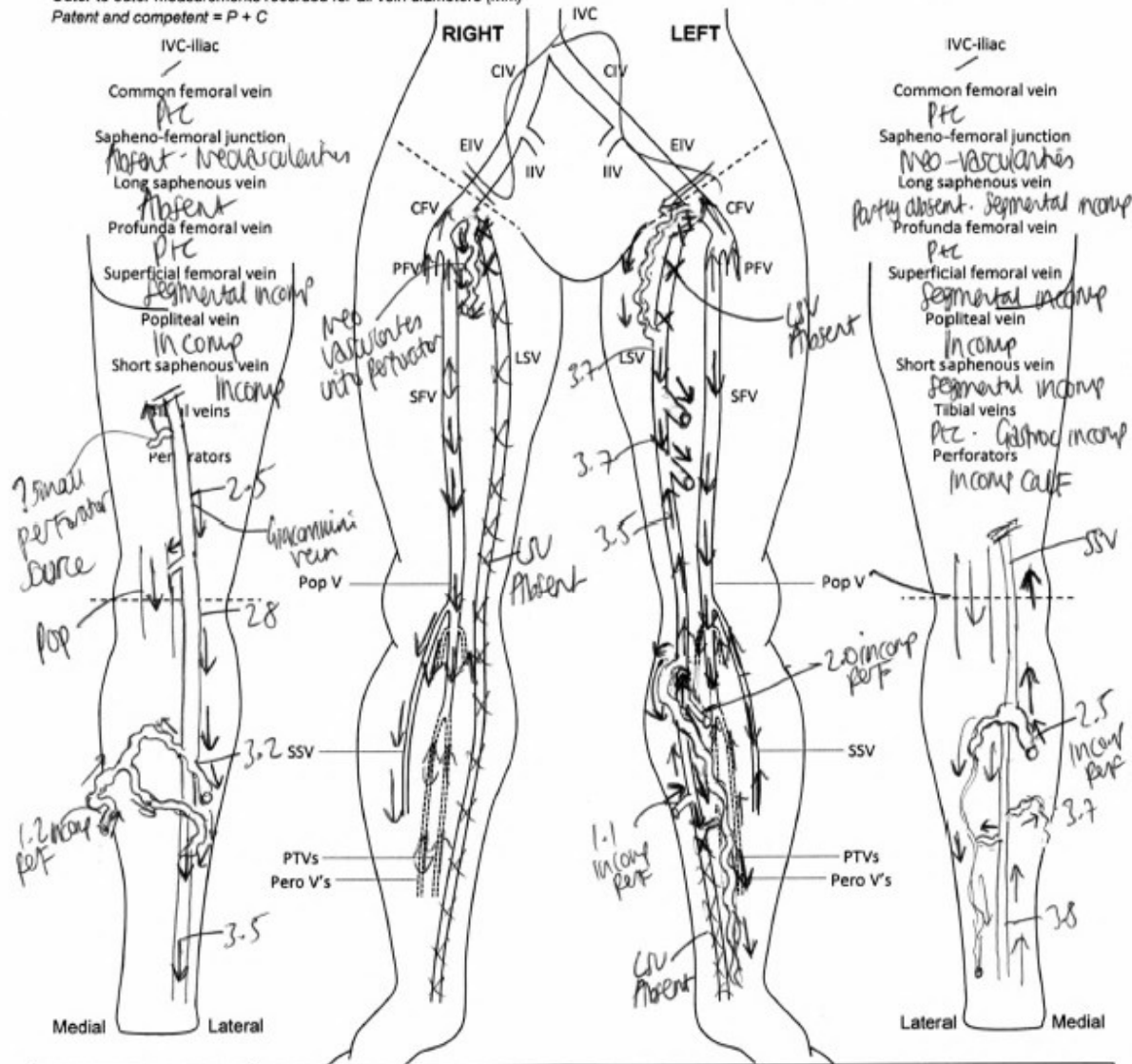
MGH

Bilateral leg swelling

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

② Deep venous reflux. LV absent. SSV incompetent from Giraconni vein

① Deep venous reflux. Prox LSV absent. Restored by neovascularisation. LV absent in distal calf. Segmental SV reflux from perforator

Date: 13/10/24

Indications:

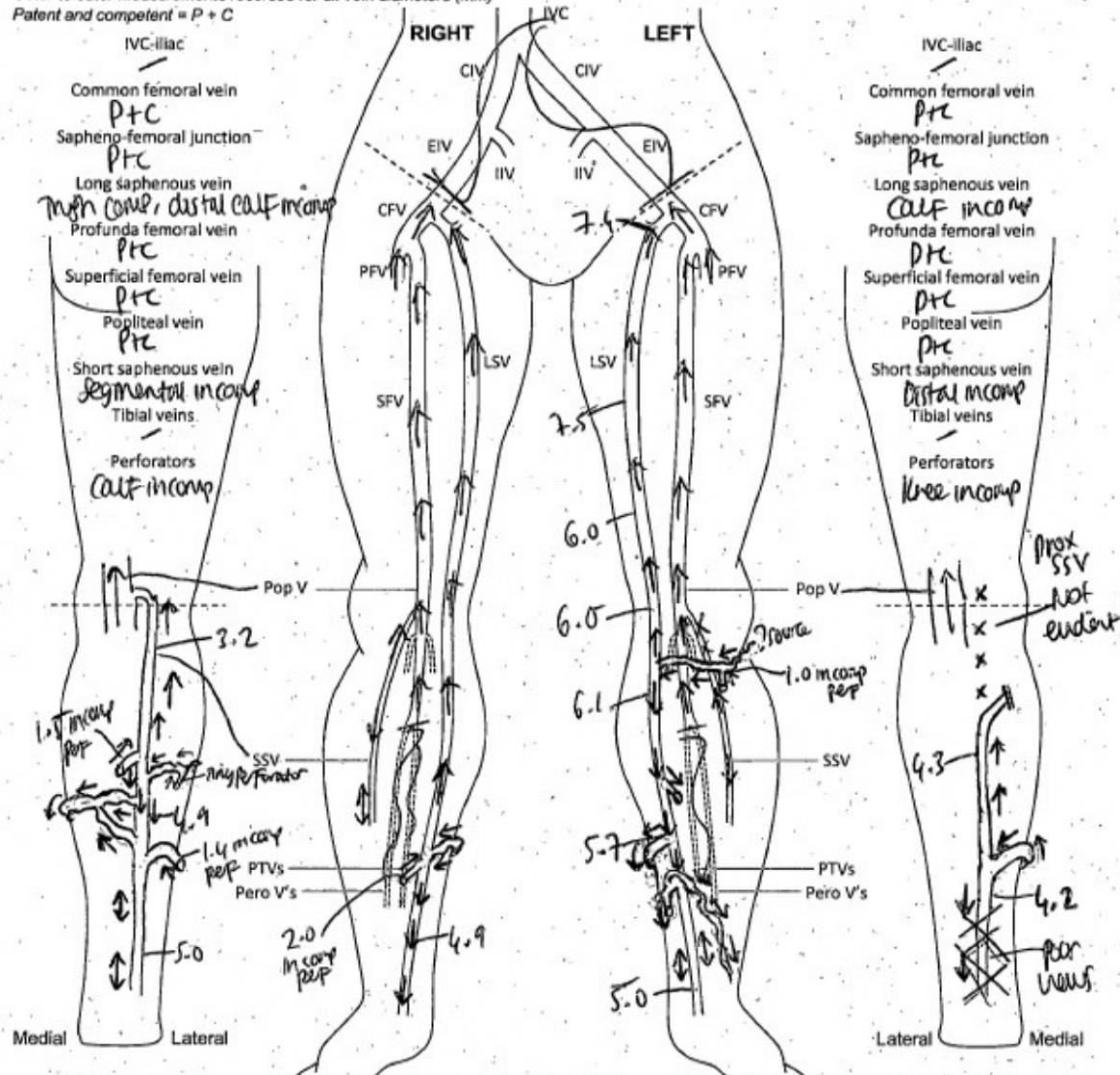
Bilateral leg swelling

Consultant: RGA

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments: Suboptimal augmentation due to calf size

Imaged deep veins patent + competent bilaterally

- (1) Distal calf LSV reflux (from perforator and SSV branch)
- (2) Segmental SV reflux from perforator and small superficial branches.
- (3) Calf LV reflux from knee perforator and small branches. LSV branch → distal SSV reflux

Indications:

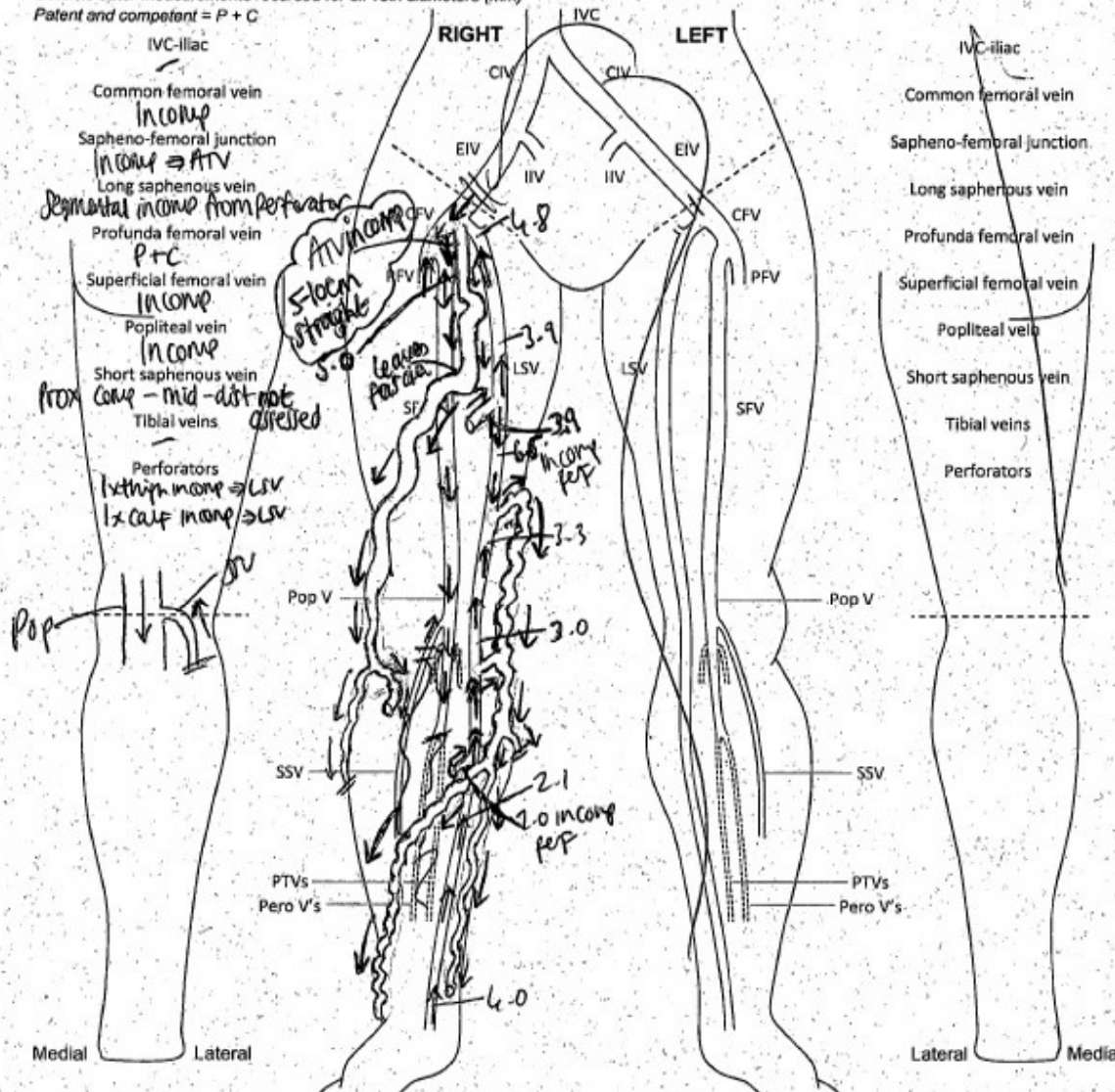
R VV's

Consultant BICKNELL

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

Unintended Scan performed - patient felt unwell several times + did not want to continue
• Deep vein reflux to distal Popliteal - unable to assess tibial veins
• SFJ in comp \Rightarrow ATV \Rightarrow VV's. ATV S-locn straight length from SFJ. Unable to follow branches to termination
• Incomp perf mid thigh \Rightarrow LSV reflux \Rightarrow VV's • Incomp perf calf \Rightarrow retrograde LSV reflux \Rightarrow VV's
• Mid-distal not assessed

Indications:

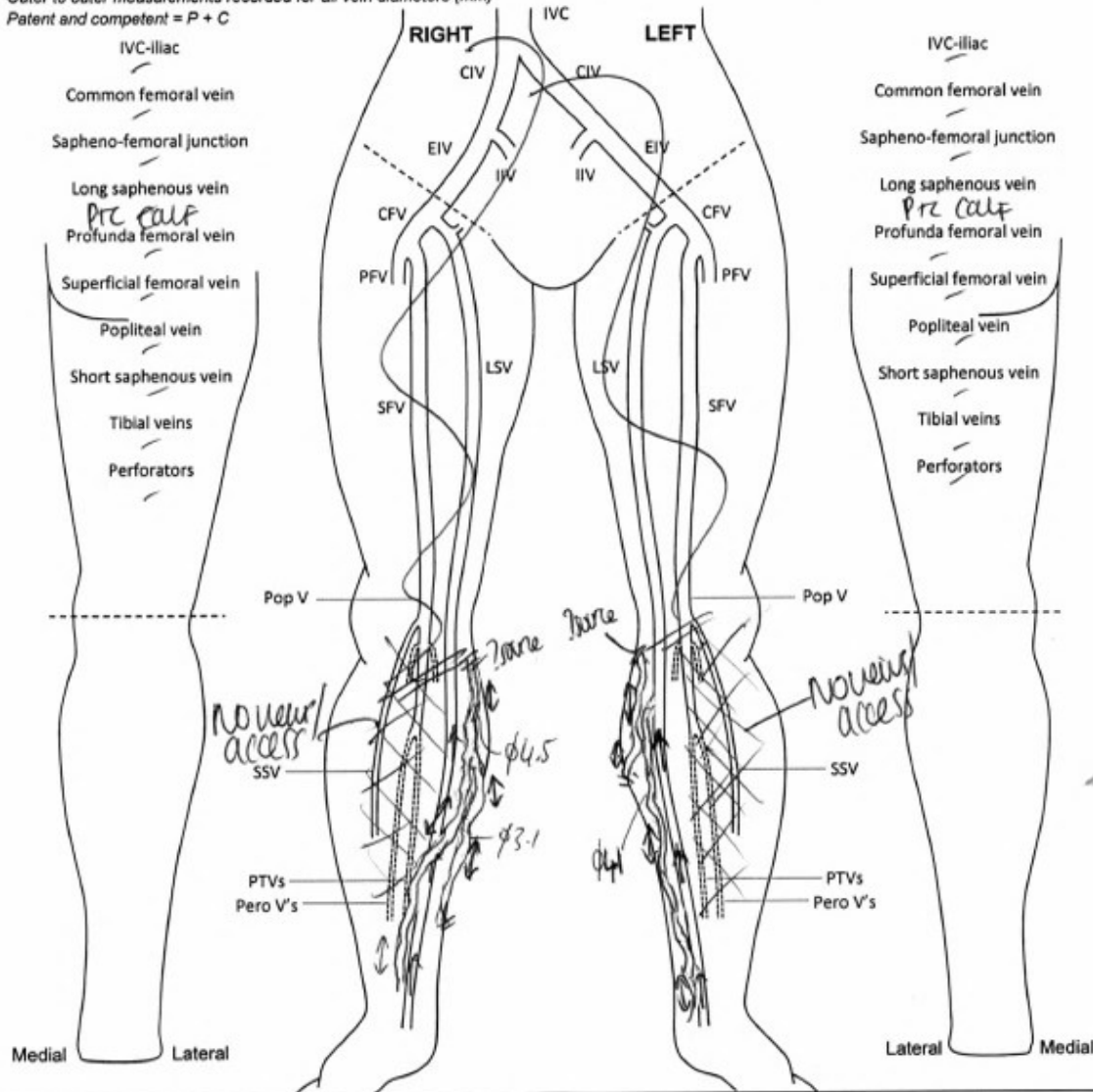
Bilateral ulcers

Consultant RGA

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

- Very limited scan - patient lying on stretcher, BMI+++ - Suboptimal augmentation
- Calf LV's appeared patent + competent bilaterally
- Borderline incompetent superficial branches noted bilaterally in the medial calves
- Unable to determine cause

Clinical Vascular Scientist:

N. 10/11

AVS: Yes/No

Date: 20/10/21

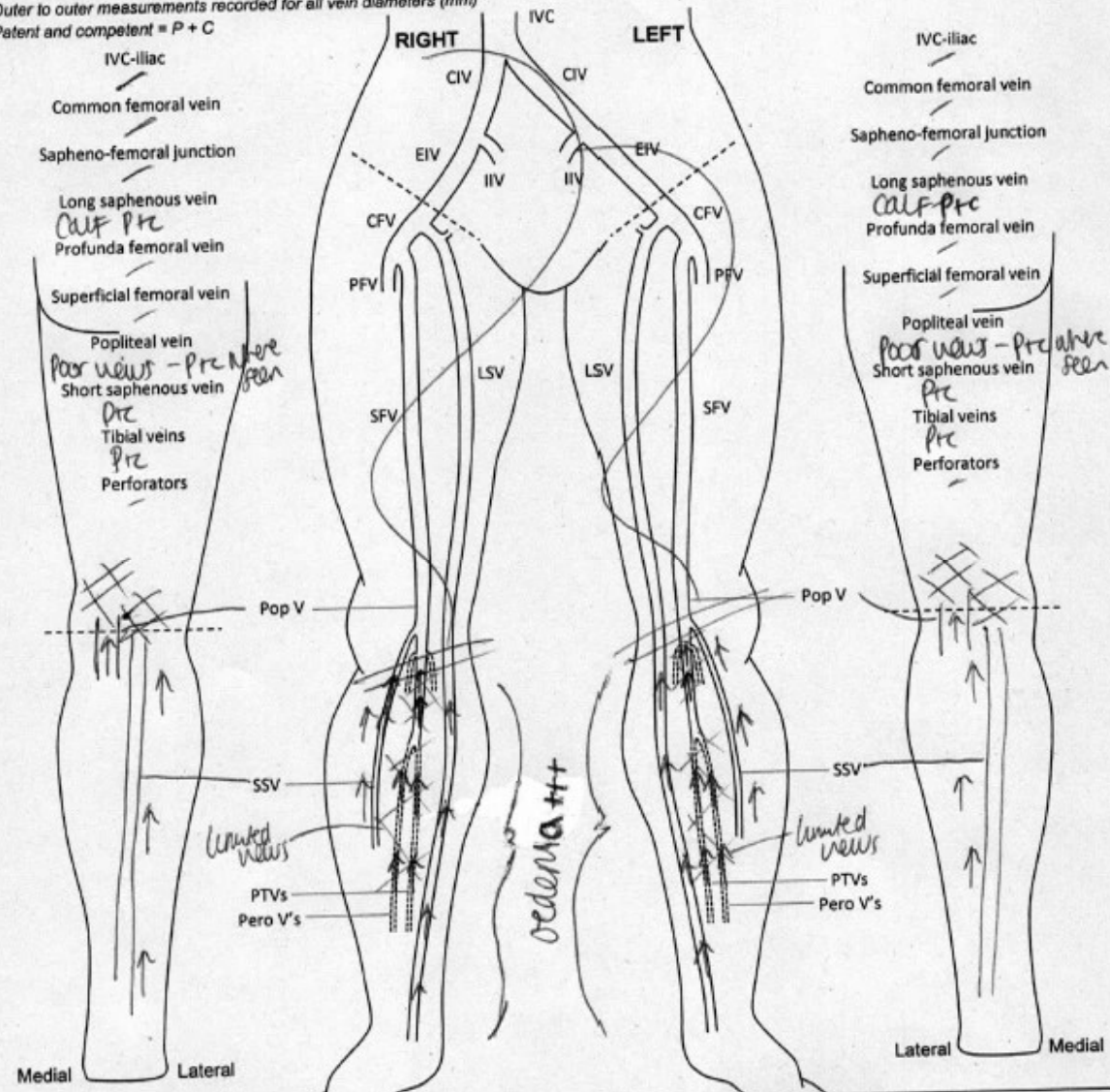
Indications:

Bilateral leg swelling

Consultant RGA

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)
Patent and competent = P + C



Comments: • Very limited scan performed - Patient unable to stand
• Deep + superficial veins of the calves assessed with patient seated
• Deep + superficial veins of the calf appeared patent + competent bilaterally - no

L VV's

Outer to outer measurements recorded for all vein diameters (mm)

IVC-iliac

Perforators

Medial Lateral

A schematic diagram of a vertical vessel, likely a blood vessel, showing flow directions with arrows. Labels include 'Pop' at the top, 'SV' below it, 'II' on the right side, '5.5' and '6.6 (max) Perf' on the right side, and '4.8' further down. On the left side, 'Lateral' is written. At the bottom, 'Medial' is written. The diagram shows a central vertical tube with various branches and flow indicators.

Comments: • Limited scan as patient felt unwell several times
• Unable to follow/assess all branches. Suboptimal assessment of distal LVR as patient seated. However, SRV was source of main varicosities in the calf

Indications:

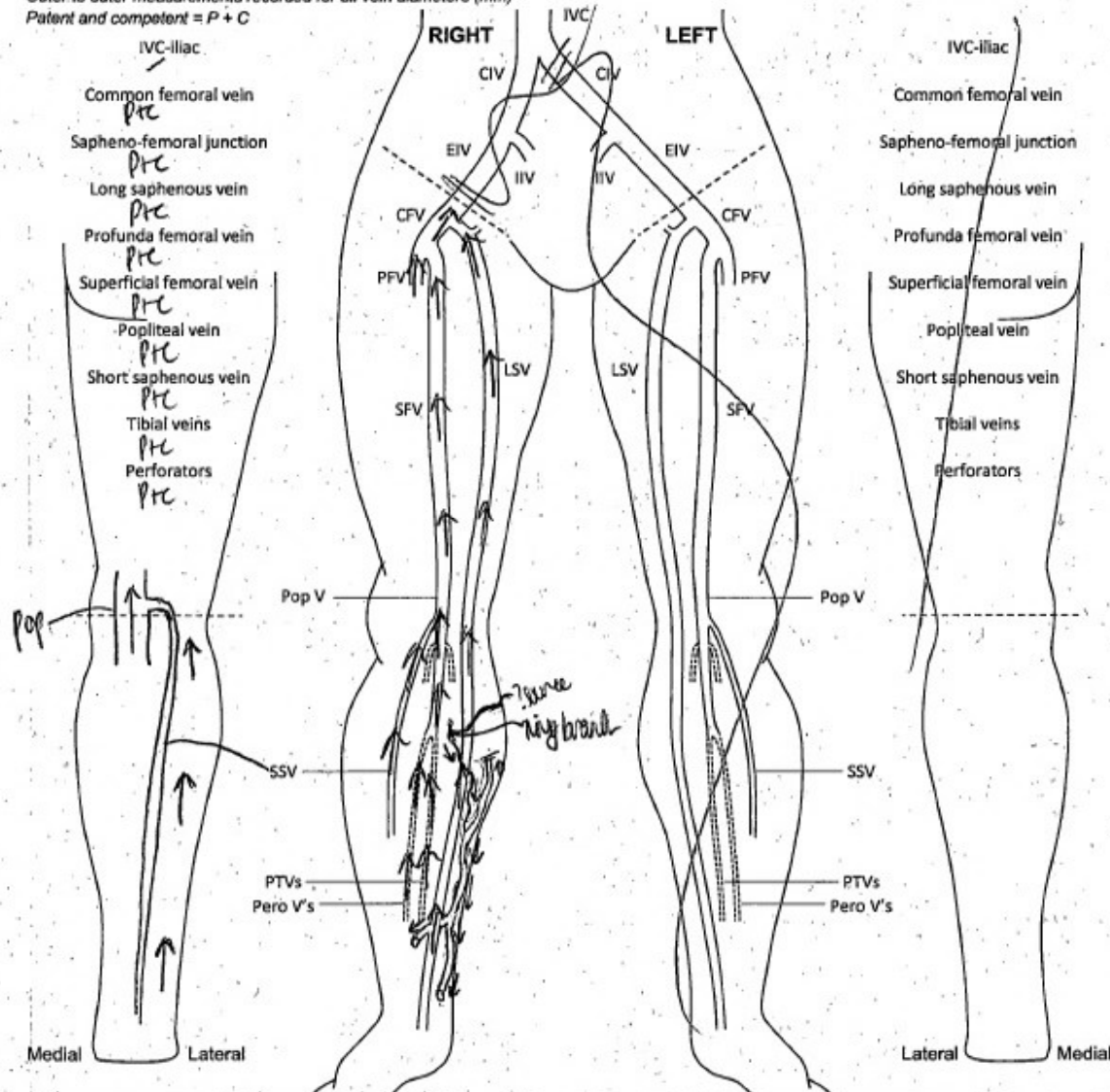
Varicose skin changes @ leg

Consultant *Jenkins*

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

• Deep veins imaged patent + competent
• SSV + PTV Patent + competent

Indications:

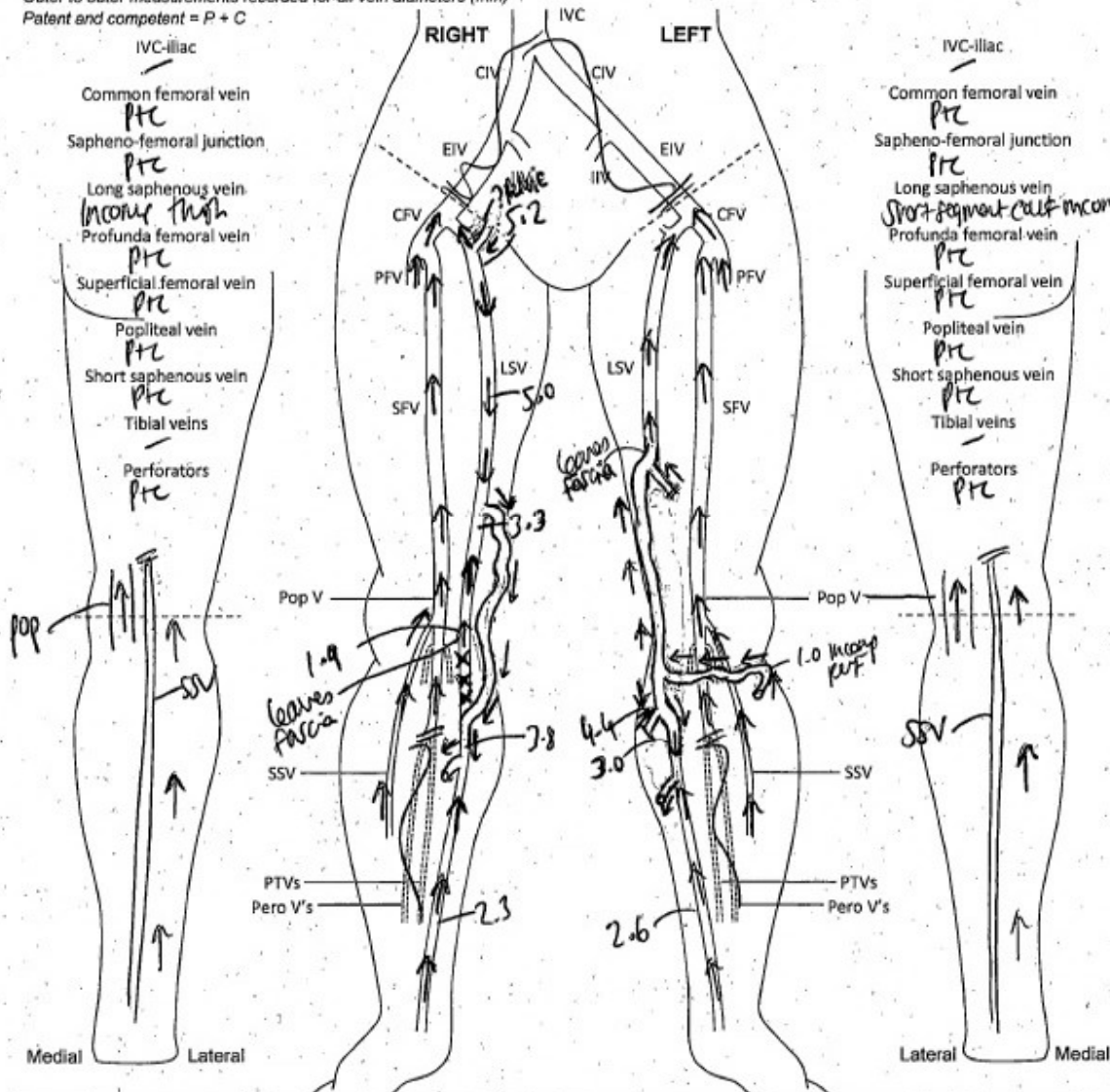
Leg swelling and skin changes

Consultant Shalhoub

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments: Bilaterally - Imaged deep veins patent + competent

② LSV in competent from ? pelvic branch. → VV's → perforator

③ Long saphenous vein - LSV reflux from incompetent knee perforator

Indications:

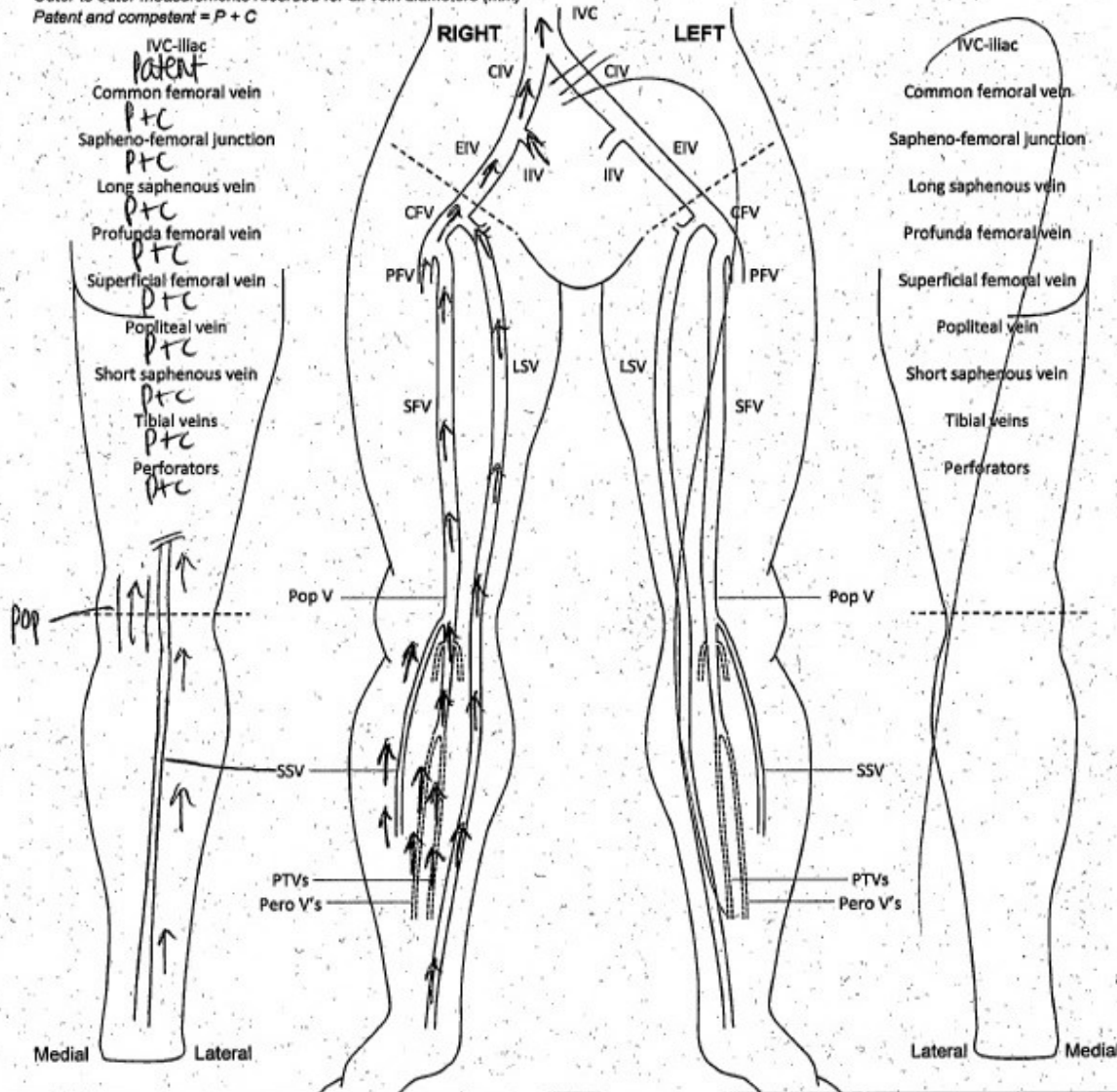
Consultant JAFFER

R leg swelling

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

Deep and superficial veins of the right leg were patent and competent

Indications:

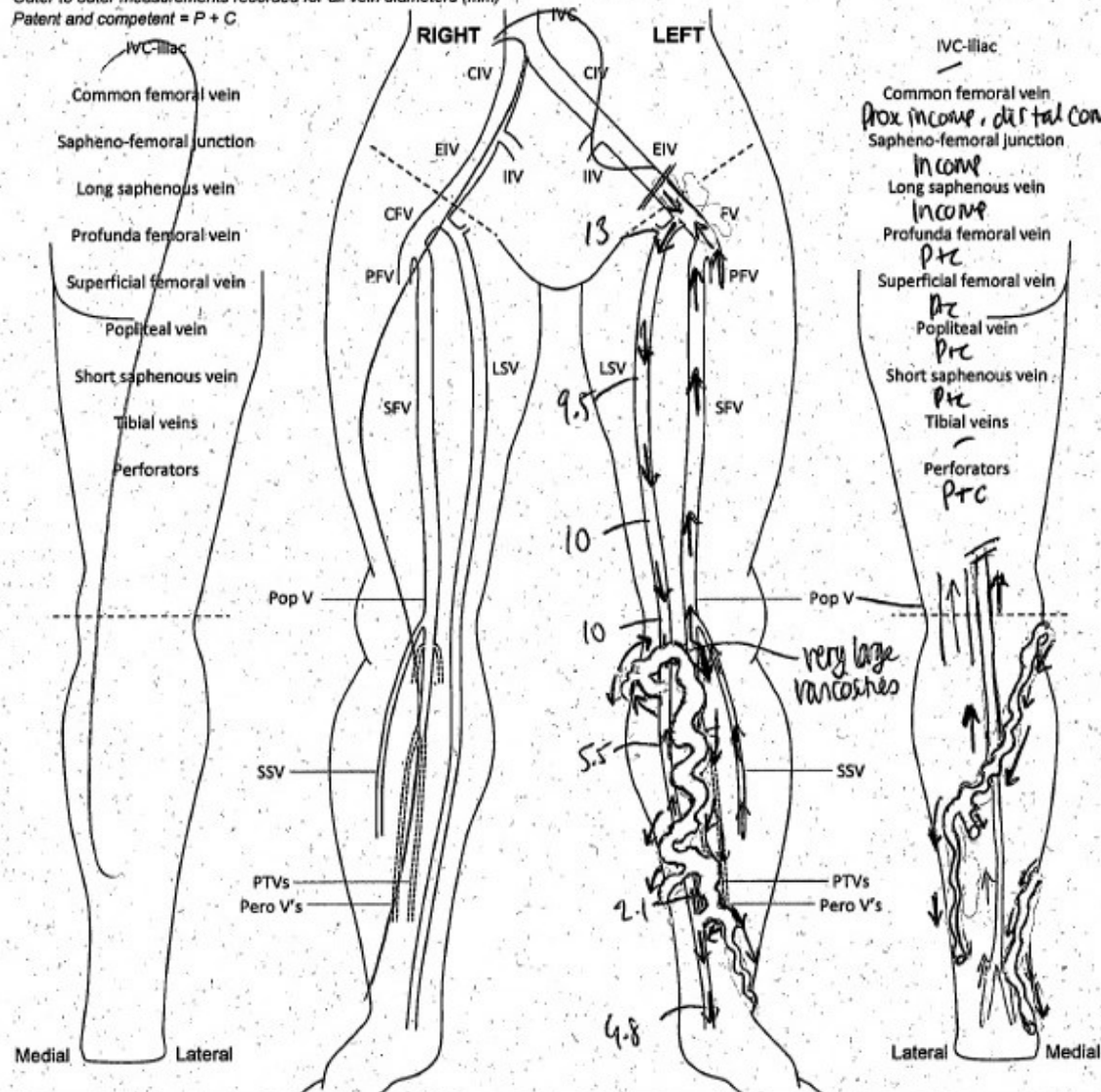
L leg VU's

Consultant DAVIES

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

- Imaged deep veins patent + competent (exception of CFV_n into SFJ)^{reflux}
- SFJ + LSV incompetent
- LSV supplies very large calf varicosities
- SSV competent

Clinical Vascular Scientist CHA/12/1 27/19/21

Indications:

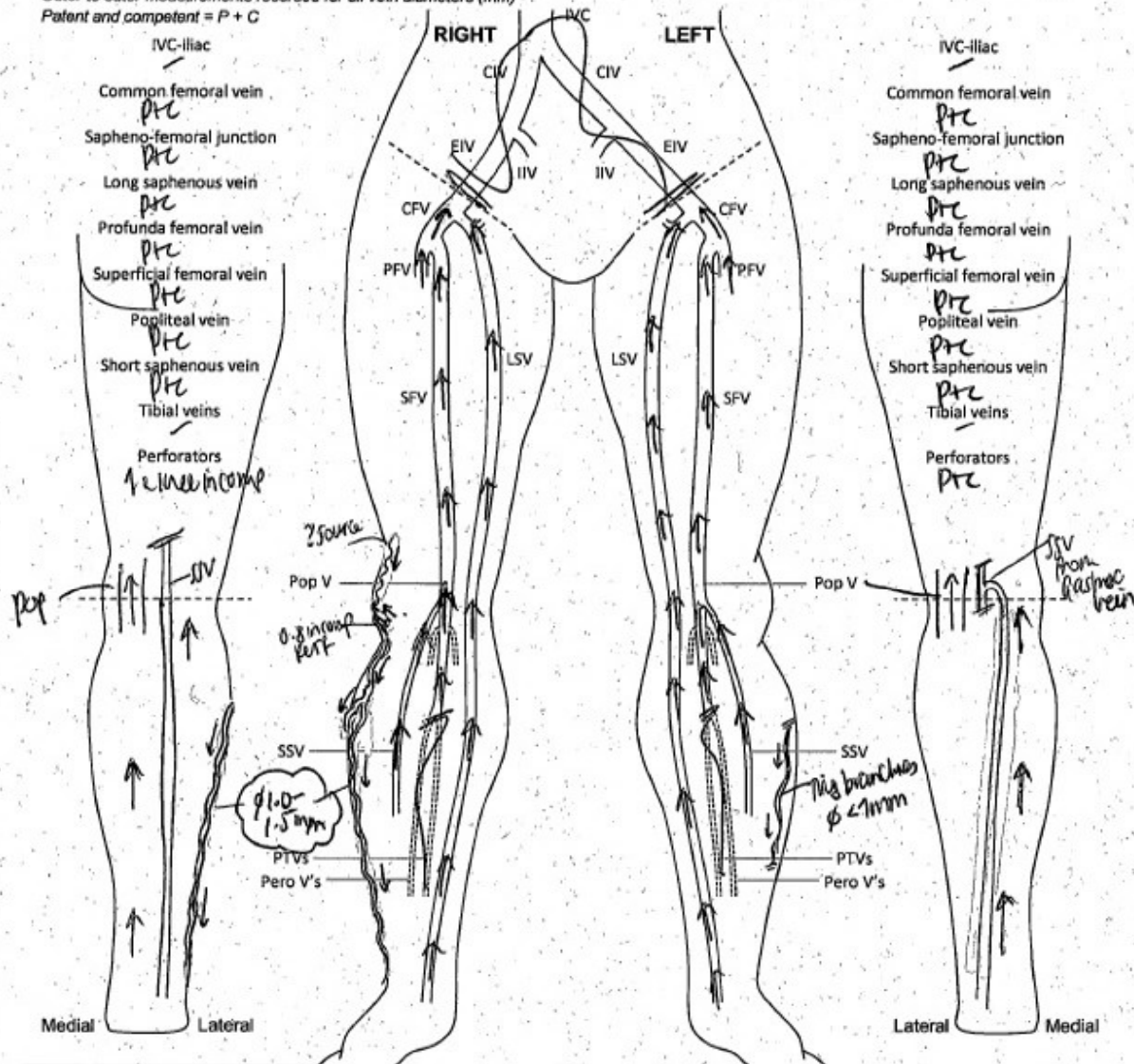
Consultant **Dr. V. S.**

Bilateral VV's

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

Bilaterally - imaged deep veins patent + competent

① Small incompetent branches ($\phi \sim 1-1.5$ mm) shin/lateral calf - originate from knee perforator and tiny more proximal branch (source unclear)

② Very small, ?incompetent shin branches - too small to follow - cannot identify source

Bilateral VV's

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



② Deep veins imaged patent + competent. Giammonni vein incompetent from pelvic branch \Rightarrow VUS

① Segmental deep vein reflux (into superficial system). Large neovascularities behind the knee \Rightarrow IV's (did not appear to be true SPS)

Indications:

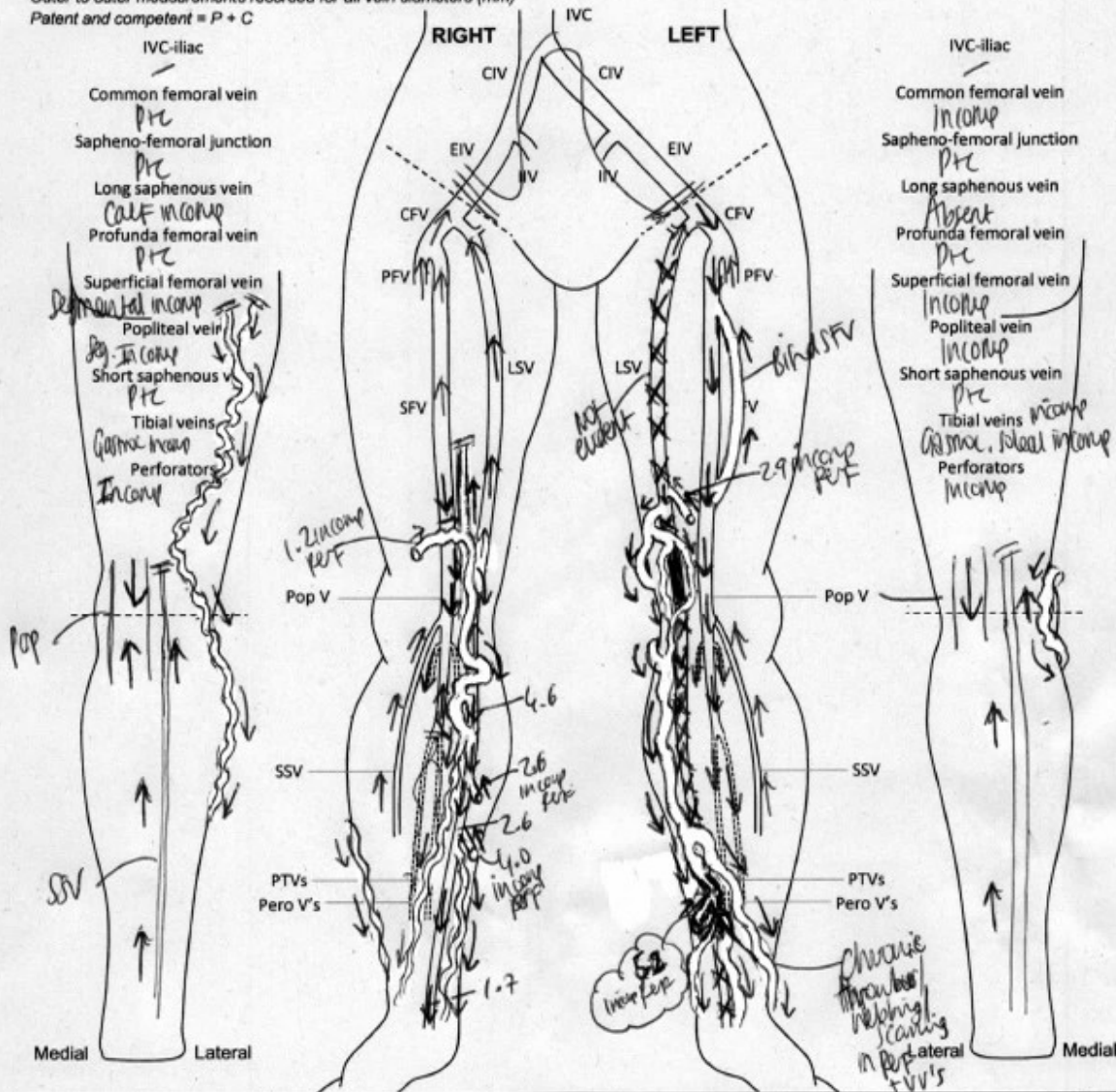
Recurrent W's

Consultant RGA

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

- ① Segmental deep venous reflux. Extensive varicose veins. Incomp thigh PerF → W's → LSV → W's. Posterior thigh + lateral calf W's - ? pelvic source
- ② Deep venous reflux. LSV absent - previous treatment. Incompetent thigh PerF → W's. Large incompetent calf Perforator. Chronic thrombus / webbing within distal calf W's and Perforator

Indications:

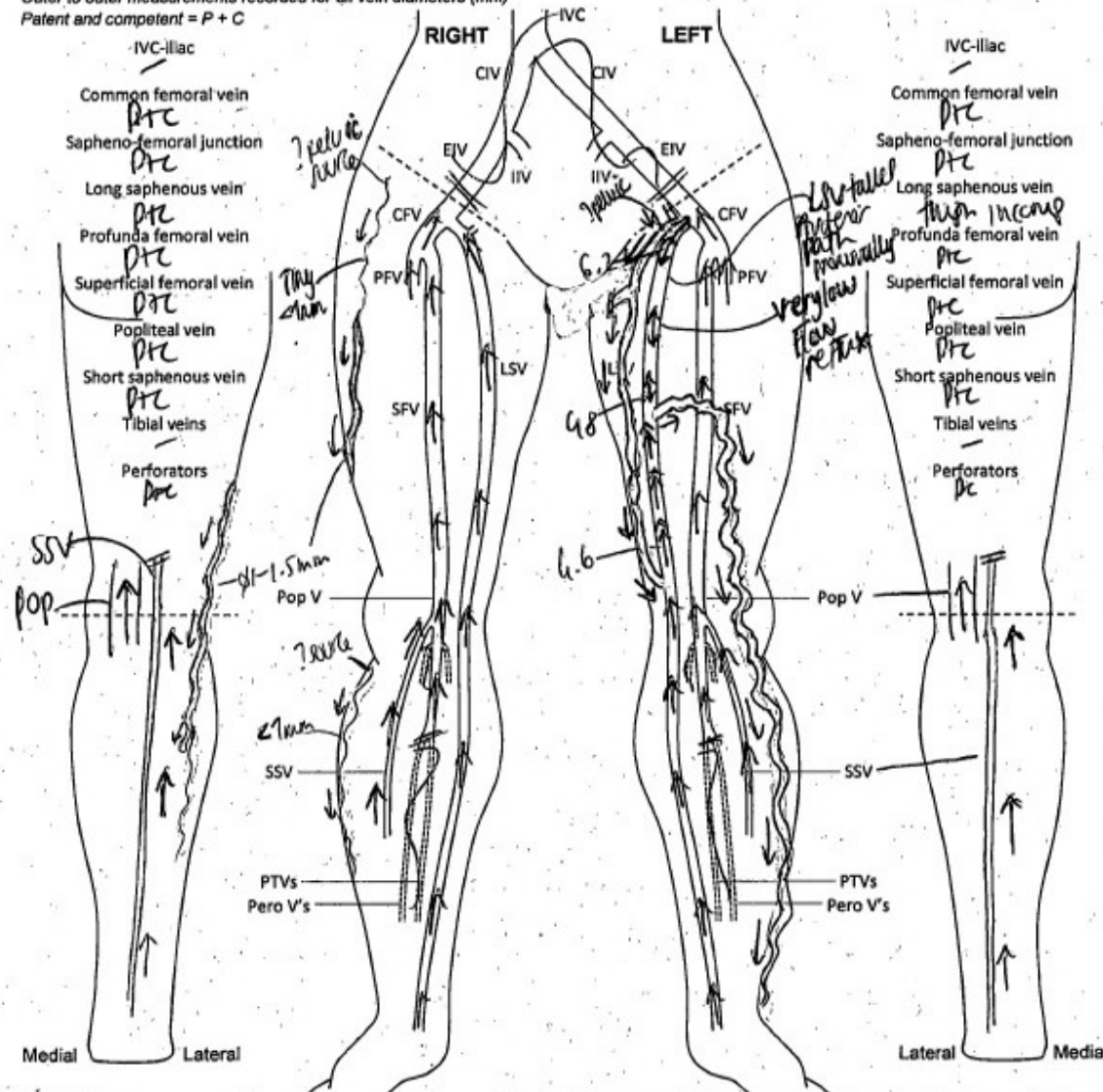
Consultant: KGA

Bilateral leg swelling

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments: Bilaterally - imaged deep veins patent + competent

② Small thigh + calf W's from ? pelvic source

③ Segmental thigh LSV reflux \Rightarrow W's. Prox thigh LSV takes anterior path

Amble arterial spot check: ② PTA 65cm/s, RT 72ms - Biphasic. ATA 74cm/s, RT 60ms - Biphasic
③ PTA occluded. ATA 29cm/s, RT 68ms - Biphasic. Peroneal 44cm/s, RT 60ms - Biphasic

Indications:

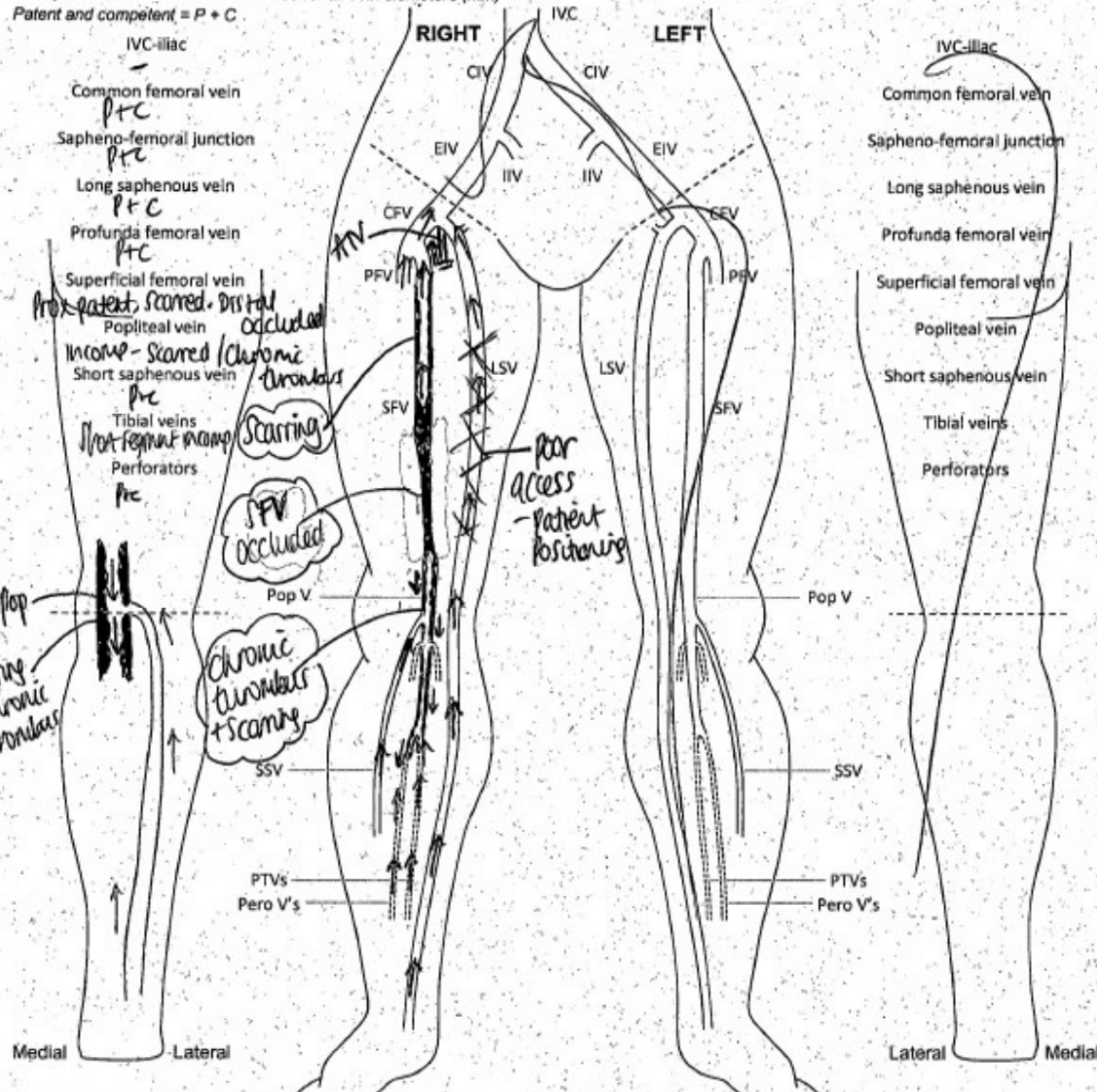
Regular

Consultant JAFFER

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

- Prox thigh SFV scanned + small calibre. SFV occluded in mid-distal thigh.
- Popliteal vein scanned + chronic thrombus - incompetent.
- Superficial veins competent
- Prominent superficial veins noted at the knee + calf - no reflux demonstrated? collateral

Consultant RIGA

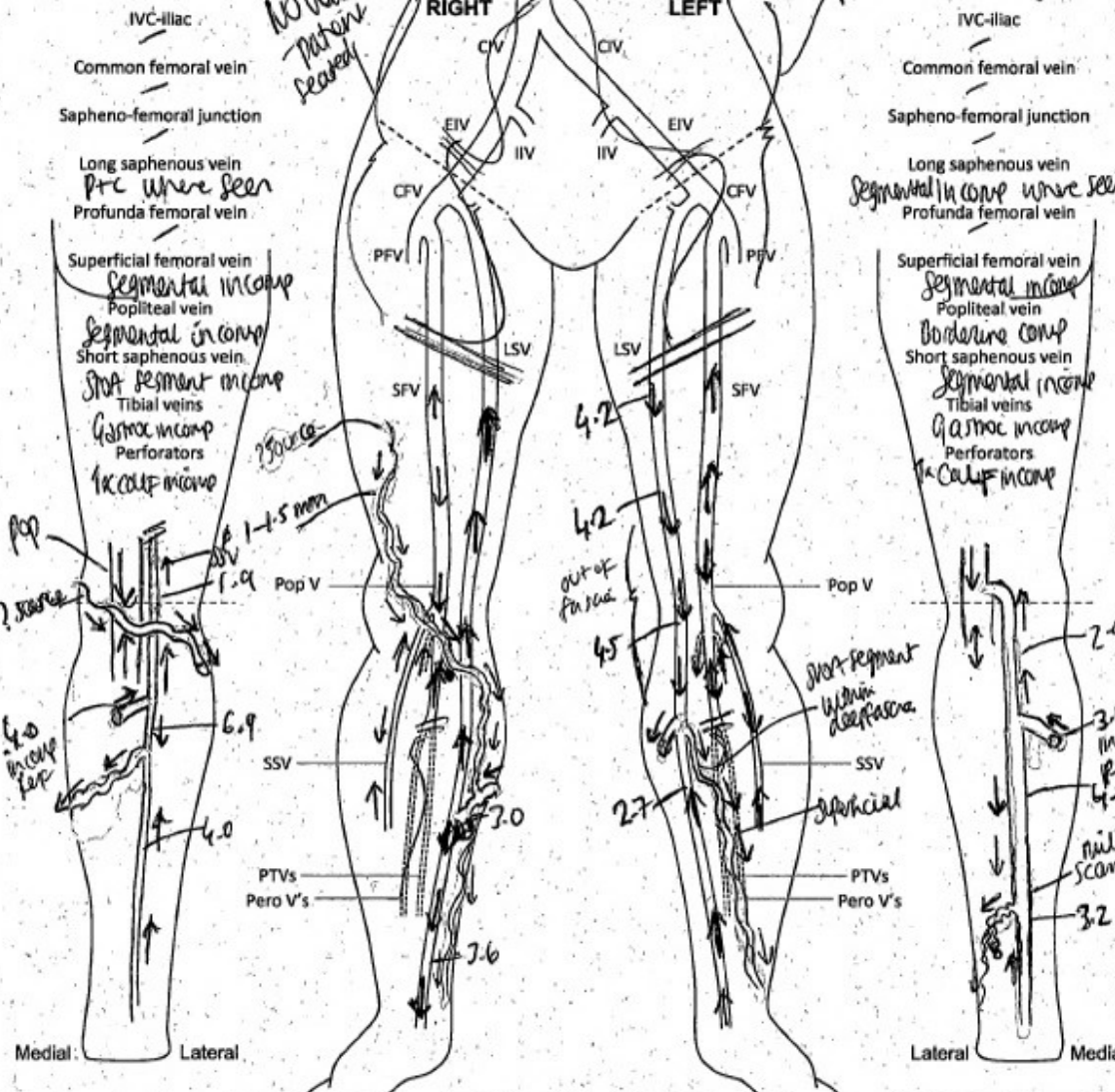
Indications:

Previous treatment. Occasional ^{skin} breakdowns + Cellulitis

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments: Unidirectional scan with patient seated. Patient was not comfortable standing to be scanned.

- ① Segmental deep venous reflux. Posterior calf incomp perforator \Rightarrow SSV \Rightarrow VV \Rightarrow calf LSV reflux
- ② LSV in competent in distal thigh to prox calf. Segmental SSV reflux from incompetent perforator

Indications:

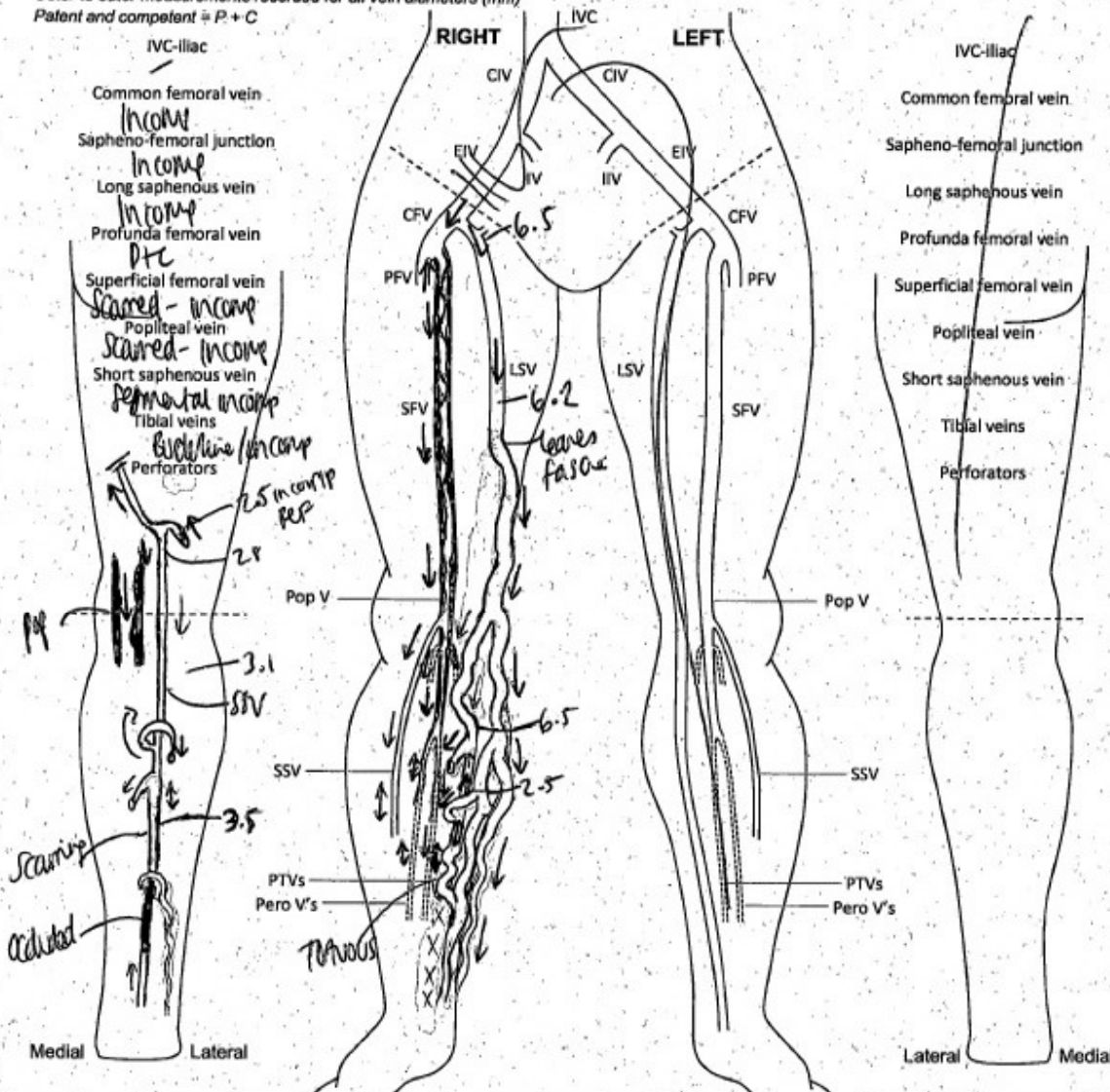
Consultant JAFFER

R venous ulcer

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

- Extensive scarring of the SFV + popliteal vein. Recanalised but incompetent. Gastrocnemius reflux and PTV reflux.
- SFV + LSV incompetent \Rightarrow VUS
- SSV segmental reflux from incompetent thigh extension vein (perforator source of reflux)
- Occluded segment of distal SFV

Indications:

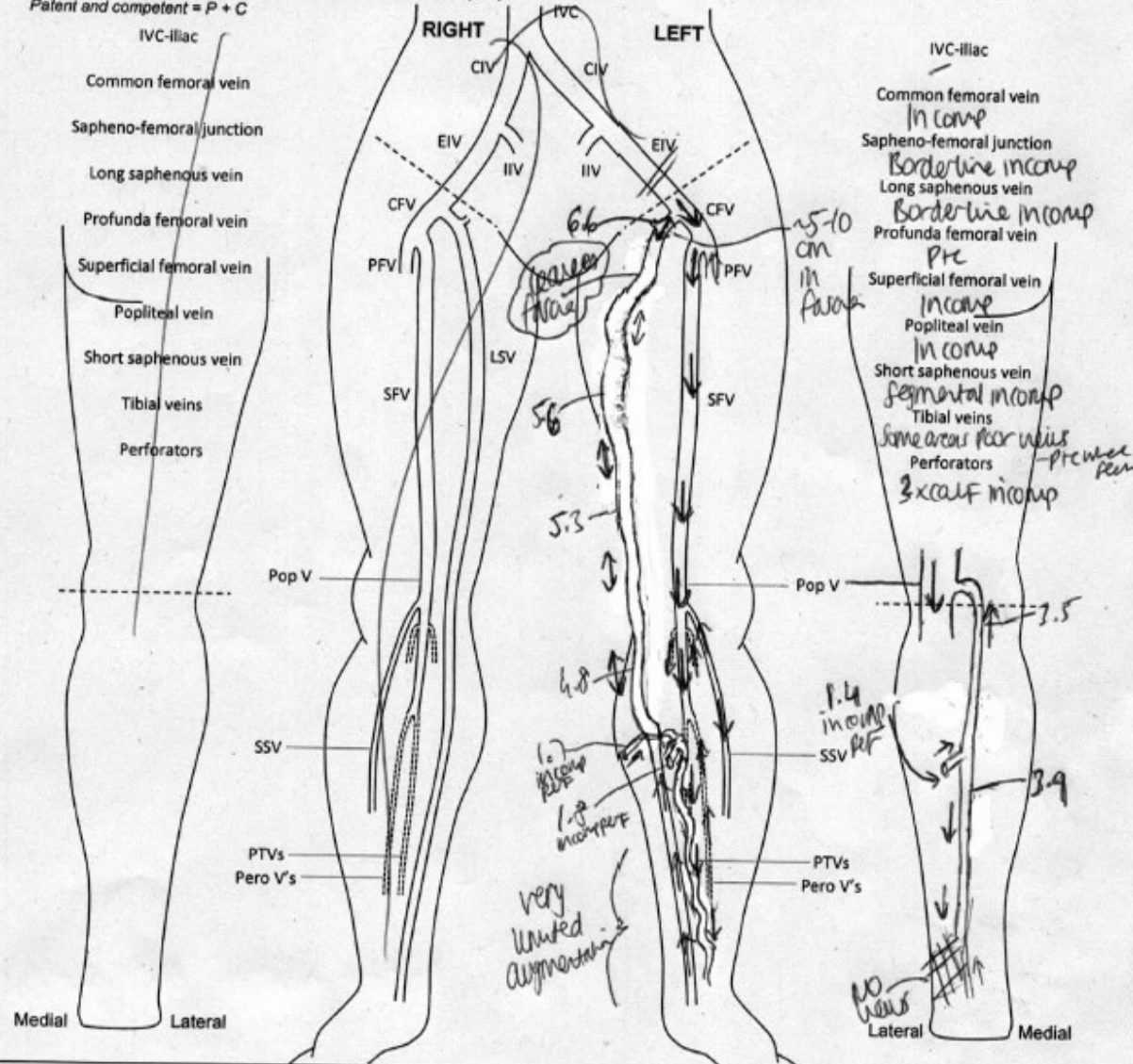
L leg ulcer

Consultant JAFFER

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

- Deep venous reflux - CFV, STV, popliteal + gastrocnemius veins incompetent
- LSV (from STJ) borderline incompetence to mid calf. LSV leaves fascia in prox thigh

Indications:

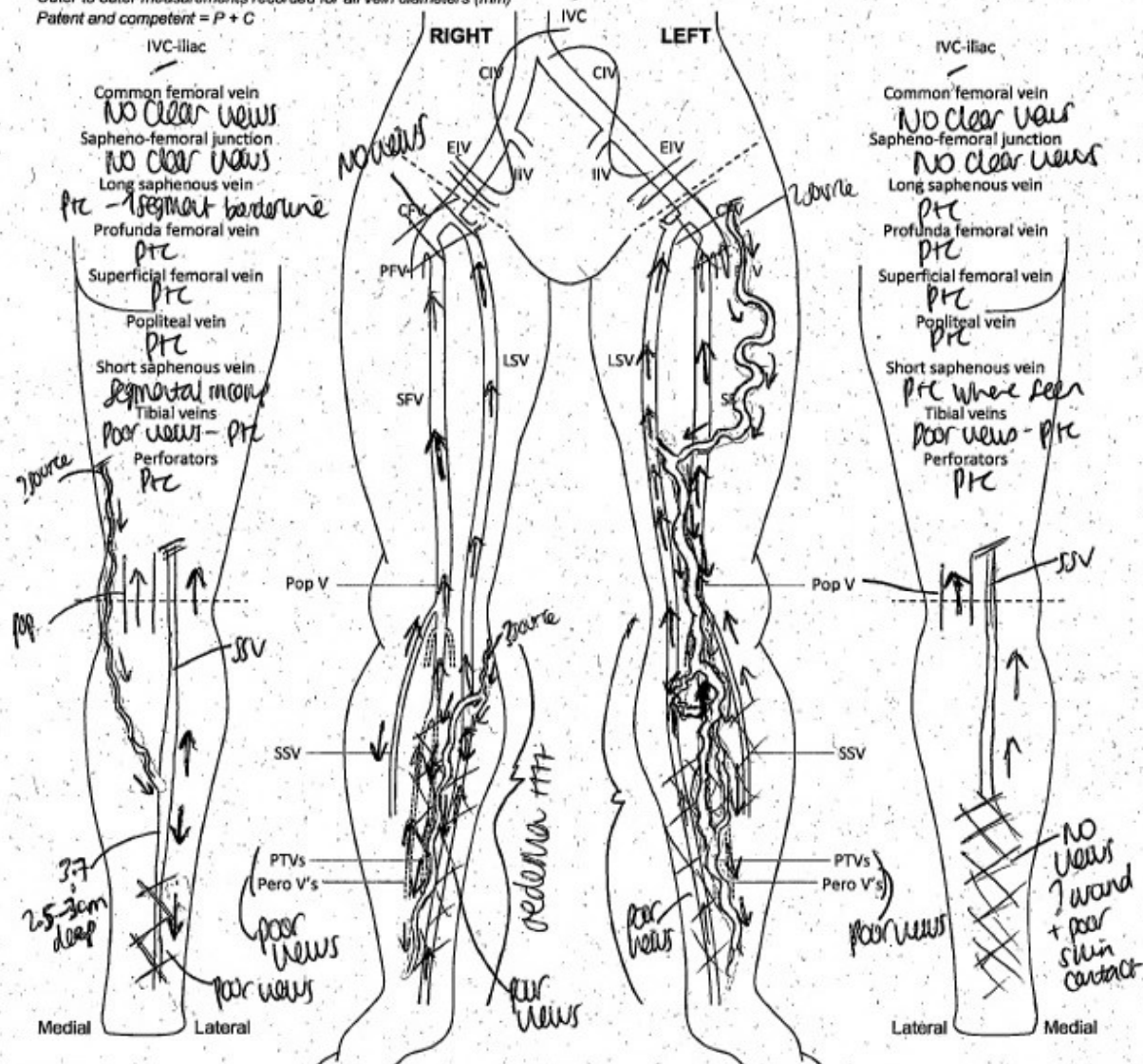
Consultant DAV IES

Bilateral leg swelling

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments: • Very Suboptimal alignment - patient pain + calf size

Bilaterally - deep veins patent + competent where seen

② Incompetent superficial branch anterior-medial calf? source. Distal SSV reflux from small in competent branch? source

③ Incompetent + superficial branches in thigh + calf - source unclear.

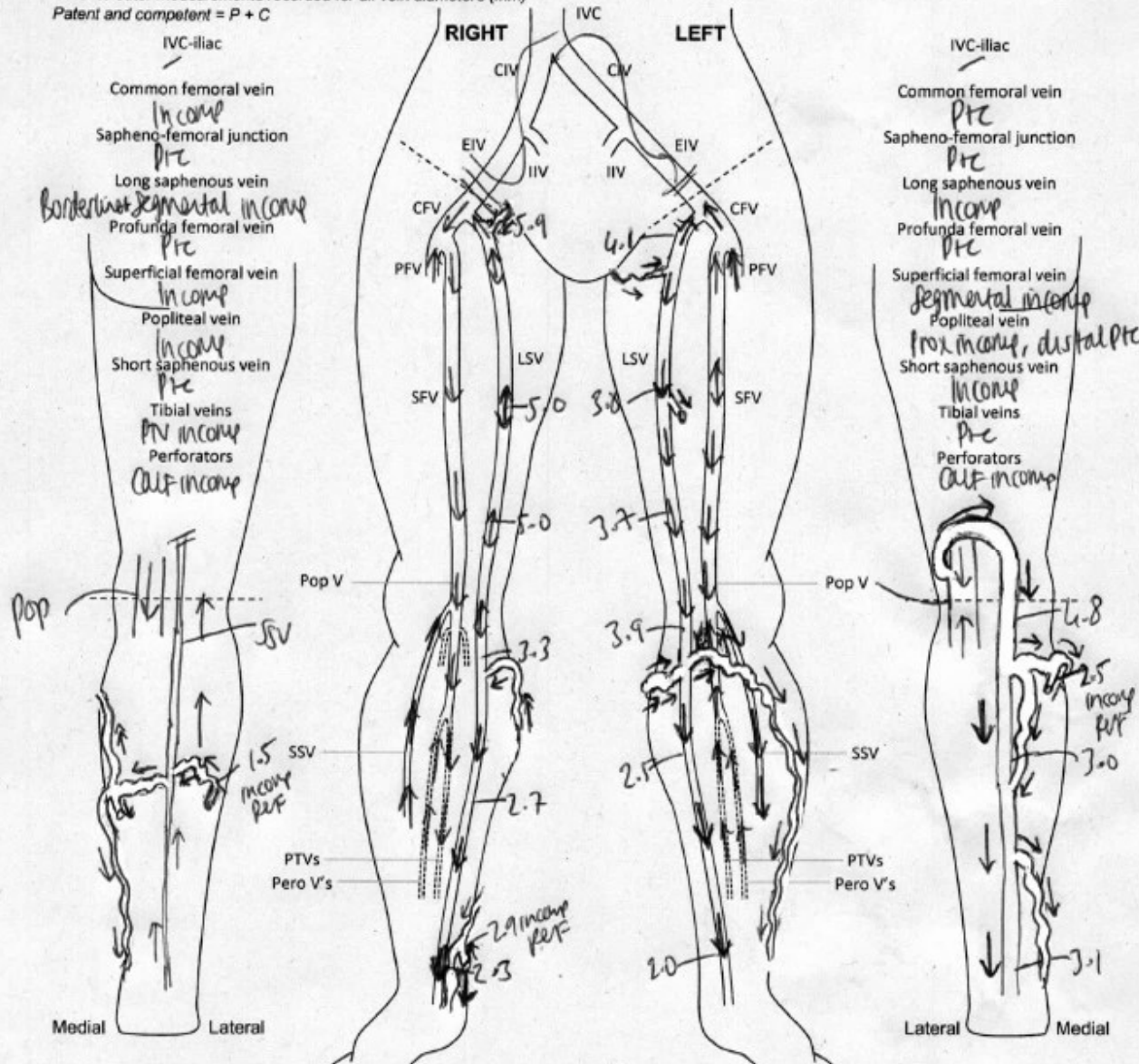
Indications:

Consultant RGA

Bilateral venous skin changes

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)
Patent and competent = P + C



Comments:

① Deep venous reflux. Borderline thigh LV competence. Incompetent calf LV.
Calf perforators ⇒ UV's ⇒ LV reflux. SSV competent

Indications:

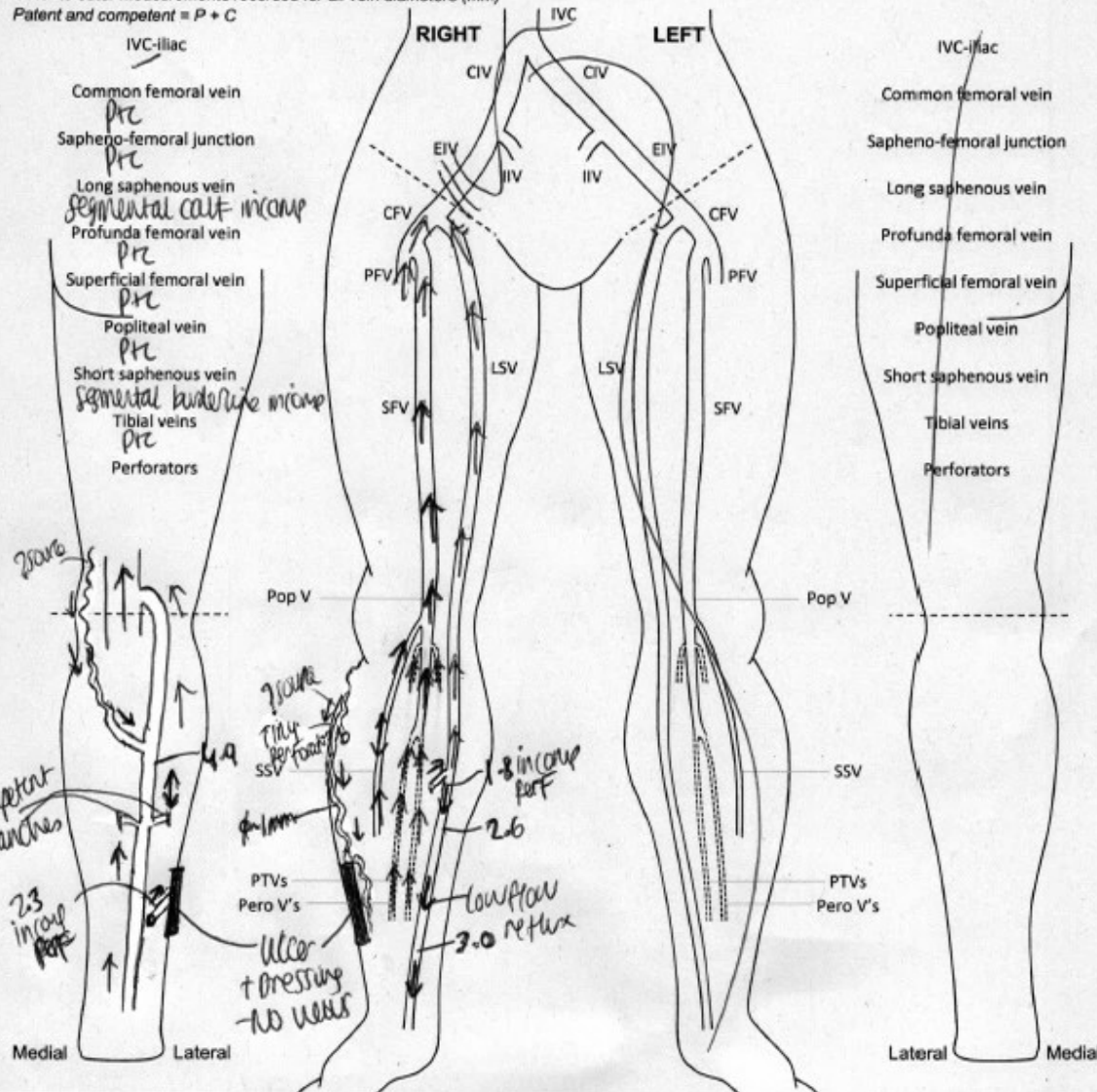
Consultant *MCFA*

R leg ulcer

Duplex Ultrasound: Lower Limb Venous Insufficiency Assessment

Outer to outer measurements recorded for all vein diameters (mm)

Patent and competent = P + C



Comments:

- Deep veins patent and competent
- Distal calf LSV reflux (low flow) from 2 perforator
- Short segment of borderline SSV incompetence - appears to dissipate into competent branches
- Small (~1mm) incompetent branches noted on the antero-lateral calf tracing towards the
- Incompetent perforator with flow in direction of ulcer - unable to assess