

**Reason** Varicose vein**Outcome** Poor images

Deep Veins	Right		Left	
	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Patent	Competent		
Profunda Vein	Patent	Competent		
Superficial Femoral Vein	Patent	Competent (origin)		
Popliteal Vein				
Posterior Tibial Vein				
Anterior Tibial Vein				
Peroneal Vein				
Soleal Vein				
Gastrocnemius				
Superficial Veins				
Saphenofemoral Junction	Patent	Incompetent		
L Saphenous Vein Above	Patent	Competent		
L Saphenous Vein Below				
Vein of Giacomini				
Saphenopopliteal Junction				
S Saphenous Vein				
Evidence of D.V.T.				
Above the knee	No			
Popliteal				
Below the knee				

Notes**BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT**

Very limited assessment due to very poor patient tolerance of flow augmentation. Challenging assessment due to patient body habitus, vessel depth and extensive varicosities throughout both lower limbs

RIGHT

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and a normal response on Valsalva manoeuvre, suggesting proximal vein patency. The origin of the profunda femoral and superficial femoral veins appear patent and competent. Unable to assess the rest of the deep veins as scan was terminated (see below).

Sapheno-femoral junction (SFJ) is widely patent and incompetent. Long Saphenous vein (LSV) is widely patent, linear and competent in the proximal thigh. Anterior thigh vein is highly tortuous, very large calibre

Assessed by Rae Larmour

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Checked by



(2.61cm proximal thigh) and incompetent and appears to form the anterior thigh varicosities.

Only able to assess the very proximal right lower limb before exam was terminated. Patient unable to tolerate augmentation of flow; each time flow was augmented, patient felt unwell and had to lie down. Multiple attempts made to complete examination, however, the outcome was the same each time flow was augmented, even with the patient seated on the edge of the bed instead of standing. The patient felt too unwell to persevere with the assessment and it was deemed unsafe to continue. Therefore the exam was terminated. Patient stated that he does not want a further appointment.

PATIENT IS NOT SUITABLE FOR VENOUS COMPETENCY ASSESSMENT.