

**Reason**

Varicose vein

**Outcome**

Widely patent, Chronic Superficial thrombophlebitis, Competent, Incompetence - superficial

**Right**
**Deep Veins**
**Patency**
**Competency**

Common Iliac Vein

Not Assessed

External Iliac Vein

Not Assessed

Internal Iliac Vein

Not Assessed

Common Femoral Vein

Widely Patent

Competent

Profunda Vein

Widely Patent

Competent

Superficial Femoral Vein

Widely Patent

Competent

Popliteal Vein

Widely Patent

Competent

Posterior Tibial Vein

Widely Patent

Competent

Anterior Tibial Vein

Widely Patent

Competent

Peroneal Vein

Widely Patent

Competent

Soleal Vein

Widely Patent

Competent

Gastrocnemius

Widely Patent

Competent

**Superficial Veins**

Saphenofemoral Junction

Patent

Competent

L Saphenous Vein Above

Patent

Competent

L Saphenous Vein Below

Patent

Competent

Vein of Giacomini

Not Identified

Saphenopopliteal Junction

Patent

Competent

S Saphenous Vein

Areas of chronic thrombus

Isolated Incompetence

**Evidence of D.V.T.**

Above the knee

No

Popliteal

No

Below the knee

No

**Left**
**Patency**
**Competency**

Not Assessed

Not Assessed

Not Assessed

Widely Patent

Competent

Widely Patent

Competent

Widely Patent

Competent

Widely Patent

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Patent

Competent

Not Identified

Patent

Competent

Patent

Competent

**Notes**
**BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT**

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

**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. All visualised deep veins appear widely patent and competent with no evidence of previous DVT.

Sapheno-femoral junction (SFJ) is widely patent and competent. Long Saphenous vein (LSV) is widely patent, competent and linear along length.

Sapheno-popliteal junction (SPJ) is widely patent and competent. Short Saphenous vein (SSV) is widely patent and competent in the proximal calf. Between 26cm and 15cm there are areas of chronic

Assessed by

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non-occlusive superficial thrombophlebitis and the SSV is incompetent. From 15cm to the ankle, the SSV becomes widely patent and competent again.

#### LEFT

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