



# Arterial Lower Limb Duplex

Examined 27/05/2022 09:54

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Reference

Reason

Claudication

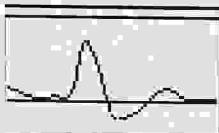
Outcome

disease mild, Occlusion, Calcified

Right

134

1.00



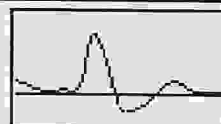
Good

Brachial

Common Femoral

Good

Left



High Thigh

Low Thigh

Popliteal

Weak



High Calf

Peroneal



Slightly Reduced

128

0.96

Anterior Tibial

Weak

68

0.51



Weak

Posterior Tibial

Reduced



Dorsalis Pedis

Toe Pressure

Post Exercise

## Notes

### LEFT LOWER LIMB ARTERIAL DUPLEX SCAN

\*All measurements are proximal to the medial malleolus, unless otherwise stated\*

AORTA - Abdominal aorta is widely patent with good triphasic waveforms and PSV 67cm/s. The abdominal aorta appears of normal calibre (maximum AP = 1.9cm), with no evidence of focal dilatation or aneurysm identified.

LEFT

Assessed by Rae Larmour

Printed on 08/06/2022 at 4:14 pm

Checked by

CIA - Mild and calcified disease proximally, good triphasic waveforms and PSV 104cm/s. The distal CIA and proximal EIA are heavily calcified with intermittent flow.

EIA - Heavily calcified and intermittent flow proximally. Disease becomes mild and calcified distally, good triphasic waveforms and PSV 115cm/s. Good triphasic waveforms distally do not suggest significant disease in the proximal EIA/distal CIA.

CFA - Mild and calcified disease, good triphasic waveforms and PSV 116cm/s.

PFA (origin) - Patent with mild and calcified disease, good biphasic waveforms and PSV 120cm/s.

SFA - Mild and calcified disease in the proximal-mid vessel, good triphasic waveforms proximally becoming good monophasic waveforms, PSV 111-82cm/s. Large collateral noted in the distal vessel before the SFA occludes at ~47cm and remains occluded through the adductor canal.

POPA - Flow reforms in the proximal vessel with weak monophasic waveforms and PSV 6cm/s. Mild and calcified disease distally with reduced monophasic waveforms and PSV 14cm/s.

TPT - Patent with evidence of 3 vessel run-off identified.

ATA - Patent along length with mild and calcified disease, weak monophasic waveforms and PSV 7-8cm/s.

PTA - Patent along length with mild and calcified disease, reduced monophasic waveforms and PSV 11-13cm/s.

PerA - Origin visualised, however, unable to trace through calf due to weakness of signals.

#### RIGHT

CFA - Mild and calcified disease, good triphasic waveforms and PSV 129cm/s.

ATA - Patent at the ankle with mild and calcified disease, slightly reduced triphasic waveforms and PSV 16cm/s.

PTA - Weak monophasic waveforms in the distal calf, PSV 7cm/s. Vessel appears to occlude at ~9cm.

ABPI - Right resting ABPI is within normal limits. Left resting ABPI is significantly reduced.

