

Level 1  
Glenfield Hospital  
Tel: 0116 258 5440

University Hospitals  
of Leicester  
NHS Trust

# LOWER LIMB ARTERIAL DUPLEX SCAN REPORT

## Resting ankle pressures

	mmHg	mmHg			
Right	DP	PT	Per	BP	Index
	40	50	/	/	0.22
Left	DP	PT	Per	130	

## Post-exercise pressures

	mmHg	mmHg			
Right	DP	PT	Per	BP	Index
Left	DP	PT	Per		

Time walked \_\_\_\_\_ mph

Comment:

Scan comment: Right leg.

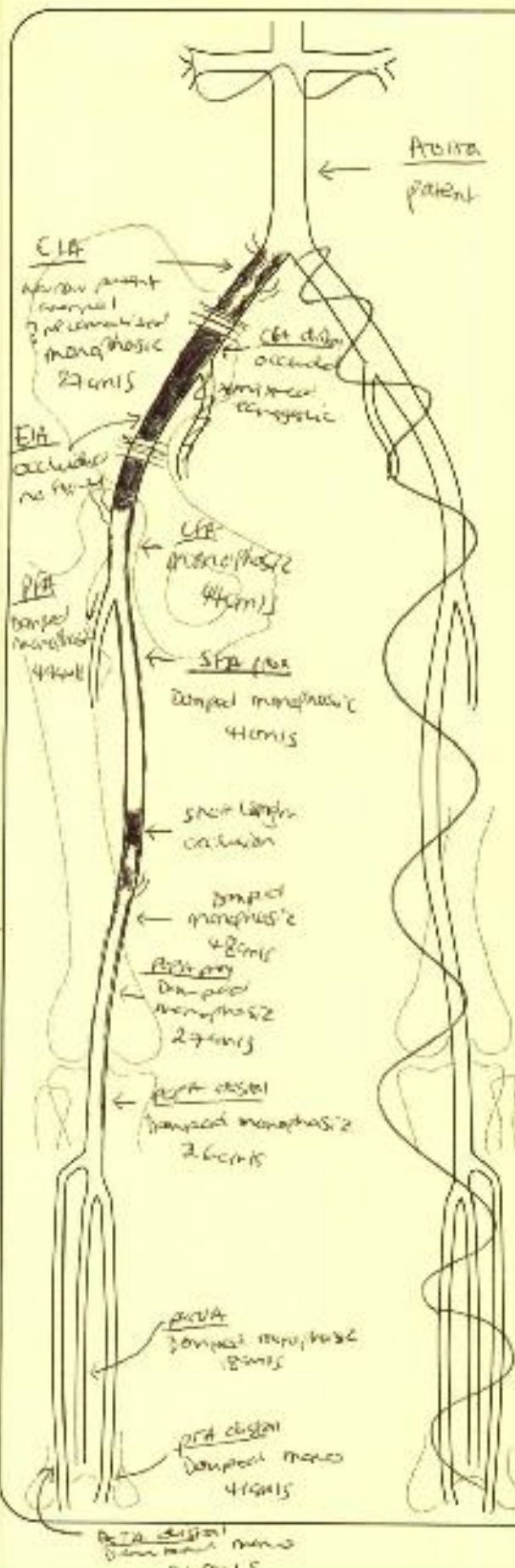
- \* All clear
- \* (R) CIA distal and
- (R) EIA appear occluded
- \* Short length occlusion
- seen in mid (R) SFA as
- had before (24/8/21).
- \* Three patent run-offs
- needed.

Image Quality: GOOD ☐ ☒ POOR

SIGNED: [Signature]  
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Khan

DATE: 11/1/22



## LOWER LIMB ARTERIAL DUPLEX SCAN REPORT

### Resting ankle pressures

Right DP PT Per BP Index

Left DP PT Per

### Post-exercise pressures

Right DP PT Per BP Index

Left DP PT Per

Time walked

nph

Comment:

Scan comment: L Arterial duplex.

\* Patient complains of  
numb sensation in left  
groin.

\* L iliac stent patent with  
(good upstroke) monophasic flow.

\* Significant stenosis noted  
in proximal SFA and  ~~profunda A.~~

\* Large segment of C SFA not seen  
due to significant calcification.

\* FU booked in 2 months.

\* ~~enter~~ sent to consultant.

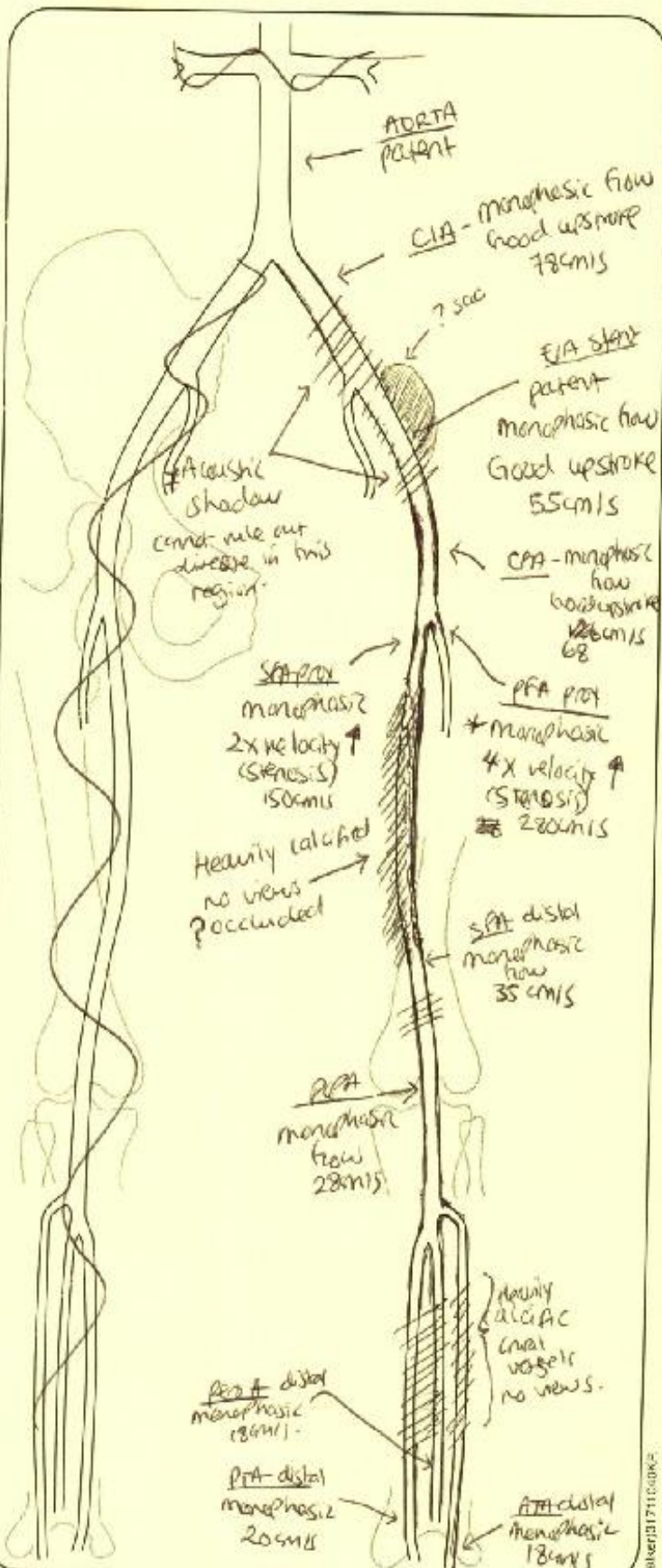
Image Quality: GOOD ☒ POOR

SIGNED: G. Smith

CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Foran

DATE: 17/11/21





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## LOWER LIMB ARTERIAL DUPLEX SCAN REPORT

### Resting ankle pressures

Right	DP	PT	Per	BP	Index
Left	DP	PT	Per		

### Post-exercise pressures

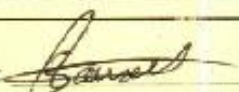
Right	DP	PT	Per	BP	Index
Left	DP	PT	Per		

Time walked \_\_\_\_\_ mph

Comment:

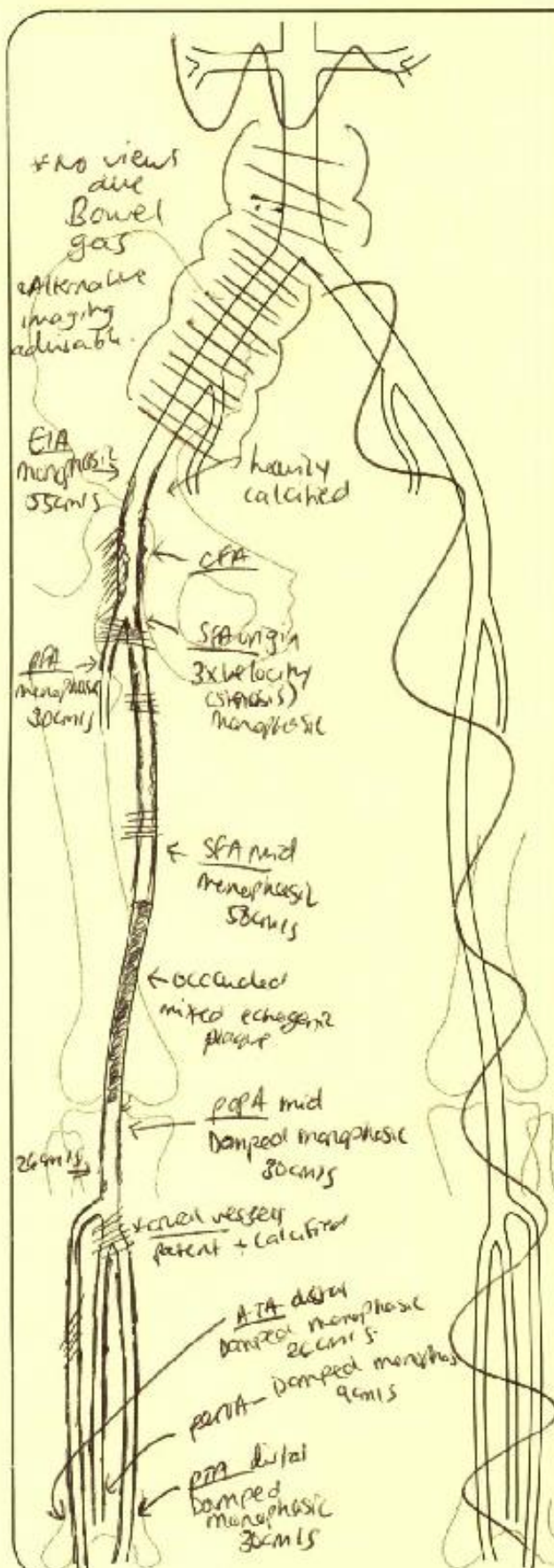
Scan comment: R. Arterial scan  
\* Monophasic flow noted  
in EIA, ? proximal disease.  
\* X3 stenosis noted at origin  
of SFA.  
\* Occlusion noted from  
mid SFA to mid popliteal  
artery.  
\* Three patent run-offs  
observed, with damped flow.

Image Quality: GOOD ☐ ☒ POOR

SIGNED:   
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Farn

DATE: 17/11/21



## LOWER LIMB ARTERIAL DUPLEX SCAN REPORT

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### Resting ankle pressures

Right	DP	PT	Per	BP	Index
Left	DP	PT	Per		

### Post-exercise pressures

Right	DP	PT	Per	BP	Index
Left	DP	PT	Per		

Time walked \_\_\_\_\_ mph

Comment:

Scan comment: Left leg

\* See diagram.

\* Monophasic flow noted in CFA, SFA and PFA. ? proximal disease.

\* popliteal A (mid-distal) occluded, acute in appearance

\* No run-offs flow noted ? occluded.

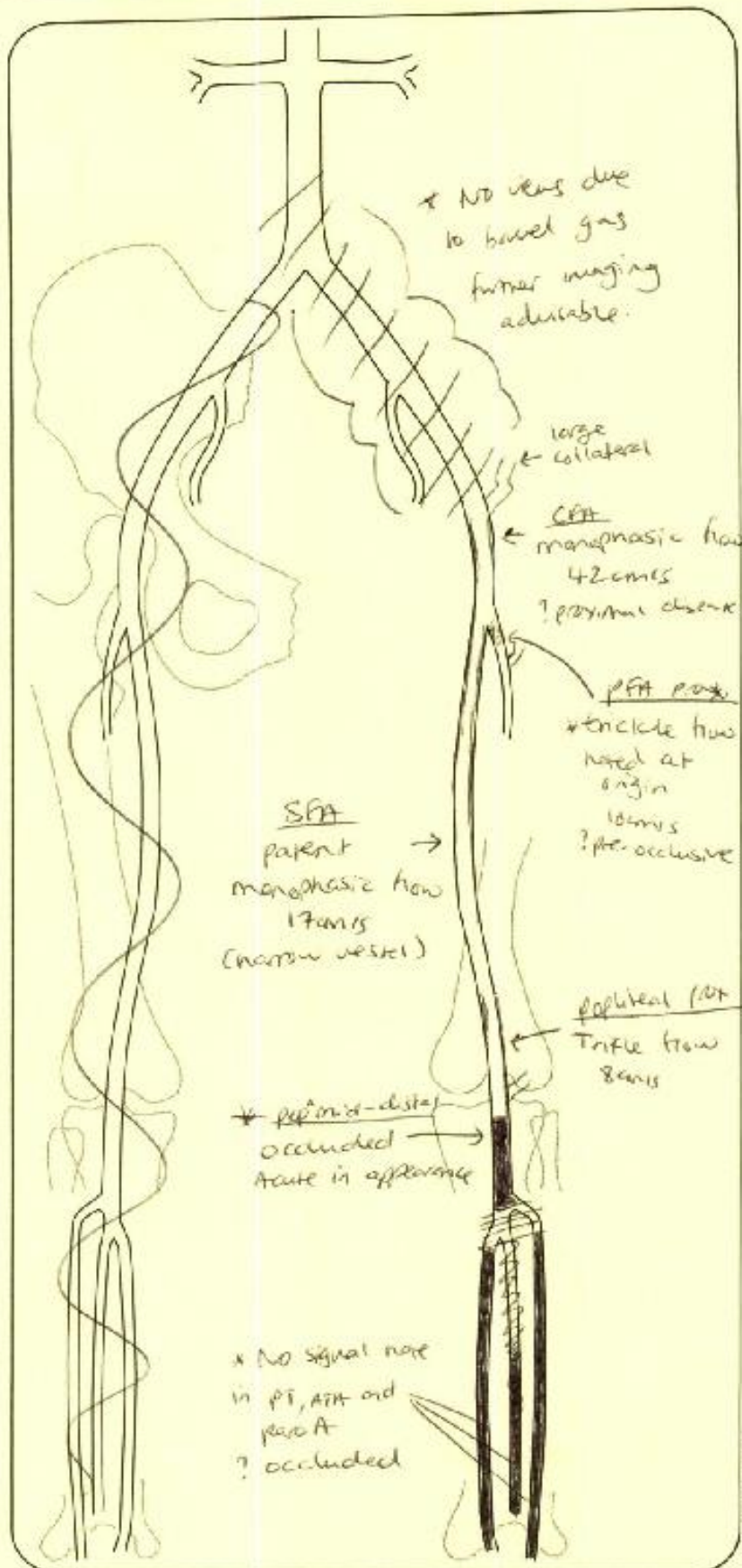
\* further imaging advisable

Image Quality: GOOD ☐ ☐ ☒ POOR

SIGNED: [Signature]  
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Khan

DATE: 7/1/22







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## LOWER LIMB ARTERIAL DUPLEX SCAN REPORT

### Resting ankle pressures

Right DP PT Per BP Index

Left DP PT Per

### Post-exercise pressures

Right DP PT Per BP Index

Left DP PT Per

Time walked \_\_\_\_\_ mph

Comment:

Scan comment: R/L LL Arterial Scan.

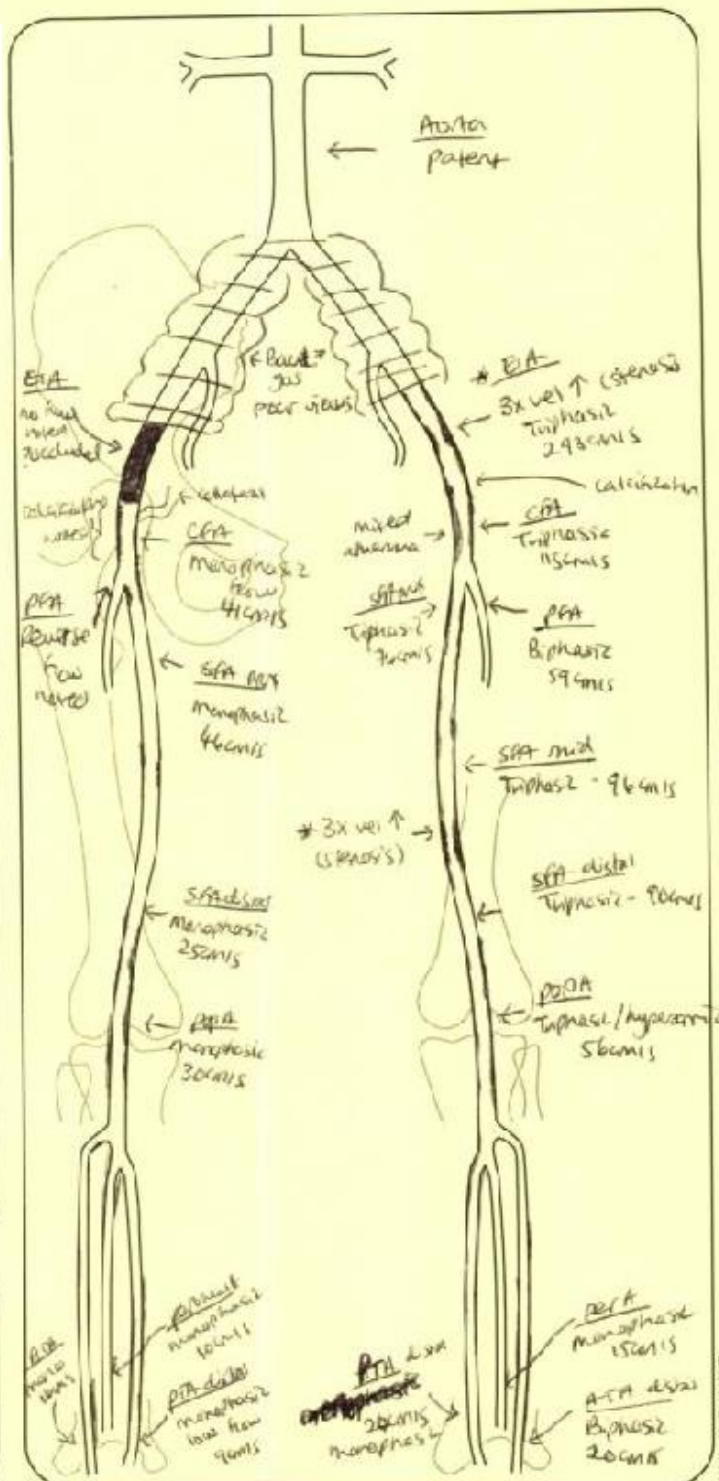
\* NO views of R/L CIA due to bowel gas - further non alternative imaging advised.  
\* R EIA appears occluded.  
\* Stenosis noted in (L) EIA & (L) SFA - Multiple SFA's.  
\* See diagram.

Image Quality: GOOD ☐ ☒ POOR

SIGNED: S. Farah  
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Farah

DATE: 6/2/22

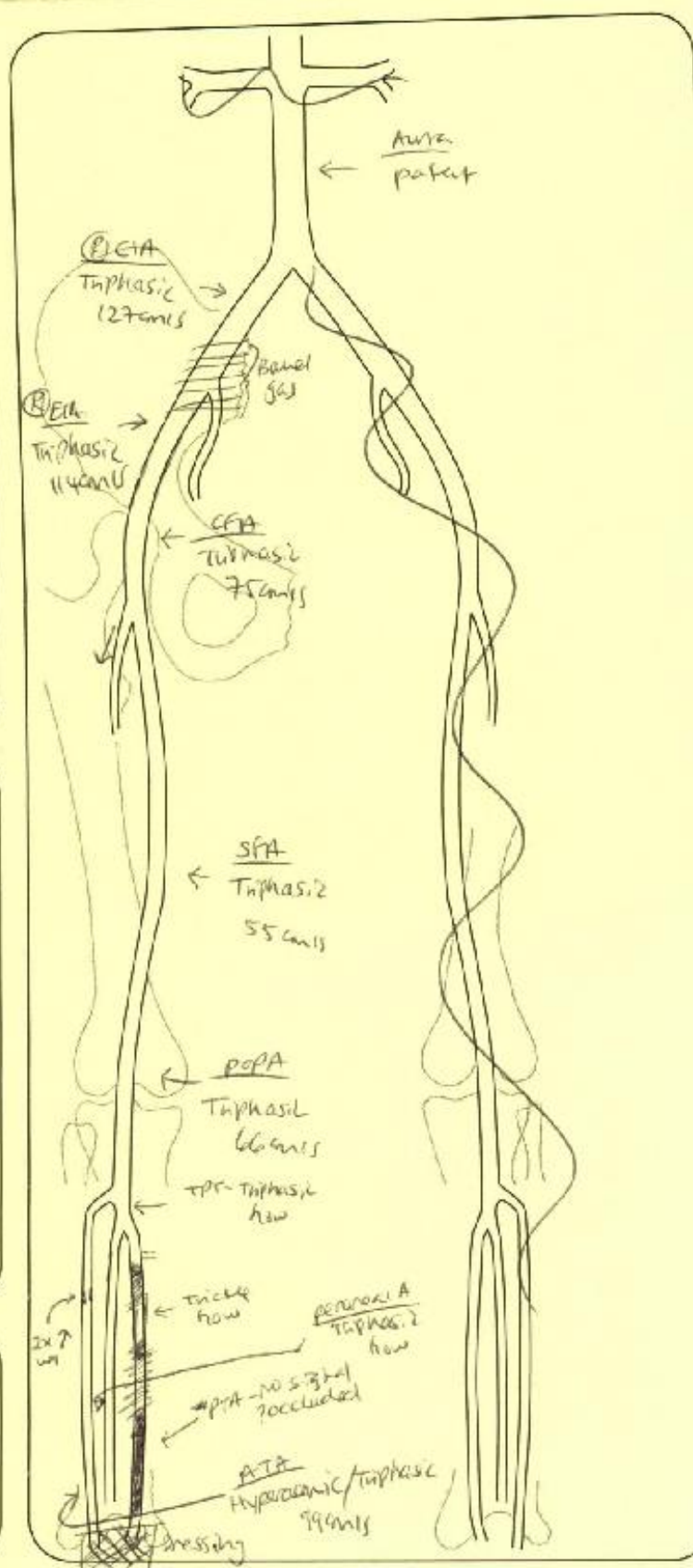




Comment:

\* Sol diagram.

DATE: 14/03/22



# LOWER LIMB ARTERIAL DUPLEX SCAN REPORT

Sub  
F  
D  
U

## Resting ankle pressures

Right DP PT Per BP Index

Left DP PT Per

## Post-exercise pressures

Right DP PT Per BP Index

Left DP PT Per

Time walked mph

Comment:

Scan comment: Left leg

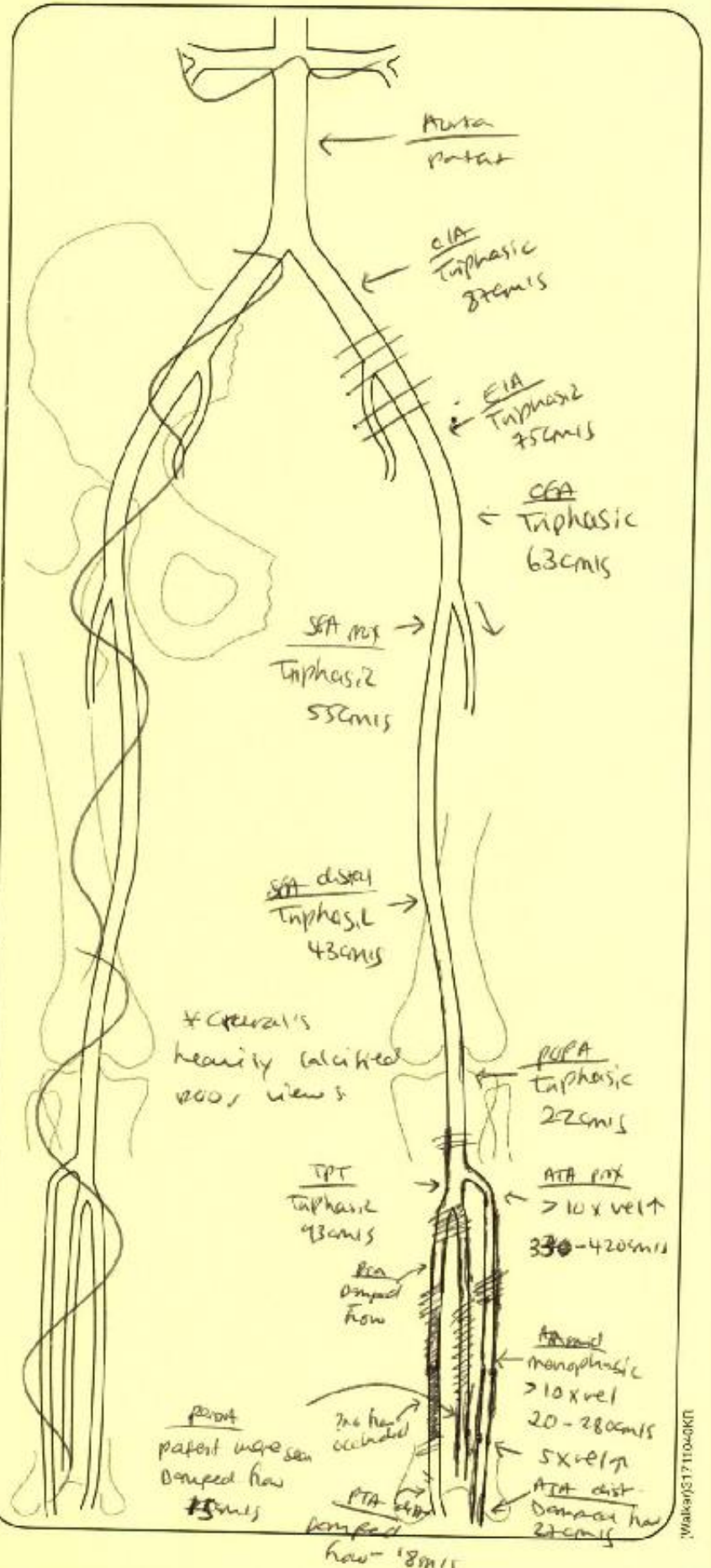
& see diagram

Image Quality: GOOD ☐ ☒ POOR

SIGNED: [Signature]  
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Forth

DATE: 15/3/12





# LOWER LIMB ARTERIAL DUPLEX SCAN REPORT

SU

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UN

## Resting ankle pressures

Right DP PT Per BP Index

Left DP PT Per

## Post-exercise pressures

Right DP PT Per BP Index

Left DP PT Per

Time walked mph

Comment:

Scan comment: Left leg scan

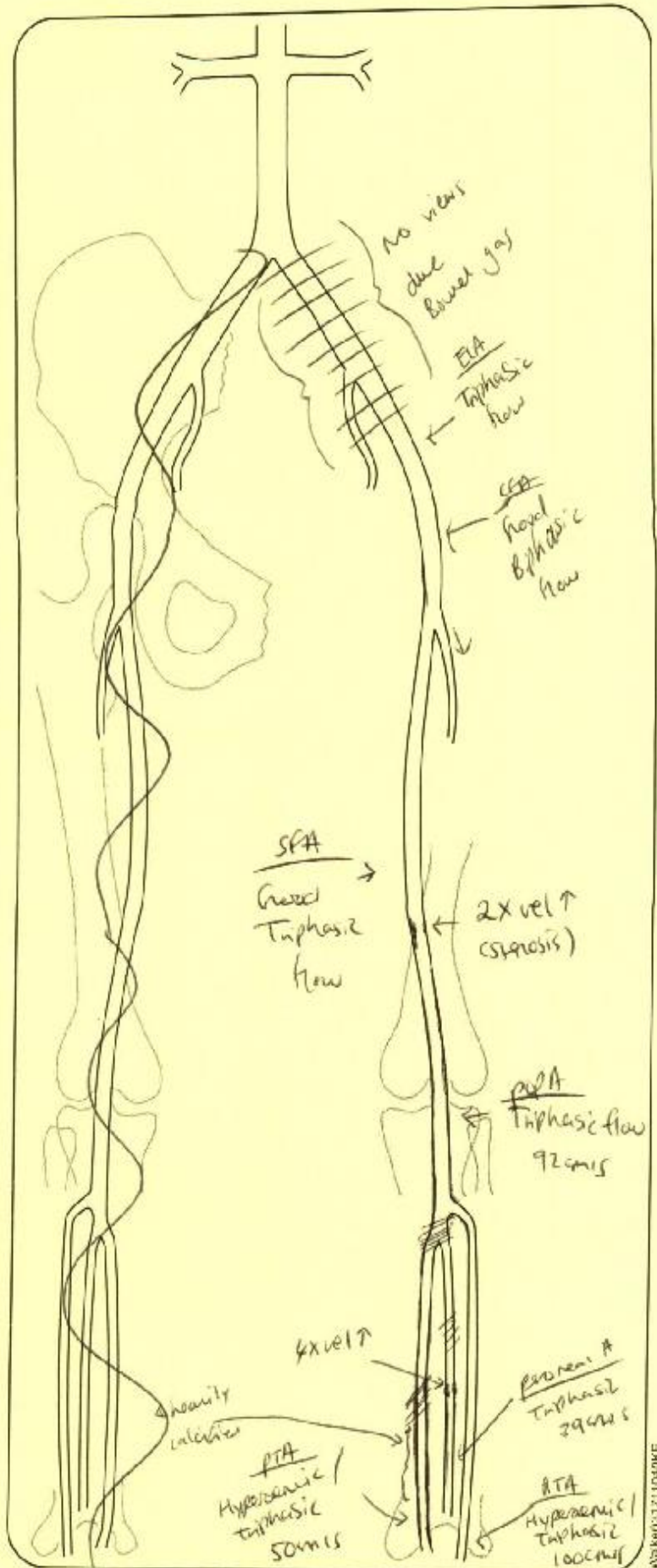
\* See diagram

Image Quality: GOOD ☐ ☒ POOR

SIGNED: S. Farah  
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Farah

DATE: 14/03/22



# LOWER LIMB ARTERIAL DUPLEX SCAN REPORT

## Resting ankle pressures

Right DP	PT	Per	BP	Index
Biphasic - 140	mono - 160	Tri - 200	0.8	
Left DP	PT	Per		
B <sub>1</sub> - 160	B <sub>2</sub> - 170		0.85	

## Post exercise pressures

Right DP	PT	Per	BP	Index
Left DP	PT	Per		

Time walked \_\_\_\_\_ mph

Comment: ? falsely elevated RPP  
due to partially incompressible vessels.

Scan comment: B/L leg scan.

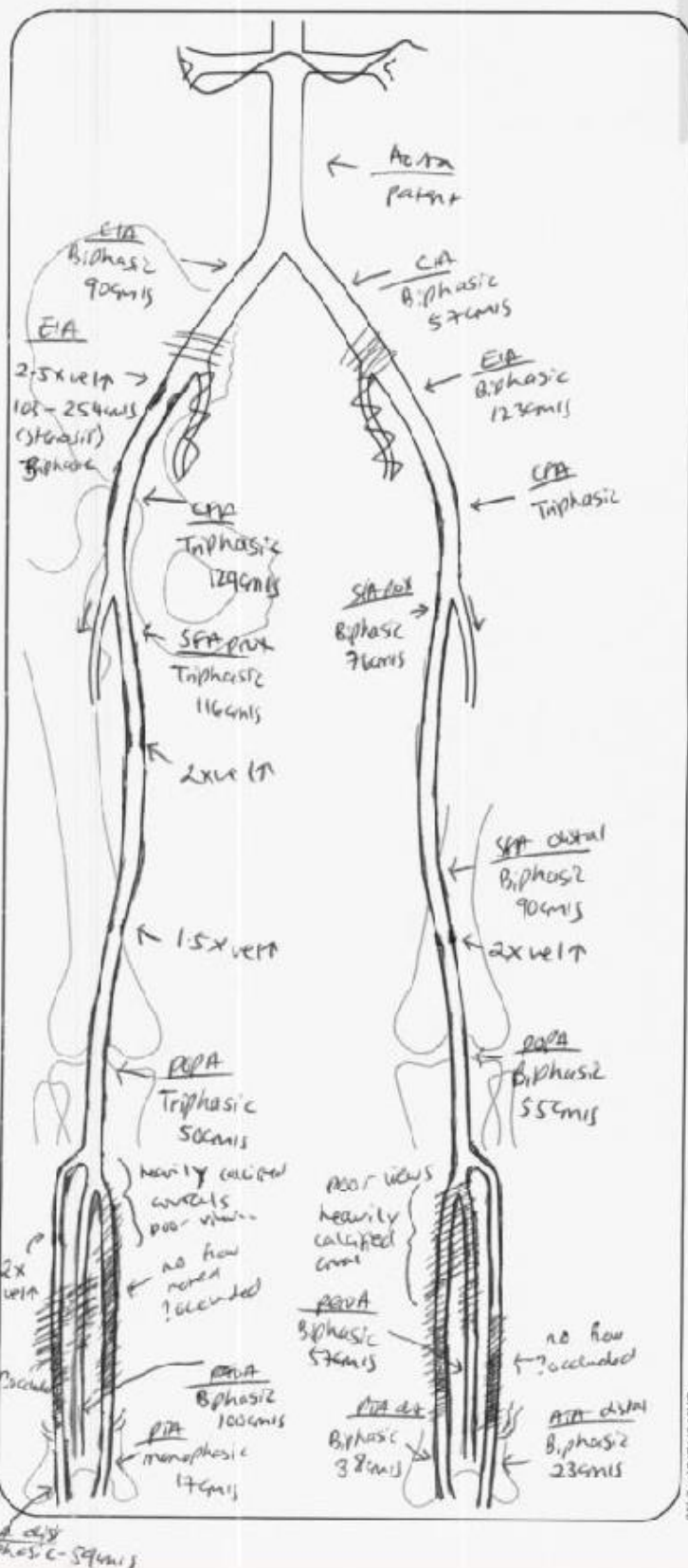
✓ See diagram.

Image Quality: GOOD ☐ ☒ POOR

SIGNED: \_\_\_\_\_  
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Fourn

DATE: 15/3/22





# LOWER LIMB ARTERIAL DUPLEX SCAN REPORT

## Resting ankle pressures

Right DP PT Per BP Index

Left DP PT Per

## Post-exercise pressures

Right DP PT Per BP Index

Left DP PT Per

Time walked \_\_\_\_\_ mph

Comment:

Scan comment:

Left leg

\* See diagram

Image Quality: GOOD ☐ ☒ POOR

SIGNED:

*[Signature]*

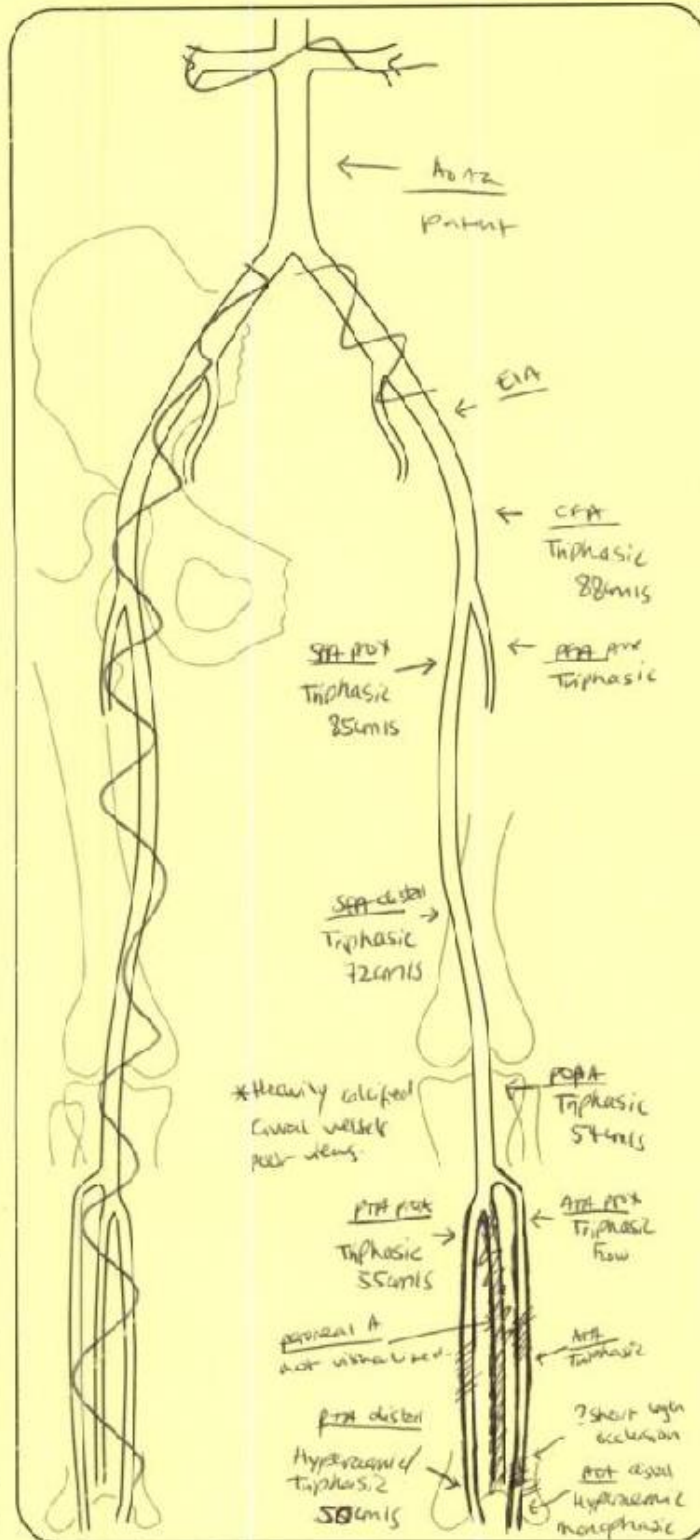
CLINICAL VASCULAR SCIENTIST

PRINT NAME:

S. Foran

DATE:

16/03/22



# LOWER LIMB ARTERIAL DUPLEX SCAN REPORT

## Resting ankle pressures

	Right	DP	PT	Per	BP	Index
		Triphasic				
	Left	DP	PT	Per	BP	Index

## Post-exercise pressures

	Right	DP*	PT	Per	BP	Index
	Left	DP	PT	Per	BP	Index

Time walked \_\_\_\_\_ mph

Comment: ABPI not obtained due to incompressible vessels.

## Scan comment:

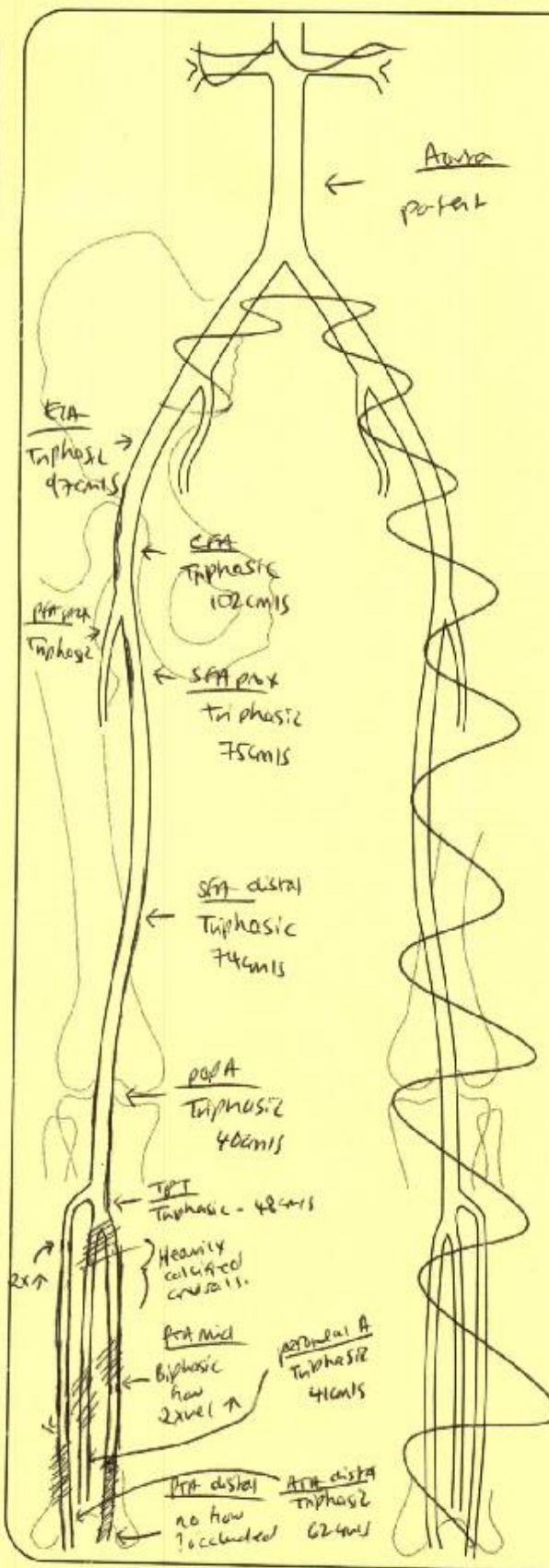
\* See diagram

Image Quality: GOOD ☐ ☒ POOR

SIGNED \_\_\_\_\_  
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Farrah

DATE: 16/3/22





## Clinical History :

## US Doppler aorta

The patient attended for routine surveillance of their abdominal aortic aneurysm. This measured 6.1 cm AP diameter (previously 6.1 cm).

Their RIGHT common iliac artery aneurysm measured 3.9 cm. (previously 3.9 cm)

Their LEFT common iliac artery aneurysm measured 2.3 cm. (previously 2.0 cm)

A further appointment was made for 3 months (As request by consultant)

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## LOWER LIMB GRAFT SURVEILLANCE SCAN REPORT

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Scan comment: Right leg graft  
+ patient reports pulling  
@ hamstring, however no  
symptoms of IC.  
+ XS vel + noted in  
prox SPA.  
+ Graft patent, XS vel  
noted distally.  
+ PTA and AHA patent.  
+ referred to spine - Murchie  
patient due to have CT scan.  
XStk requested 6 week follow  
up

Graft: patent / stenosed / occluded

Image Quality: GOOD ☐ ☒ POOR

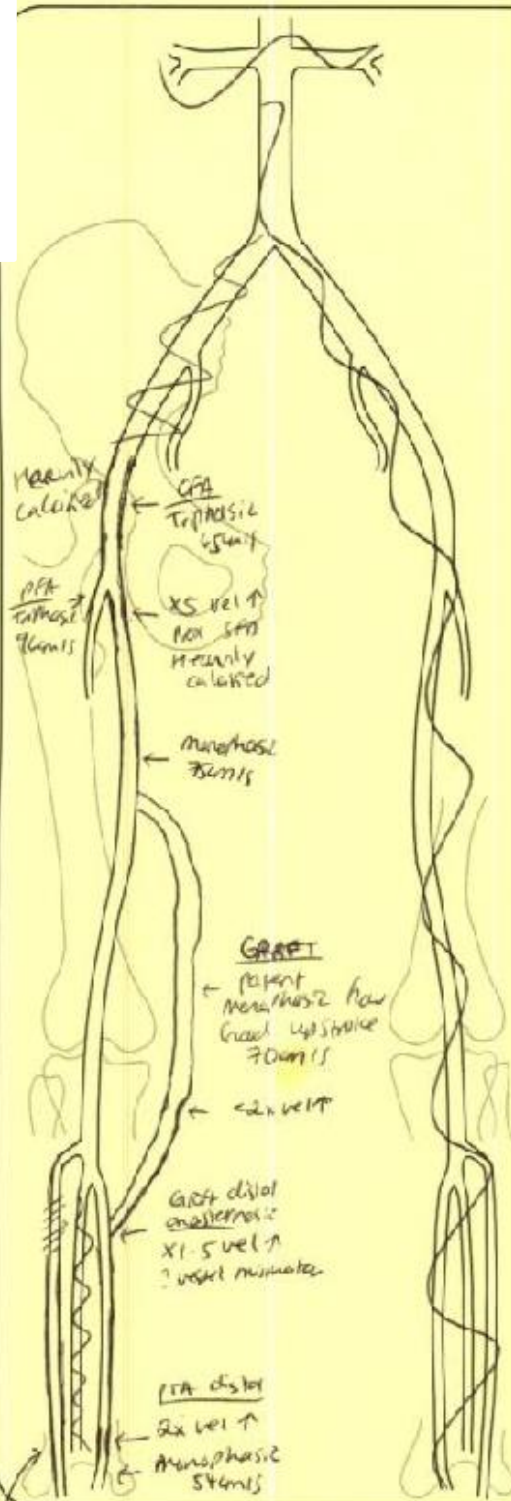
Next Appointment: 7/52

Date: 23/5/22 Time: 11.30

SIGNED:   
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Foran

DATE: 4/4/22



Murchie's  
Graft  
4/4/22



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## LOWER LIMB GRAFT SURVEILLANCE SCAN REPORT

Scan comment: Left Leg Graft

- + pt asymptomatic
- + unsure of medication
- \* Graft is patent
- \* irregular heart rhythm noted
- \* velocities interpreted with caution
- \* No significant changes since last scan.
- Flu appt in 4 months.

Graft: ☒ patent / ☐ stenosed / ☐ occluded

Image Quality: GOOD ☐ ☒ POOR

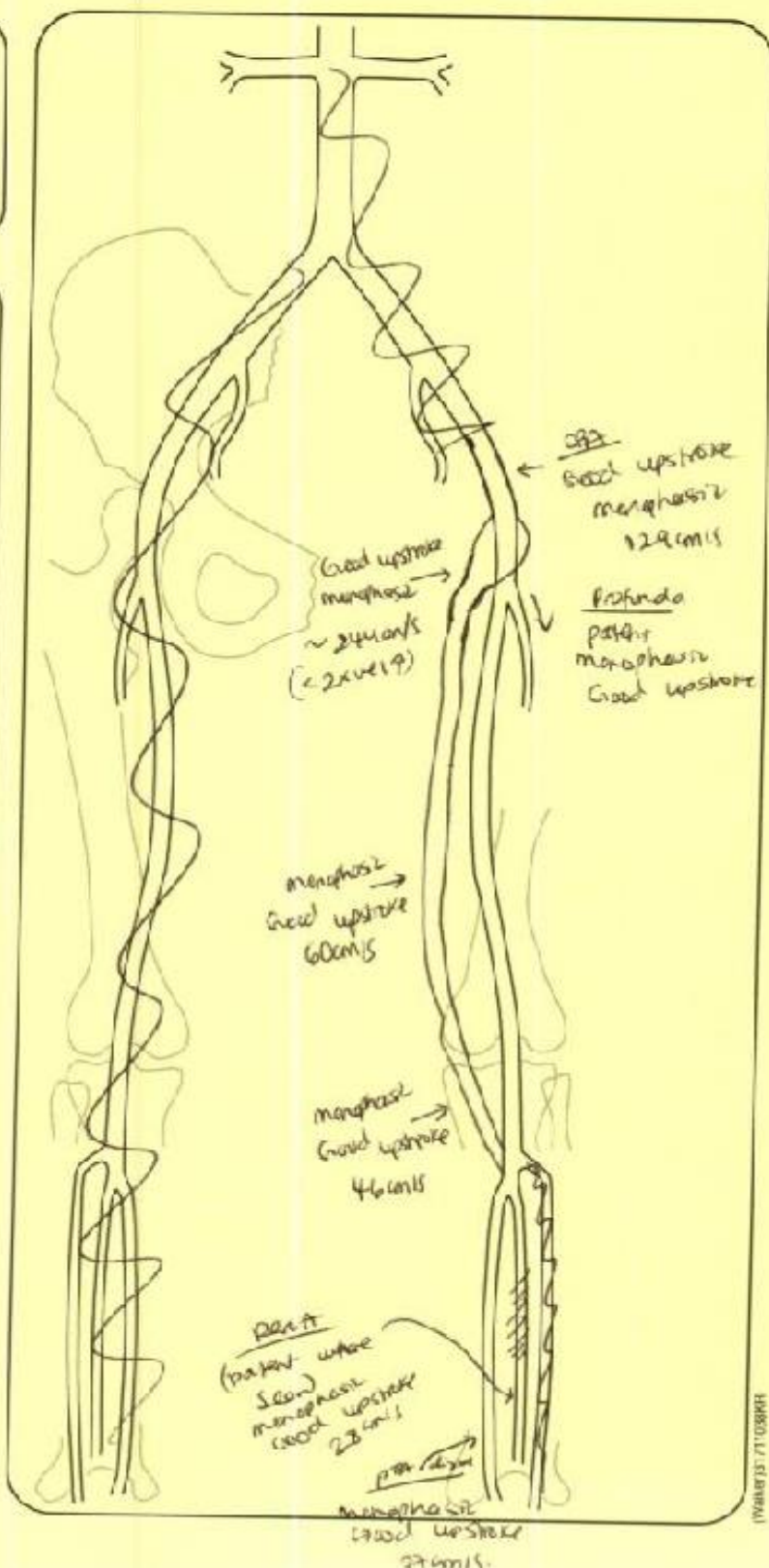
Next Appointment: (1/8/22) 4/12

Date: 1/8/22 Time: 11:30

SIGNED: [Signature]  
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Farah

DATE: 01/04/22



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Level 6, Balmoral Building  
Leicester Royal Infirmary  
Tel: 0116 258 5440  
Fax: 0116 258 6821

University Hospitals of Leicester



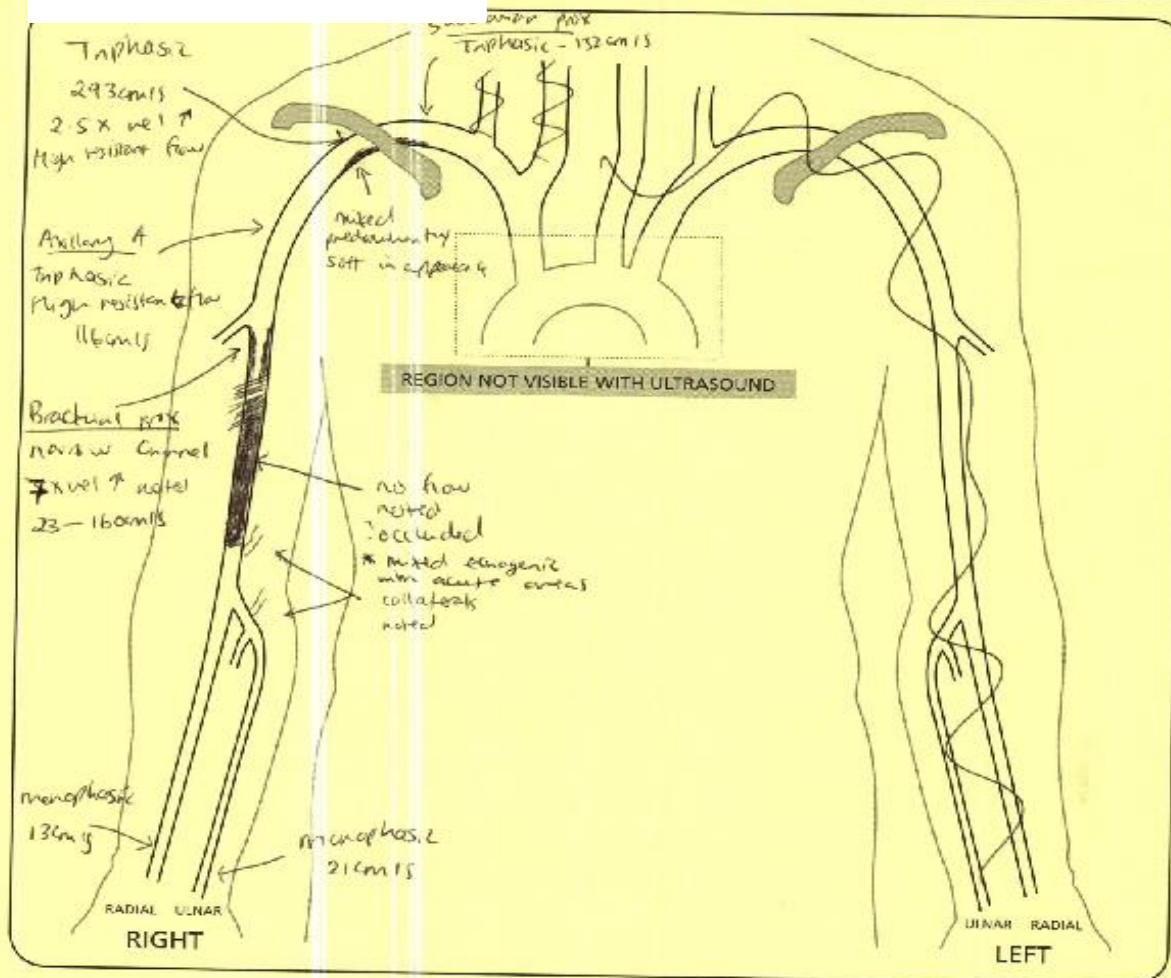
NHS Trust

## ARTERIAL DUPLEX SCAN REPORT

Consultant: Mr Rayt  
Clinical History:  
Comments:

Dept.: VASC  
Hospital: GRH

(R) Arm.



SIGNED: *[Signature]*

CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. P. P.

DATE: 5/4/22

Image Quality:

Good ☐ ☒ ☐ Poor

Pauling0136837.jv



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## LOWER LIMB GRAFT SURVEILLANCE SCAN REPORT

Scan comment: Left leg

\* 2x stenosis ↑ noted at site of previous angioplasty at distal graft.

\* Good triphasic flow noted ~~in~~ in graft down to distal ATA.

\* follow up appt booked in 6 weeks.

\* patient advised to contact V&U if experience new worrying symptoms.

Graft: ☐ patent / ☒ stenosed / ☐ occluded

Image Quality: GOOD ☐ ☒ POOR

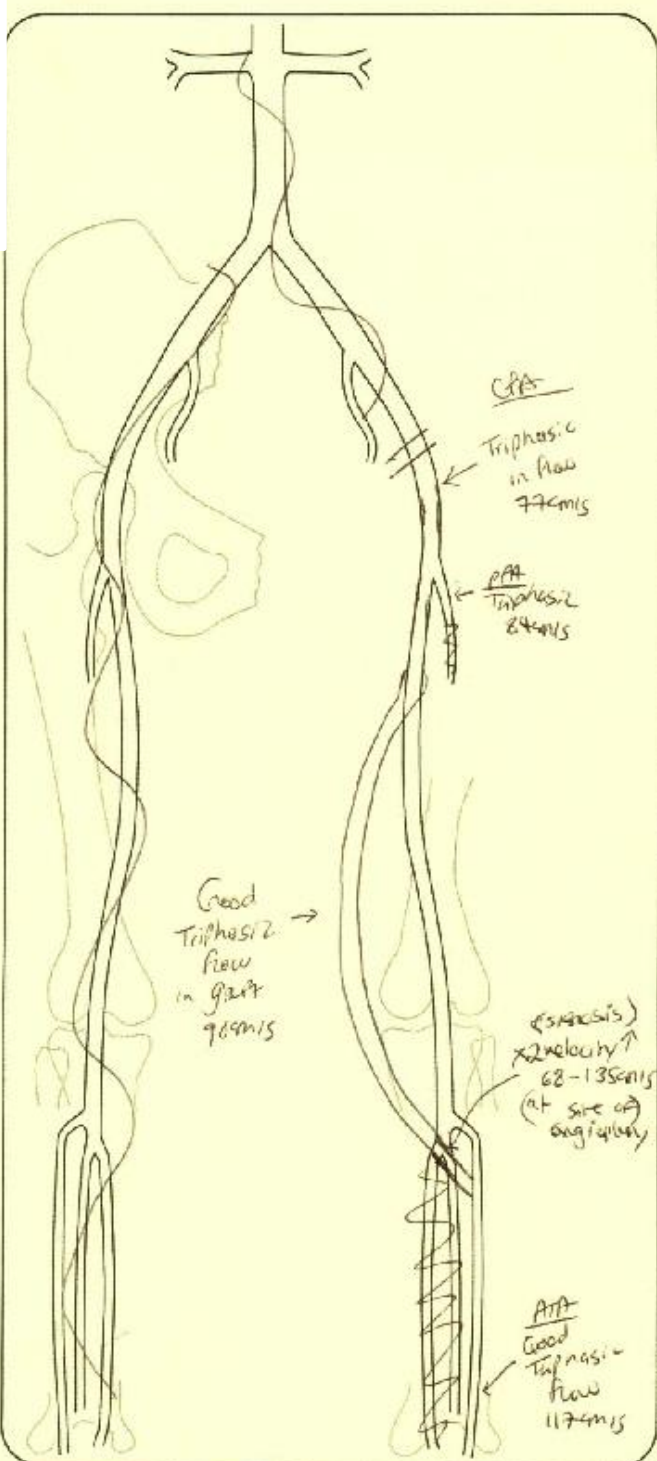
Next Appointment: 6/12

Date: 26/1/22 Time: 11:30 am

SIGNED: S. Farah  
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Farah

DATE: 3/12/21



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## LOWER LIMB GRAFT SURVEILLANCE SCAN REPORT

\* Graft patent with good  
biphasic flow

\* pt complains of (L) calf  
cramp during sleep and foot  
tingling pain.

\* on appropriate medication.

\* referred to gp + rehab

\* Areas of occlusion noted  
in (L) VTA and ATA throughout  
flow noted distally.

Flu - 6 weeks post op.

Graft: patent / stenosed / occluded

Image Quality: GOOD ☐ ☒ POOR

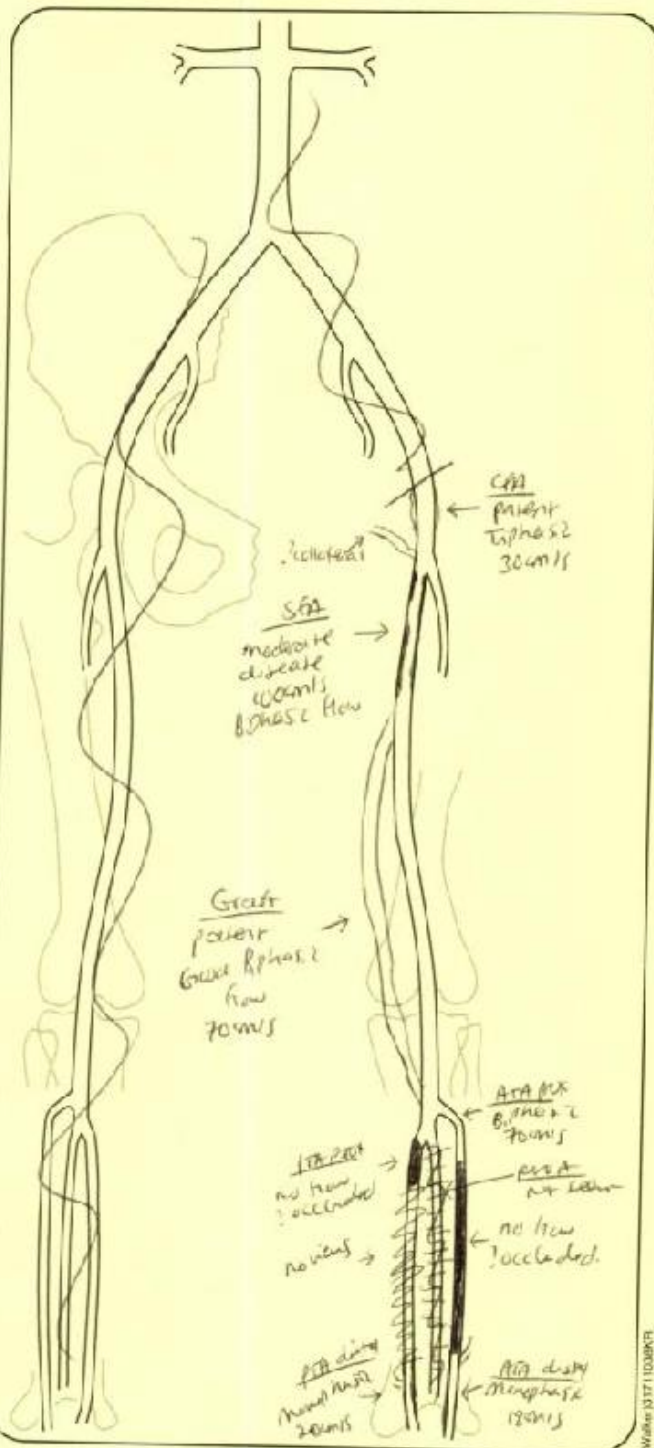
Next Appointment: 6/52

Date: 7/2/22 Time: 10:00

SIGNED:   
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. J. J. J.

DATE: 22/12/21





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## LOWER LIMB GRAFT SURVEILLANCE SCAN REPORT

Scan comment: Right leg-pat graft

- \* Patient on statin and aspirin
- \* Slight velocity  $\leq 2 \times$  normal at proximal graft.
- \* Good biphasic flow noted throughout graft.
- \* Good triphasic flow noted in PTA and ATA, where seen.
- \* HU in 6 months.

Graft: ☒ patent / ☐ stenosed / ☐ occluded

Image Quality: GOOD ☐ ☒ POOR

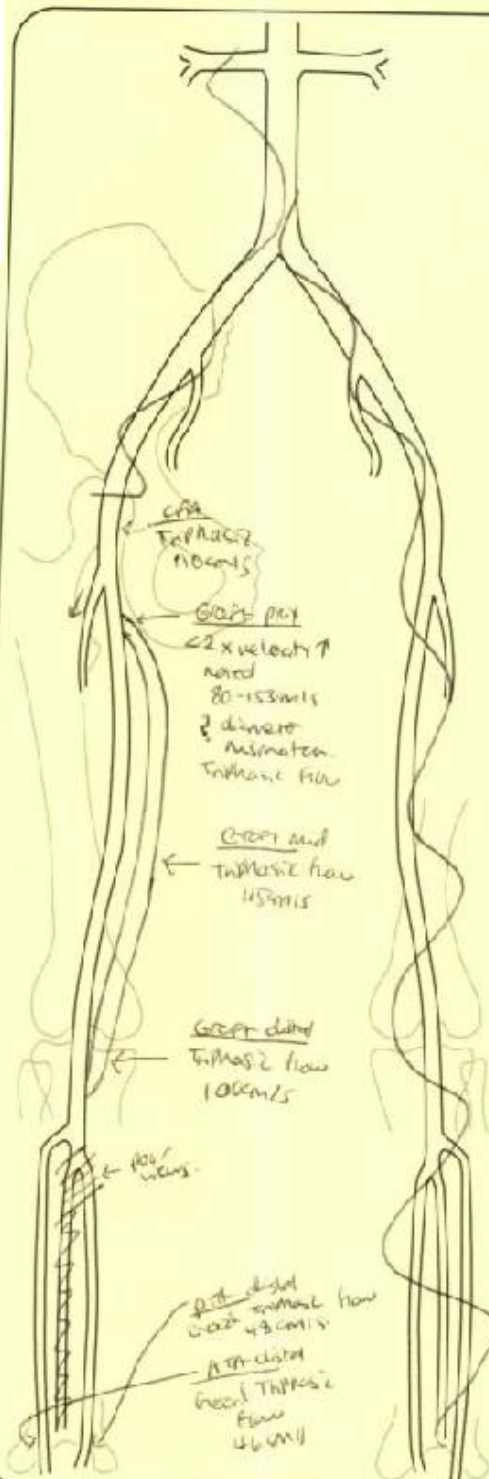
Next Appointment: 6/12

Date: 21/7/22 Time: 2-30pm

SIGNED: S. Farah  
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Farah

DATE: 4/1/22



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## LOWER LIMB GRAFT SURVEILLANCE SCAN REPORT

Scan comment: Left fem-pop graft

- \* Patient is asymptomatic
- \* Medication - statin  
clopidogrel
- \* Graft patent throughout  
with good biphasic flow.
- \* ATA patent with good  
biphasic flow.
- \* F/U in 6 months.

Graft: ☒ patent ☐ stenosed ☐ occluded

Image Quality: GOOD ☐ ☒ POOR

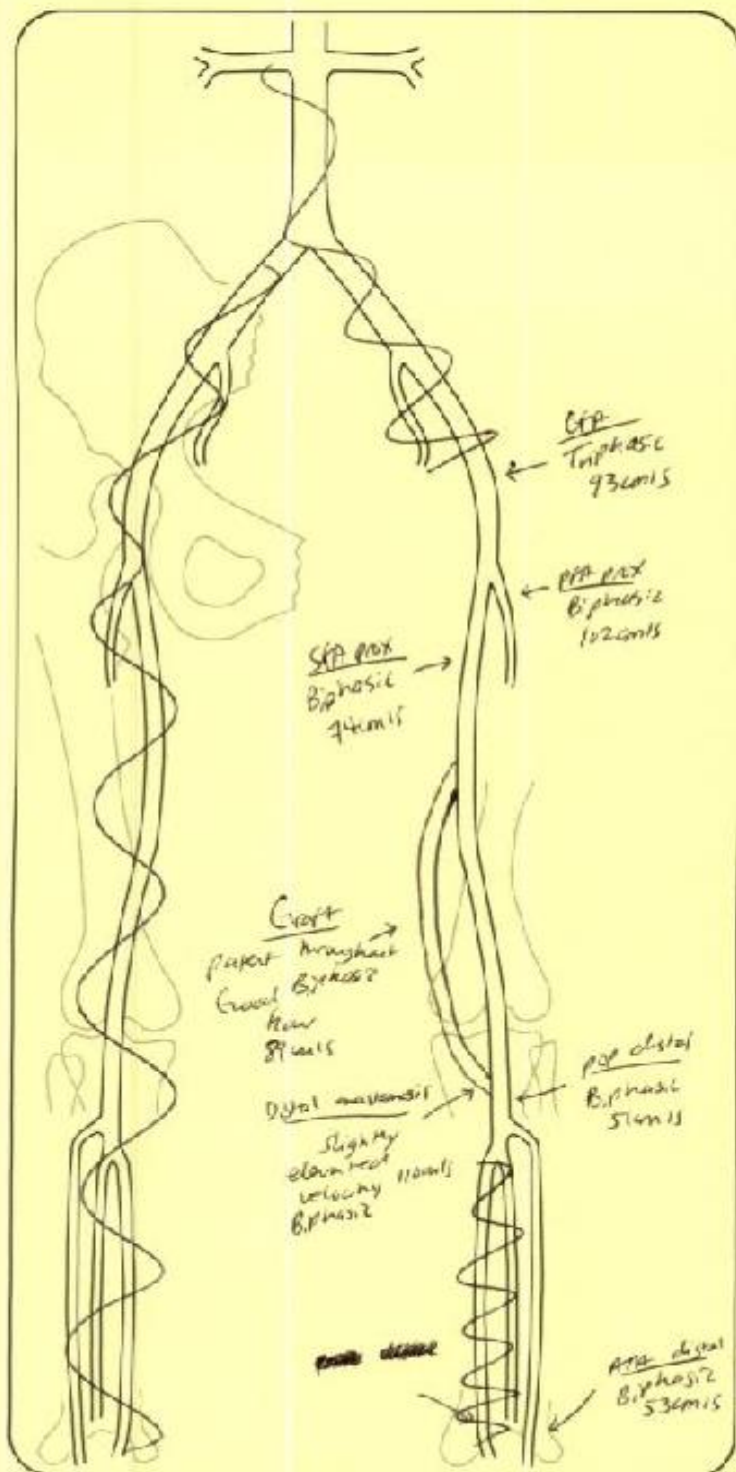
Next Appointment: 4/10/22

Date: 4/10/22 Time: 2 pm

SIGNED: [Signature]  
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Farah

DATE: 5/4/22





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## LOWER LIMB ARTERIAL DUPLEX SCAN REPORT

### Resting ankle pressures

Right DP PT Per BP Index

Left DP PT Per

### Post-exercise pressures

Right DP PT Per BP Index

Left DP PT Per

Time walked \_\_\_\_\_ mph

Comment:

Scan comment: B/L leg scan

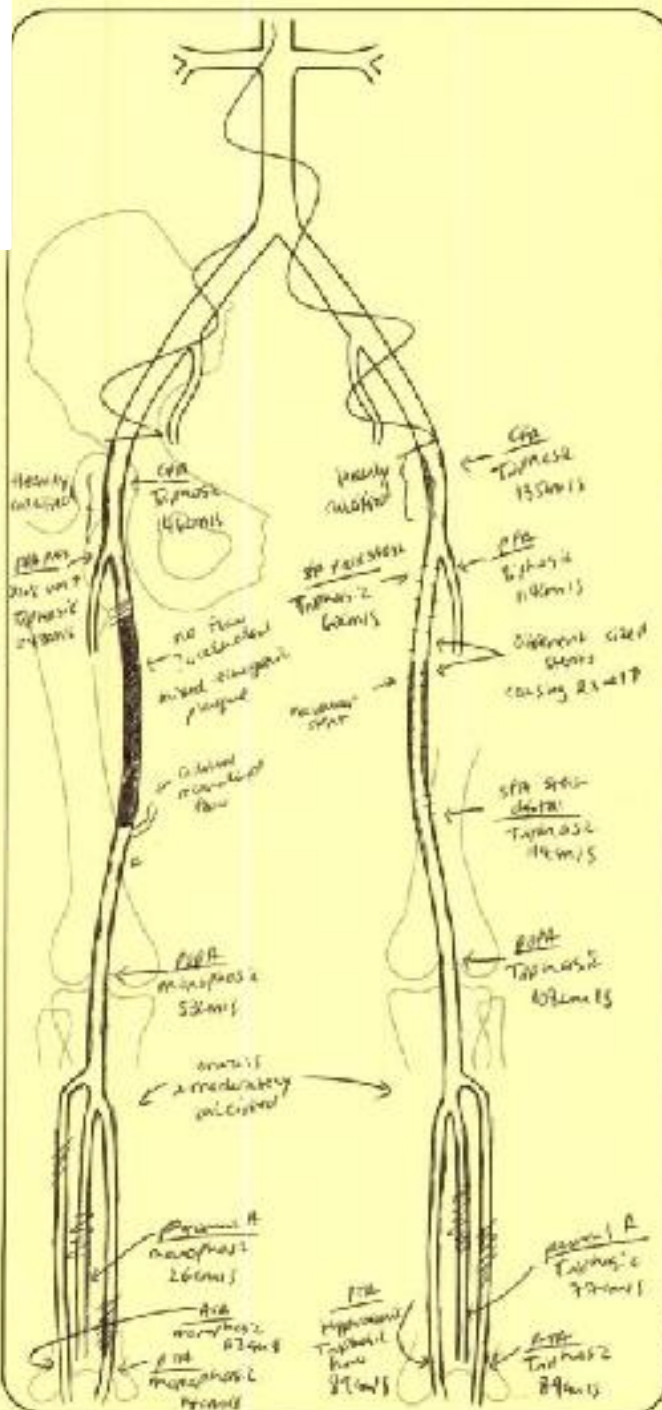
\* See diagrams.

Image Quality: GOOD ☐ ☒ POOR

SIGNED: B. Smith  
CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. Smith

DATE: 5/4/22



Level 1,  
Glenfield Hospital  
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## VASCULAR STUDIES TEST REPORT

Consultant: Prof. BrownDept: W033

Clinical History:

Hospital: GH2 groin ? false aneurysmRight Groin Scan

\* No obvious appearance of false aneurysm was noted in the right groin. Good triphasic flow was noted in the (R) CFA, (R) STA prox and (R) PFA prox.

SIGNED: [Signature]

CLINICAL VASCULAR SCIENTIST

PRINT NAME: S. FreshDATE: 30/3/12 TIME:           

Image Quality:

GOOD

☐☒☐

POOR



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## ANKLE BRACHIAL PRESSURE INDEX ASSESSMENT

Surname: [Redacted] Consultant: Mr McCann  
Forename: [Redacted] Dept: Vas clinic Hospital: GH  
DOB: [Redacted] Clinical History:  
ID Number: ABPI

### RESTING ABPI MEASUREMENT

Side	DP	PT	Peroneal	Brachial	ABPI
RIGHT	<u>180-Tri</u>	<u>180-Tri</u>	<u>—</u>	<u>—</u>	<u>1.1</u>
LEFT	<u>Triphasic</u> <u>incompressible</u>	<u>Triphasic</u> <u>incompressible</u>	<u>—</u>	<u>160 Triphasic</u>	<u>—</u>

### POST-EXERCISE ABPI MEASUREMENT

Side	DP	PT	Peroneal	Brachial	ABPI
RIGHT					
LEFT					

(Tri = Triphasic pulse, Bi = Biphase pulse, Mono = Monophasic pulse, \* = Incompressible artery, Abs = possibly absent pulse)

The patient managed to walk for \_\_\_\_\_ at a slow / normal / brisk pace  
and experienced \_\_\_\_\_

Other symptoms noted \_\_\_\_\_

### FINDINGS

RIGHT Leg:	LEFT Leg:
<u>No / mild / moderate / significant arterial disease</u>	<u>No / mild / moderate / significant arterial disease</u>

Comments: ② PT + DP were incompressible >200mmHg. However  
good triphasic flow was noted.

Signed: [Signature] Clinical Vascular Scientist  
Print Name: S. Khan  
Date: 31/3/22 Time: \_\_\_\_\_

Test Quality:  
Good ☐ ☒ Poor ☐

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## ANKLE BRACHIAL PRESSURE INDEX ASSESSMENT

Su  
Fo  
DO  
ID

Consultant: Mr Davies  
Dept.: Vasc cluz Hospital: GH  
Clinical History:  
ASD

### RESTING ABPI MEASUREMENT

Side	DP	PT	Peroneal	Brachial	ABPI
RIGHT	160 Triphasic	190 Triphasic	—		1
LEFT	150 Triphasic	170 Triphasic	—	180 Triphasic	0.94

### POST-EXERCISE ABPI MEASUREMENT

Side	DP	PT	Peroneal	Brachial	ABPI
RIGHT					
LEFT					

(Tri = Triphasic pulse, Bi = Biphase pulse, Mono = Monophasic pulse, \* = Incompressible artery, Abs = possibly absent pulse)

The patient managed to walk for \_\_\_\_\_ at a slow / normal / brisk pace  
and experienced \_\_\_\_\_

Other symptoms noted \_\_\_\_\_

### FINDINGS

RIGHT Leg:	LEFT Leg:
<u>No</u> / mild / moderate / significant arterial disease	<u>No</u> / mild / moderate / significant arterial disease

Comments:

Signed: [Signature] Clinical Vascular Scientist  
Print Name: J. Foran  
Date: 29/3/22 Time: \_\_\_\_\_

Test Quality:  
Good ☐ ☒ Poor ☐



② leg - No significant changes on scan.

④ leg - Significant overall  
vestibular disease none

- \* Patient on some medication.
- \* B/C stent patient.
- \* Spk - Gabriel achieved 2 month follow ups soon.

Image Quality: GOOD ☐ ☒ POOR

Date: 19/5/22 Time: 10:30

DATE: 23/3/22

