



**Latest US Doppler lower limb veins**

**Lower Limb Venous Duplex Examination**

Lower Limb Venous Duplex Examination

On the Right:

The SFJ and LSV in the thigh are normal and competent. The LSV in the proximal calf to ankle is incompetent due to very superficial proximal varices.

There is a incompetent perforator in the mid line of the posterior thigh just below the buttock (measuring 2mm in diameter) filling very superficial varices in the posterior thigh to lateral varices to the knee crease and filling around into the LSV in the proximal calf

The SPJ appears absent.

The SSV are normal and competent.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

On the Left:

The SFJ and the terminal section of the LSV is normal and competent. However there is a small incompetent groin tributary (measuring 1mm in diameter) that fills into the LSV in the groin. The LSV in the groin to ankle is incompetent and straight in the fascia and fills varices in the calf.

The LSV in the proximal thigh measures 3mm in dia. The LSV in the mid-thigh dilates and measures 10mm in dia. The LSV in the distal thigh measures 5mm in dia. The LSV in the knee crease is tortuous measures 8mm in dia. The LSV in the calf measures 3mm in dia.

The SPJ appears absent

The SSV in the proximal to mid-calf is normal and competent.

The SSV is incompetent in the mid to distal calf due to very small proximal calf varices which are difficult to trace. The SSV in the mid-calf measures 2mm in dia.

No incompetent perforators detected.

The common femoral vein, superficial femoral vein, popliteal vein, posterior tibial veins, peroneal veins are patent and competent

The gastrocnemius veins appears incompetent with no scarring,

Conclusion:

Rt: There is an incompetent perforator in the mid line of the posterior thigh just below the buttock (measuring 2mm in diameter) filling very superficial varices in the posterior thigh to lateral varices of the knee crease and filling around into the LSV in the proximal calf. The LSV in the proximal calf to ankle is incompetent due to very superficial proximal varices.

Lt: There is a small incompetent groin tributary (measuring 1mm in diameter) that fills into the LSV in the groin. The LSV in the groin to ankle is incompetent and straight in the fascia and fills varices in the calf.

The SSV is incompetent in the mid to distal calf due to very small proximal calf varices which are difficult to trace. The SSV in the mid-calf measures 2mm in dia.

The gastrocnemius veins appears incompetent with no scarring,

Scanned & Reported By: Mervyn McKenna Clinical Vascular Scientist (AVS) trainee

**Lower Limb Venous Duplex Examination**

Lower Limb Venous Duplex Examination

On the Right:

The SFJ and LSV are normal and competent.

The SPJ appears absent

The SSV are normal and competent.

No incompetent perforators detected.

The common femoral vein is patent and competent.

The superficial femoral vein and proximal popliteal vein (chronic scarring seen)and one of the posterior tibial veins are incompetent. The distal popliteal vein is patent and competent.

The Gastrocnemius veins, peroneal veins are patent and competent examined).

On the Left:

The SFJ and LSV are normal and competent.

The SPJ appears absent

The SSV are normal and competent.

No incompetent perforators detected.

The common femoral vein, superficial femoral vein (Bifid), popliteal vein, posterior tibial veins, peroneal veins and gastrocnemius veins are patent and competent with no evidence of previous DVT. The soleal vein is incompetent

Conclusion:

Rt: The superficial femoral vein and proximal popliteal vein (chronic scarring seen) and one of the posterior tibial veins are incompetent.

Lt: The soleal vein is incompetent

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**LEFT Lower Limb Venous Duplex:**

On the Left:

The SFJ is previously ligated with evidence of groin /medial proximal -thigh small neogenisis to a non-uniform recurrence of the LSV, feeding antero-medial thigh varices.

The SPJ is absent.

The SSV is normal and competent.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

There is an incompetent perforator in the medial proximal calf 5cm below the knee crease that fills varices in the calf. The perforator measures 1.3mm in dia.

There is an incompetent perforator in the medial distal calf 10cm above the Medial Malleolus that fills varices in the calf. The perforator measures 4mm in dia

A mixed area of echogenicity seen in the popliteal fossa consistent with appearance of a complex Baker's cyst.

No evidence of thigh and calf DVT, DVI or thrombophlebitis.

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**Lower Limb Venous Duplex Examination**

Difficult scan due to body habitus: patient unable to stand for long for the scan

RIGHT Lower Limb Venous Duplex:

AASV is patent and competent.

The SFJ and LSV in the thigh appear patent and competent.

The LSV appears to become incompetent in the proximal calf after communication with a vein which splits of into smaller veins one of which is a very superficial incompetent vein which can be traced up the anterior thigh to anterior lateral groin.

The LSV in the calf measures 8mm in dia.

The SGJ and SSV appears patent and competent

No incompetent perforators detected.

The common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins are patent and competent with no evidence of previous DVT (examined).

The soleal appears incompetent

No evidence of superficial thrombophlebitis

LEFT Lower Limb Venous Duplex:

AASV is patent and competent.

The SFJ and LSV in the thigh appear patent and competent.

The LSV in the proximal calf appear patent and competent.

The LSV appears to become incompetent in the mid-calf due a communication with a vein in the distal posterior calf which is a very superficial. The origin of this incompetent vein is difficult to trace in the distal calf but communicates with the distal SSV.

The SGJ and SSV appears patent and competent

The LSV in the calf measures 4mm in dia.

No incompetent perforators detected.

The common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins are patent and competent with no evidence of previous DVT (examined).

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**LEFT Lower Limb Venous Duplex:**

On the Left:

The recurrent SFJ (approx. 3mm dia) is incompetent.

The LSV (very small calibre in the mid-thigh) is normal and competent.

There is an incompetent groin tributary (measuring 5.5mm in dia) which fills into a tortuous anterior thigh to lateral calf varices. The connection between the groin tributary into the anterior varicosity is also connected to the incompetent SFJ.

The anterior accessory saphenous vein (AASV) is competent (measuring 2.3mm in dia)

The SPJ and SSV are normal and competent.

No incompetent perforators detected.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

Conclusion

LT: The incompetent recurrent SFJ and incompetent groin tributary fill into a tortuous anterior thigh to lateral calf varicosity.

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**Lower Limb Venous Duplex Examination**

On the Right:

SFJ is incompetent

The LSV in the groin to proximal calf is incompetent and straight in the fascia and fills varices in the calf. The LSV in the proximal calf to ankle is competent

The LSV in the thigh measures 10-8mm in dia The LSV in the knee crease measures 8mm in dia. The LSV in the calf measures 4-7mm in dia.

The SPJ and SSV are normal and competent.

No incompetent perforators detected.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

On the Left:

There is a competent groin tributary.

SFJ is incompetent at the second valve.

The LSV in the groin to distal thigh is incompetent and straight in the fascia and fills varices in the calf. The LSV is competent in the proximal calf. The LSV in the mid/proximal calf is incompetent for a short section due to proximal varices and fills into varices in the calf. The LSV in the mid to distal calf is small in calibre competent and patent.

The LSV in the thigh measures 8-5 mm in dia The LSV in the knee crease measures 4mm in dia. The LSV in the calf measures 5mm in dia.

The SPJ and SSV are normal and competent.

No incompetent perforators detected.

The one of the posterior tibial veins are incompetent.

The common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, peroneal veins are patent and competent with no evidence of previous DVT

Conclusion:

Rt: SFJ is incompetent

The LSV in the groin to proximal calf is incompetent and straight in the fascia and fills varices in the calf. The LSV in the proximal calf to ankle is competent

Lt: SFJ is incompetent at the second valve.

The LSV in the groin to distal thigh is incompetent and straight in the fascia and fills varices in the calf. The LSV in the proximal calf is incompetent for a short section due to proximal varices and fills into varices in the calf.

The one of the posterior tibial veins are incompetent.

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**Lower Limb Venous Duplex Examination**

On the Right:

SFJ is incompetent

The LSV in the groin to knee is incompetent and straight in the fascia and fills varices in the mid-thigh and at the knee crease. The LSV in the proximal calf becomes incompetent for a short section due to proximal varices and then fill out to varices in the mid-calf. The LSV in the mid to distal calf is patent and competent.

The LSV in the thigh measures 14-10mm in dia The LSV in the knee crease measures 6mm in dia. The LSV in the calf measures 6mm in dia.

The SPJ and SSV are normal and competent.

No incompetent perforators detected.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

On the Left:

There is an incompetent groin tributary (measures 5mm in dia) that fills into the SFJ

The SFJ is incompetent

The anterior accessory saphenous vein (AASV) is incompetent straight and 10cm in length filling varices in the thigh. AASV measures 5mm in dia in the proximal thigh

The LSV in the groin to mid-thigh is incompetent and straight in the fascia and fills varices in the mid-thigh and distal calf. The LSV in the mid/distal thigh to ankle is competent.

The LSV in the thigh measures 13-9mm in dia The LSV in the knee crease measures 3mm in dia.

The SPJ appears absent

The SSV is normal and competent.

No incompetent perforators detected.

The common femoral vein gastrocnemius veins and posterior tibial veins are patent and competent with no evidence of previous DVT

The superficial femoral vein, popliteal vein are incompetent

Conclusion:

Rt: SFJ is incompetent

The LSV in the groin to knee is incompetent and straight in the fascia and fills varices in the mid-thigh and at the knee crease.

Lt: SFJ is incompetent

The anterior accessory saphenous vein (AASV) is incompetent straight filling varices in the thigh.

There is an incompetent groin tributary (measures 5mm in dia) that fills into the SFJ.

The LSV in the groin to mid-thigh is incompetent and straight in the fascia and fills varices in the mid-thigh and distal calf.

The LSV in the mid/distal thigh to ankle is competent.

The superficial femoral vein, popliteal vein are incompetent

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**Lower Limb Venous Duplex Examination**

On the Right:  
SFJ is incompetent

The LSV in the groin to proximal calf is incompetent and straight in the fascia and fills varices in the mid-calf and into the mid SSV. The LSV in the mid to distal calf is competent.

The LSV in the thigh measures 11-7mm in dia. The LSV in the knee crease measures 6mm in dia. The LSV in the calf measures 2mm in dia.

The SPJ is incompetent with a medial insertion and 1cm above the knee crease measures 5mm in dia.

The SSV is incompetent in the proximal to distal calf filling varices in the ankle. The SSV measures 6-8mm in dia.

No incompetent perforators detected.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

Conclusion:

Rt: SFJ is incompetent

The LSV in the groin to proximal calf is incompetent and straight in the fascia and fills varices in the mid-calf and into the mid SSV. The LSV in the mid to distal calf is competent.

The SPJ is incompetent.

The SSV is incompetent in the proximal to distal calf filling varices in the ankle.

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**Lower Limb Venous Duplex Examination**

On the Right:

There is a Recurrent SFJ which is incompetent (Recurrent measures 1.8mm in dia) fills a tortuous nest of varices in the groin which fills into the LSV in the proximal thigh.

The LSV in the proximal thigh is straight and incompetent and fills in the proximal thigh.

The LSV in the proximal to mid-thigh appears absent. The LSV in the mid-thigh (measures 2.4mm in dia) is incompetent (difficult to trace source) and fills varices in the posterior thigh.

The LSV in the proximal calf to ankle appears to be absent.

There is an incompetent perforator in the distal calf 10cm above the medial malleolus (Scarring) measures 2.3mm in dia which fills varices in the distal calf

There is an incompetent perforator in the distal calf 5cm above the medial malleolus measures 1.7mm in dia which fills varices in the distal calf

The common femoral vein and gastrocnemius veins are patent and competent.

The main bifid superficial femoral vein, popliteal vein, posterior tibial veins, peroneal veins are incompetent

The SPJ appears absent

The SSV are normal and competent.

On the Left:

The SFJ and LSV appear absent in the thigh and calf.

The SPJ appears absent

The SSV in the proximal calf is normal and competent. The SSV in the mid-calf is incompetent due to incompetent perforator. The SSV in the distal calf is normal and competent.

There is an incompetent perforator in the proximal calf 40cm above the medial malleolus measures 2.6mm in dia which fills varices in the mid-calf

There is an incompetent perforator in the posterior calf 15cm above the medial malleolus measures 2.5mm in dia which fills varices in the calf and SSV in the mid-calf

There is an incompetent perforator in the distal medial calf 10cm above the medial malleolus measures 7mm in dia which fills varices in the calf

The posterior tibial veins are patent and competent.

The common femoral vein, the main bifid superficial femoral vein, popliteal vein, gastrocnemius (Scarring) and peroneal veins are incompetent

Conclusion:

See above report above

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**Lower Limb Venous Duplex Examination**

On the Right:

The SFJ is normal and competent.

The terminal section of the LSV is competent.

There is a very short section (1cm) of the anterior accessory saphenous vein (AASV) which is incompetent at the first valve which fills into the very tortuous incompetent varices in the groin which fills into the LSV in the groin. The LSV in the groin to distal thigh is incompetent and straight in the fascia and drains into a perforator in the distal thigh. The LSV in the very distal thigh to ankle is competent

The LSV in the proximal thigh measures 2mm in dia, The LSV in the mid-thigh measures 2mm in dia. The LSV in the knee crease measures 2mm in dia.

The SPJ and SSV are normal and competent.

There is a large incompetent perforator (measuring 8mm in dia) in the posterior lateral thigh 20cm above the knee crease which fills into large lateral thigh and calf varices. These varices pass through the LSV in the proximal calf but do not make the LSV incompetent in the calf.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

Conclusion:

Rt: There is a large incompetent perforator (measuring 8mm in dia) in the posterior lateral thigh 20cm above the knee crease which fills into large lateral thigh and calf varices.

These varices pass through the LSV in the proximal calf but do not make the LSV incompetent in the calf.

A very short section (1cm) of the anterior accessory saphenous vein (AASV) which is incompetent at the first valve which fills into the very tortuous incompetent varices in the groin which fills into the LSV in the groin.

The LSV in the groin to distal thigh is incompetent and straight in the fascia and drains into a perforator in the distal thigh

The LSV in the very distal thigh to ankle is competent

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**Lower Limb Venous Duplex Examination**

Patient repetitively fainted during scan

On the Left:

The SFJ and LSV are normal and competent.

The SPJ is incompetent (Low velocity reflux) at the knee crease with a lateral insertion. The SPJ is 8mm in dia.

The SSV in the proximal to mid-calf is incompetent (Low velocity reflux) and fills varies in the mid-calf (measures 7mm in dia) . The SSV in the distal calf is competent and patent.

No incompetent perforators detected.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

Conclusion:

Lt: The SPJ is incompetent (Low velocity reflux) at the knee crease with a lateral insertion.

The SSV in the proximal to mid-calf is incompetent (Low velocity reflux) and fills varies in the mid-calf

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**Lower Limb Venous Duplex Examination**

On the Left:

SFJ is incompetent

There are two groin tributaries both tortuous. One is incompetent (measures 4mm in dia) and fills into the SFJ the other is groin tributary is competent.

The LSV in the groin to distal calf is incompetent and straight in the fascia and fills varices in the distal calf and foot. The LSV in the ankle is competent and patent.

The LSV in the thigh measures 10-9mm in dia The LSV in the knee crease measures 16mm in dia. The LSV in the calf measures 8mm in dia.

The SSV is normal and competent.

Saphenogastrocnemius junction (SGJ) is normal and competent.

No incompetent perforators detected.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

Conclusion:

Lt:

There are two groin tributaries both tortuous. One is incompetent and fills into the SFJ the other is groin tributary is competent.

The LSV in the groin to distal calf is incompetent and straight in the fascia and fills varices in the distal calf and foot.

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**Lower Limb Venous Duplex Examination**

On the Right:

The SFJ and LSV are normal and competent.

The SGJ and SSV are normal and competent.

No incompetent perforators detected.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein (Bifid), popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

There is an incompetent perforator in the proximal posterior lateral thigh of the 15cm above the knee crease the fills into the varices in the distal thigh and calf. The perforator measures 2.8mm in dia

Conclusion:

Rt: There is an incompetent perforator in the proximal posterior lateral thigh of the 15cm above the knee crease the fills into the varices in the distal thigh. The perforator measures 2.8mm in dia

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**Lower Limb Venous Duplex Examination**

On the Right:

SFJ is patent and competent.

There is an incompetent groin tributary (measures 1.7mm in dia) that fills anterior accessory saphenous vein (AASV).

The terminal section of the ASSV is incompetent

The AASV is incompetent straight and 10cm in length filling varices in the thigh and into the proximal/mid LSV. AASV measures 4mm in dia in the proximal thigh

The LSV in the groin to proximal thigh is patent and competent is linear.

The LSV in the proximal/mid to knee crease is incompetent due to varices of the AASV. The LSV in the distal thigh is out of the fascia and returns to the fascia at the knee crease. The LSV in the proximal calf appears absent.

The LSV in the mid to distal calf is incompetent filled by an incompetent perforator.

The LSV in the thigh measures 4mm in dia The LSV in the knee crease measures 3.5mm in dia. The LSV in the calf measures 3-2.5mm in dia.

The SPJ is incompetent and 10cm above the knee crease mid line. The SPJ is 3.9mm in dia.

The SSV in the proximal calf is incompetent and fills varices in the medal calf. The SSV in the mid calf is patent and competent. The SSV in the mid to distal calf is incompetent.

The SSV is linear in the fascia and measures 4.4mm in dia in the proximal calf and 2mm in dia in the distal calf.

There is an incompetent perforator in the medial proximal calf 15cm above the Medial Malleolus that fills into the LSV in the mid-calf. The perforator measures 3.6mm in dia

There is a ? incompetent perforator in the lateral aspect of the mid-calf 10cm above the Medial Malleolus that fills into the SSV in the mid-calf. The perforator measures 2mm in dia

Conclusion:

Rt:

See report above

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**Lower Limb Venous Duplex Examination**

On the Right:

SFJ is competent

The anterior accessory saphenous vein (AASV) at the first valve is incompetent straight and 12cm in length filling varices in the lateral thigh and the out of fascia LSV in the mid-thigh. AASV measures 3.6mm in dia in the proximal thigh

The LSV is competent in the proximal to mid-thigh. The LSV in the distal thigh leaves the fascia becomes incompetent due to proximal varices of the AASV. The out of fascia LSV is incompetent in the distal thigh to mid-calf filling varices in the posterior calf and SSV for a short section. The LSV in the mid/distal calf returns to the fascia and is competent to the ankle

The out of fascia LSV in the knee crease measures 4.4mm in dia.

The SPJ appears absent

The SSV is normal and competent (A short section is incompetent). The SSV is competent in the ankle.

No incompetent perforators detected.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

On the Left:

The SFJ is incompetent.

The LSV in the groin to proximal calf is incompetent then fills varices. The out of fascia LSV in the mid-calf is competent then becomes incompetent due to proximal varices and incompetent to the ankle.

The incompetent LSV is straight in the fascia in the proximal to distal thigh then leaves the fascia. The out of fascia LSV returns to the fascia in the mid-calf.

The LSV in the thigh measures 12-6mm in dia. The out of fascia LSV in the knee crease measures 5.5mm in dia. The in fascia LSV in the ankle measures 2.4mm in dia.

The SPJ appears absent

The SSV is normal and competent.

No incompetent perforators detected.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

Conclusion:

Rt: The anterior accessory saphenous vein (AASV) at the first valve is incompetent straight and 10cm in length filling varices in the lateral thigh and the out of fascia LSV in the mid-thigh.

Lt: The SFJ is incompetent.

The LSV in the groin to proximal calf is incompetent then fills varices. The out of fascia LSV in the mid-calf is competent then becomes incompetent due to proximal varices and incompetent to the ankle. The incompetent LSV is straight in the fascia in the proximal to distal thigh then leaves the fascia. The out of fascia LSV returns to the fascia in the mid-calf.

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**Lower Limb Venous Duplex Examination**

On the Right:

SFJ is competent

There is an incompetent medial groin tributary that fills into the terminal section of the LSV measures 2mm in dia

There is an incompetent anterior groin tributary that fills into the terminal section of the LSV measures 2mm in dia

The anterior accessory saphenous vein (AASV) is incompetent straight and 10cm in length filling varices in the thigh. AASV measures 3mm in dia in the proximal thigh.

The LSV in the groin to proximal calf is incompetent and straight in the fascia and fills varices in the calf.

The LSV in the thigh measures 4-5mm in dia The LSV in the knee crease measures 4mm in dia.

The SPJ appears absent

The proximal SSV are normal and competent. The mid SSV is incompetent due to proximal varices of the LSV. The Distal SSV is competent.

There is an incompetent perforator in the medial aspect of the calf 10cm above Medial Malleolus the fills into varices in the calf. The perforator measures 2.7mm in dia

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

On the Left:

SFJ is incompetent

The terminal section of the LSV is incompetent in the groin and fills into the AASV. The LSV in the proximal thigh to ankle is competent.

The anterior accessory saphenous vein (AASV) is incompetent straight and 10cm in length filling varices in the anterior and lateral thigh. AASV measures 3.6mm in dia in the proximal thigh

The LSV is competent in the thigh and calf.

There is a very superficial small varices of is difficult to trace which fills into a short section of the thigh extension in the posterior thigh.

The SPJ appears absent

The SSV are normal and competent.

No incompetent perforators detected.

The common femoral vein, superficial femoral vein, posterior tibial veins, peroneal veins are patent and competent with no evidence of previous DVT

The popliteal vein is incompetent no evidence of previous DVT

The gastrocnemius veins is incompetent no evidence of previous DVT

Conclusion:

Rt: An incompetent medial groin tributary that fills into the terminal section of the LSV

There is another incompetent anterior groin tributary that fills into the terminal section of the LSV measures The AASV is incompetent straight and 10cm in length filling varices in the thigh.

The LSV in the groin to proximal calf is incompetent and straight in the fascia and fills varices in the calf.

An incompetent perforator in the medial aspect of the calf 10cm above Medial Malleolus which fills into varices in the calf. The mid SSV is incompetent due to proximal varices of the LSV

Lt: The terminal section of the LSV is incompetent in the groin and fills into the AASV. The AASV is incompetent straight and 10cm in length filling varices in the anterior and lateral thigh.

There is very superficial small varix which is difficult to trace which fills into a short section of the thigh extension in the posterior thigh.

The popliteal vein is incompetent no evidence of previous DVT

The gastrocnemius veins is incompetent no evidence of previous DVT

Scanned & Reported By: Mervyn McKenna Clinical Vascular Scientist (AVS) trainee

**Lower Limb Venous Duplex Examination**

Right lower limb

SFJ is incompetent

The LSV in the groin to knee is incompetent and straight in the fascia and fills varicies in the calf. The LSV in the proximal to distal calf is small in calibre and competent.

The LSV in the groin measures 16mm in dia. The LSV in the thigh measures 8 to 7mm in dia. The LSV in the knee crease measures 7mm in dia.

The SPJ appears absent.

The SSV in the proximal to mid-calf is normal and competent. The SSV in the mid to distal calf is incompetent due to proximal varicies of the LSV. The SSV in the calf measures 2mm in dia.

No incompetent perforators detected.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

Conclusion:

Rt

SFJ is incompetent

The LSV in the groin to knee is incompetent and straight in the fascia and fills varicies in the calf. The LSV in the proximal to distal calf is competent.

The SSV in the proximal to mid-calf is normal and competent. The SSV in the mid to distal calf is incompetent due to proximal varicies of the LSV.

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**Lower Limb Venous Duplex Examination**

On the Left:

SFJ is incompetent

The anterior accessory saphenous vein (AASV) is incompetent tortuous then straight for 10cm filling varices in the thigh and calf. Acute on chronic superficial thrombophlebitis (30cm long approx.) seen in the varicies of the ASSV but not within 3cm of the SFJ.

AASV measures 2.3mm in dia in the groin. The AASV measures 10mm in dia in the proximal thigh

The LSV is normal and competent.

The SPJ appears absent

The SSV is normal and competent.

No incompetent perforators detected.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

Conclusion:

Lt:

Acute on chronic superficial thrombophlebitis (30cm long) seen in the varicies of the ASSV but not within 3cm of the SFJ.

No evidence of DVT in the left leg

SFJ is incompetent

Patient sent to A&E

**Lower Limb Venous Duplex Examination**

On the Right:

SFJ is incompetent

The LSV in the groin to knee is incompetent and straight in the fascia and fills varicies in the calf and into the distal LSV and proximal SSV.

The LSV in the groin measures 8.8mm in dia. The LSV in the proximal thigh is slightly tortuous measures 16mm in dia. The LSV in the mid and distal thigh measures 6.3-5.3mm in dia. The LSV in the knee crease measures 5.6mm in dia. The LSV in the calf is competent.

The SPJ appears absent

The proximal SSV is incompetent with reverse reflux due to incompetent LSV. The mid to distal SSV is normal and competent.

The SSV measures 5mm in diameter

No incompetent perforators detected.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

On the Left:

SFJ is incompetent

There is an incompetent groin tributary which fills into the terminal section of the LSV. The groin tributary measures 1.6mm in dia

The LSV in the groin to knee is incompetent and straight in the fascia and fills varicies in the calf and into the distal LSV and proximal SSV.

The LSV in the thigh measures 4mm in dia. The LSV in the knee crease measures 4mm in dia. The LSV in the calf is competent.

The SPJ appears absent

The proximal SSV is incompetent with reverse reflux due to incompetent LSV. The mid to distal SSV is normal and competent.

The SSV measures 5mm in diameter

No incompetent perforators detected.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

Conclusion:

Rt: SFJ is incompetent

The LSV in the groin to knee is incompetent and straight in the fascia and fills varicies in the calf and into the distal LSV and proximal SSV.

Lt: SFJ is incompetent,

Incompetent groin tributary which fills into the terminal section of the LSV.

The LSV in the groin to knee is incompetent and straight in the fascia and fills varicies in the calf and into the distal LSV and proximal SSV. The proximal SSV is incompetent with reverse reflux due to incompetent LSV.

Scanned & Reported By: Mervyn McKenna Clinical Vascular Scientist (AVS) trainee

**Lower Limb Venous Duplex Examination**

On the Left:

SFJ is incompetent

There is an incompetent groin tributary (measures 2.8mm in dia) that fills into the terminal section of the LSV. The terminal section of the LSV is incompetent and fills into the ASSV.

The anterior accessory saphenous vein (AASV) is incompetent straight and 20cm in length filling varices in the thigh which fills up and into the LSV in the mid-thigh. AASV measures 7.7mm in dia in the proximal thigh

The LSV in the thigh and proximal calf is linear and in the fascia.

The LSV in the proximal thigh is competent. The LSV in the mid-thigh to proximal calf is incompetent due to varices of the ASSV.

The incompetent LSV in the proximal calf fill varices in the calf which fill into the mid to distal SSV.

The LSV in the mid-thigh measures 8mm in dia. The LSV in the distal thigh measures 6mm in dia The LSV in the knee crease measures 6mm in dia. The LSV in the knee crease measures 6mm in dia

The SPJ appears absent

The SSV in the proximal calf is competent. The SSV in the mid to distal calf is incompetent due to proximal varices and measure 3mm in dia in the calf

No incompetent perforators detected.

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

Conclusion:

Lt: There is a small incompetent groin tributary

The AASV is incompetent

The LSV is Incompetent in the mid-thigh to proximal calf filling varices in the calf and SSV

Scanned & Reported By: Mervyn McKenna Clinical Vascular Scientist (AVS) trainee

**Lower Limb Venous Duplex Examination**

On the Right:

SFJ is incompetent

The LSV in the groin to very distal thigh is incompetent and generally straight in the fascia (Tortuous LSV in the mid-thigh) and fills varicies in the calf. The LSV in the knee crease is very small and appears very small or absent in the proximal calf. The LSV in the mid to distal calf is patent and competent

The LSV in the thigh measures 7-8mm in dia The LSV in the knee crease measures 1.6mm in dia. The LSV in the distal calf measures 1.8mm in dia.

The SPJ appears absent

The SSV are normal and competent.

No incompetent perforators detected. There are 2 competent perforators in the proximal and mid-calf

The common femoral vein is incompetent above the level of the SFJ

The superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins are patent and competent with no evidence of previous DVT (examined).

Conclusion

Rt: SFJ is incompetent

The LSV in the groin to very distal thigh is incompetent and generally straight in the fascia (Tortuous LSV in the mid-thigh) and fills varices in the calf.

The LSV in the knee crease is very small and appears very small or absent in the proximal calf

Scanned by Mervyn Mckenna AVS trainee

On the Left

SFJ is incompetent

The LSV in the groin to mid-thigh is incompetent and straight in the fascia and fills varicies in the distal medial thigh and calf. The LSV in the distal thigh to ankle is competent.

The LSV in the proximal to mid-thigh measures 5mm in dia The LSV in the distal thigh measures 2mm in dia. The LSV in the knee crease 5mm in dia.

The SPJ and SSV are normal and competent.

One of the patent gastrocnemius veins are incompetent

The common femoral vein, superficial femoral vein, popliteal vein, posterior tibial veins, peroneal veins are patent and competent

Unable to scan over the ulcers due to patent compliance but no incompetent perforators where detected where seen in the calf.

Lt:

SFJ is incompetent

The LSV in the groin to mid-thigh is incompetent and straight in the fascia and fills varicies in the distal medial thigh and calf.

The LSV in the distal thigh to ankle is competent.

Scanned & Reported By: Mervyn McKenna Clinical Vascular Scientist (AVS) trainee

**Lower Limb Venous Duplex Examination**

On the Right:

SFJ is competent

There is a very small incompetent groin tributary (measures 1.4mm in dia) that fills into terminal section of LSV in the groin

There is also another very small incompetent groin tributary that fills into proximal/mid-section of LSV.

The LSV in the groin to ankle is incompetent and straight and fills varices in the proximal calf. The LSV is out of fascia in the distal thigh to proximal calf.

The LSV in the thigh measures 5mm in dia The LSV in the knee crease measures 5mm in dia. The LSV in the calf measures 3mm in dia.

The SPJ and SSV in the proximal to mid-calf are normal and competent. The mid to distal SSV is calcified and incompetent caused by an incompetent perforator in the posterior mid-calf 15cm above the Medial Malleolus that fills into the SSV. The perforator measures 2mm in dia

All the deep veins are patent and competent with no evidence of previous DVT (common femoral vein, superficial femoral vein, popliteal vein, gastrocnemius veins, posterior tibial veins, peroneal veins examined).

Scanned & Reported By: Mervyn McKenna Clinical Vascular Scientist (AVS) trainee

**Lower Limb Venous Duplex Examination**

Challenging scan due to patient sitting on side of couch

On the Right:

The SFJ and LSV are normal and competent in the thigh.

The LSV in the proximal calf is incompetent and fills into varices in the calf. The LSV in the mid to distal calf is competent.

The LSV in the knee crease measures 3mm in dia. The LSV in the calf measures 2.6mm in dia.

The SPJ appears absent

The SSV are normal and competent.

There is a very small incompetent perforator in the medial aspect of the proximal calf of the 10cm below the knee crease the fills into the LSV in the proximal calf then into varices. The perforator measures 1mm in dia

The common femoral vein, superficial femoral vein, popliteal vein posterior tibial veins and peroneal veins are patent and competent with no evidence of previous DVT.

The gastrocnemius veins is incompetent

Incidental finding a mixed area of echogenicity seen in the popliteal fossa consistent with the appearance of a Baker's cyst measuring 2cm in dia AP and 4cm in dia LM.

On the Left:

The SFJ and LSV are normal and competent in the thigh and calf.

The SPJ and SSV are normal and competent.

There is an incompetent perforator in the medial aspect of the distal calf of the 10cm above the Medial Malleolus the fills into varices in the calf. The perforator measures 1mm in dia

The common femoral vein, superficial femoral vein, popliteal vein gastrocnemius veins and peroneal veins are patent and competent with no evidence of previous DVT.

The posterior tibial vein is incompetent

Incidental finding a mixed area of echogenicity seen in the popliteal fossa consistent with the appearance of a Baker's cyst measuring 1cm in dia AP and 3cm in dia LM.

Conclusion:

Rt: There is a very small incompetent perforator in the medial aspect of the proximal calf of the 10cm below the knee crease the fills into the LSV in the proximal calf then into varices.

The gastrocnemius veins is incompetent

Lt: There is a incompetent perforator in the medial aspect of the distal calf of the 10cm above the Medial Malleolus the fills into varices in the calf. The perforator measures 5mm in dia

The posterior tibial vein is incompetent

Scanned & Reported By: Mervyn McKenna Clinical Vascular Scientist (AVS) trainee

**Lower Limb Venous Duplex Examination**

Left Lower limbs

SFJ is competent

There are a number of incompetent very small superficial anterior descending tributaries in the groin which fill into the terminal section of the LSV in the groin.

The LSV in the groin to ankle is incompetent and straight in the fascia.

The LSV in the thigh measures 5-6mm in dia The LSV in the knee crease measures 6mm in dia. The LSV in the calf measures 7mm in dia.

There is an incompetent perforator in the medial aspect of the thigh 10cm above the knee crease which fills into the LSV in the mid-thigh. The perforator measures 2mm in dia

The common femoral vein is patient and competent.

The bifid superficial femoral vein is incompetent (Low velocity reflux) with no evidence of scarring.

The popliteal vein incompetent with no evidence of scarring.

The gastrocnemius veins, posterior tibial veins, peroneal veins are patient and competent

The SPJ and SSV are normal and competent.

Conclusion:

Lt: There are a number of incompetent very small superficial anterior descending tributaries in the groin which fill into the terminal section of the LSV in the groin.

The LSV in the groin to ankle is incompetent and straight in the fascia.

The bifid superficial femoral vein is incompetent (Low velocity reflux) with no evidence of scarring.

The popliteal vein incompetent with no evidence of scarring.

Scanned & Reported By: Mervyn McKenna Clinical Vascular Scientist (AVS) trainee