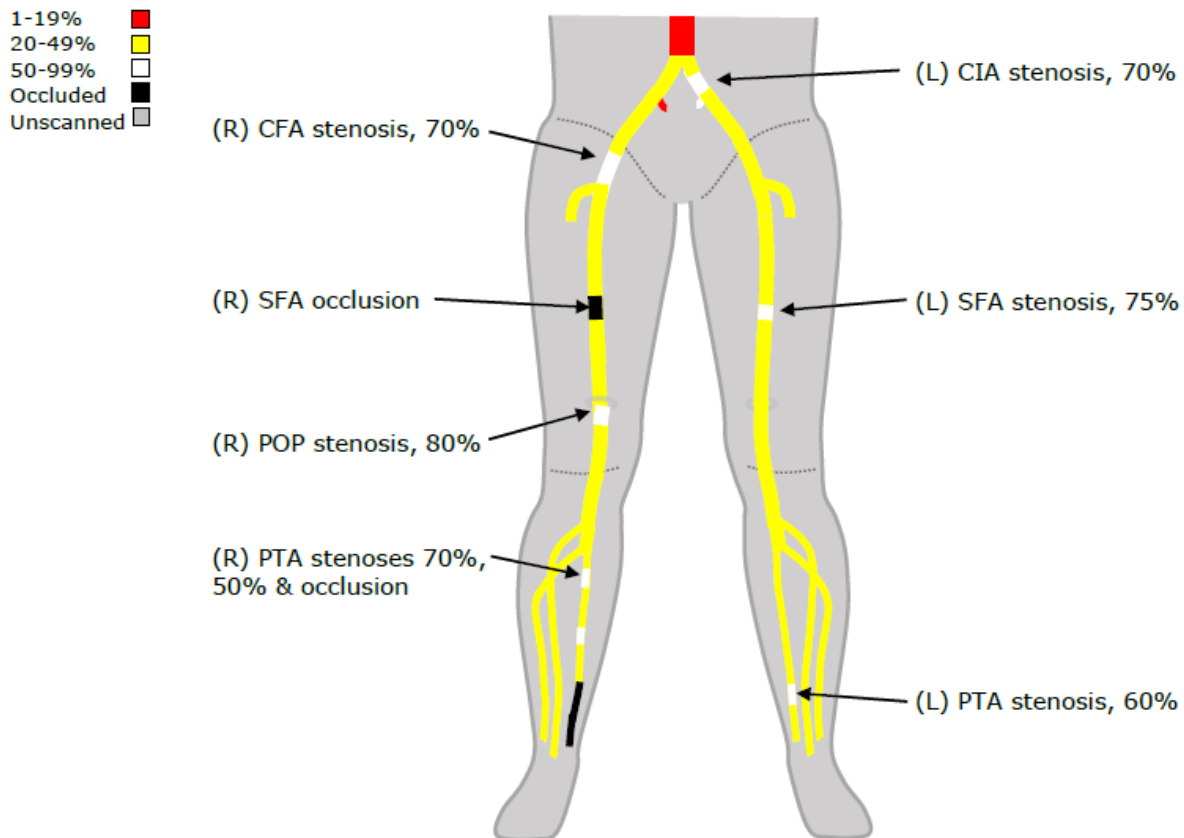


DUPLEX ASSESSMENT LOWER LIMB ARTERIAL

Scan Date: 05.01.2023



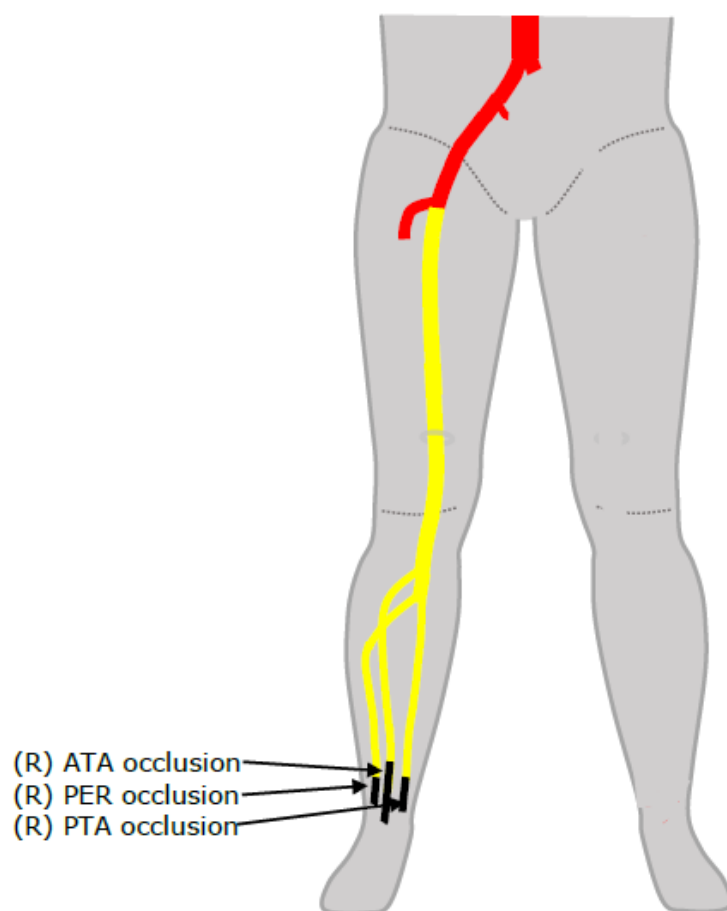
Conclusion:

1. (L) CIA distal stenosis, 50-99% (nearer 70%). Elevated velocities detected in the (L) IIA origin suggestive of a stenosis.
2. (L) SFA stenosis at mid-thigh, 50-99% (nearer 75%).
3. (L) PTA distal stenosis, 50-99% (nearer 60%).
4. (R) CFA stenosis, 50-99% (nearer 70%).
5. (R) SFA short segment occlusion at mid-thigh, ~2cm in length.
6. (R) POP proximal stenosis, 50-99% (nearer 80%).
7. (R) PTA stenoses, 50-99%, proximally (nearer 70%) and mid-calf (nearer 50%). Then PTA occludes distally.
8. Moderate disease in remaining bilateral lower limb arteries, 20-49%.

Reported by: S. Poyntz
Tr. Clinical Scientist

Authorised by: W. Navarro *[Signature]*
Clin. Vascular Ult. Sci.

1-19% ■
 20-49% ■
 50-99%
 Occluded ■
 Unscanned ■



Conclusion:

Limited assessment of (R) tibial arteries due to heavy calcification.

1. (R) CFA patent post-embolectomy, 1-19%.
2. (R) ATA occludes distally.
3. (R) PER occludes at ankle
4. (R) PTA occludes at ankle.
5. Moderate disease in (R) SFA, POP and remaining tibial arteries, 20-49%.
6. Minor disease in remaining (R) lower limb arteries, 1-19%.

Reported by: W. Navarro *[Signature]*
 Clinical Vascular Ultrasound Sci.

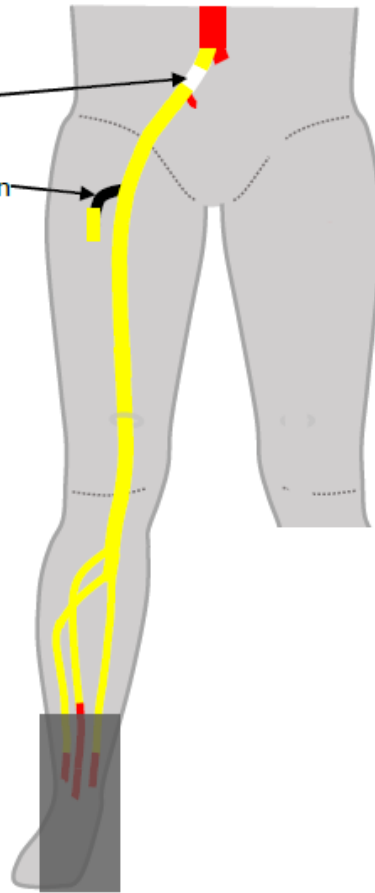
DUPLEX ASSESSMENT LOWER LIMB ARTERIAL

Scan Date: 05.01.2023

1-19% ■
20-49% ■
50-99% ■
Occluded ■
Unscanned ■

(R) CIA stenosis 55%

(R) PFA origin occlusion



Conclusion:

Limited assessment, (R) tibial arteries below mid-calf level not assessed due to ulcer dressings. Vessels heavily calcified.

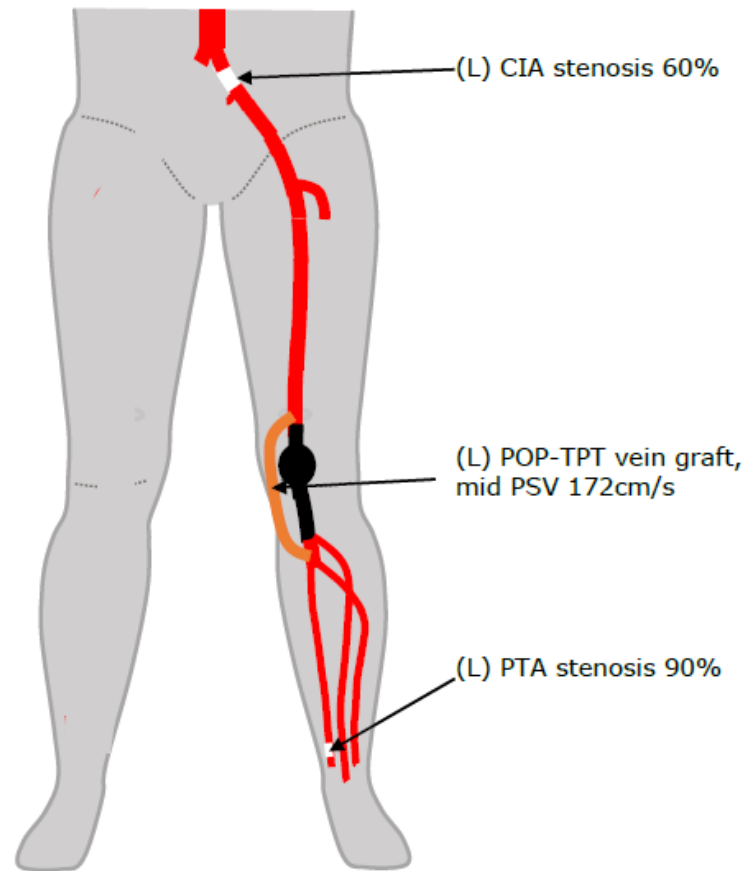
1. (R) CIA stenosis, 50-99% (nearer 55%).
2. (R) PFA origin occluded, flow reforms distally.
3. Moderate disease in (R) proximal PTA, 20-49% (nearer 49%).
4. Diffuse disease in remaining (R) lower limb arteries, 20-49%.

Reported by: W. Navarro *[Signature]*
Clinical Vascular Ultrasound Sci.

DUPLEX ASSESSMENT LOWER LIMB GRAFT

Scan Date: 05.01.2023

1-19% ■
20-49% ■
50-99% ■
Occluded ■
Unscanned ■




Conclusion:

1. (L) POP – TPT vein graft patent, mid PSV 172cm/s.
2. (L) residual POP aneurysm thrombosed, maximum diameter 2.2cm.
3. (L) CIA stenosis, 50-99% (nearer 60%).
4. (L) PTA stenosis at ankle, 50-99% (nearer 90%).
5. Minor disease in remaining (L) lower limb arteries, 1-19%.

Summary and next planned surveillance:

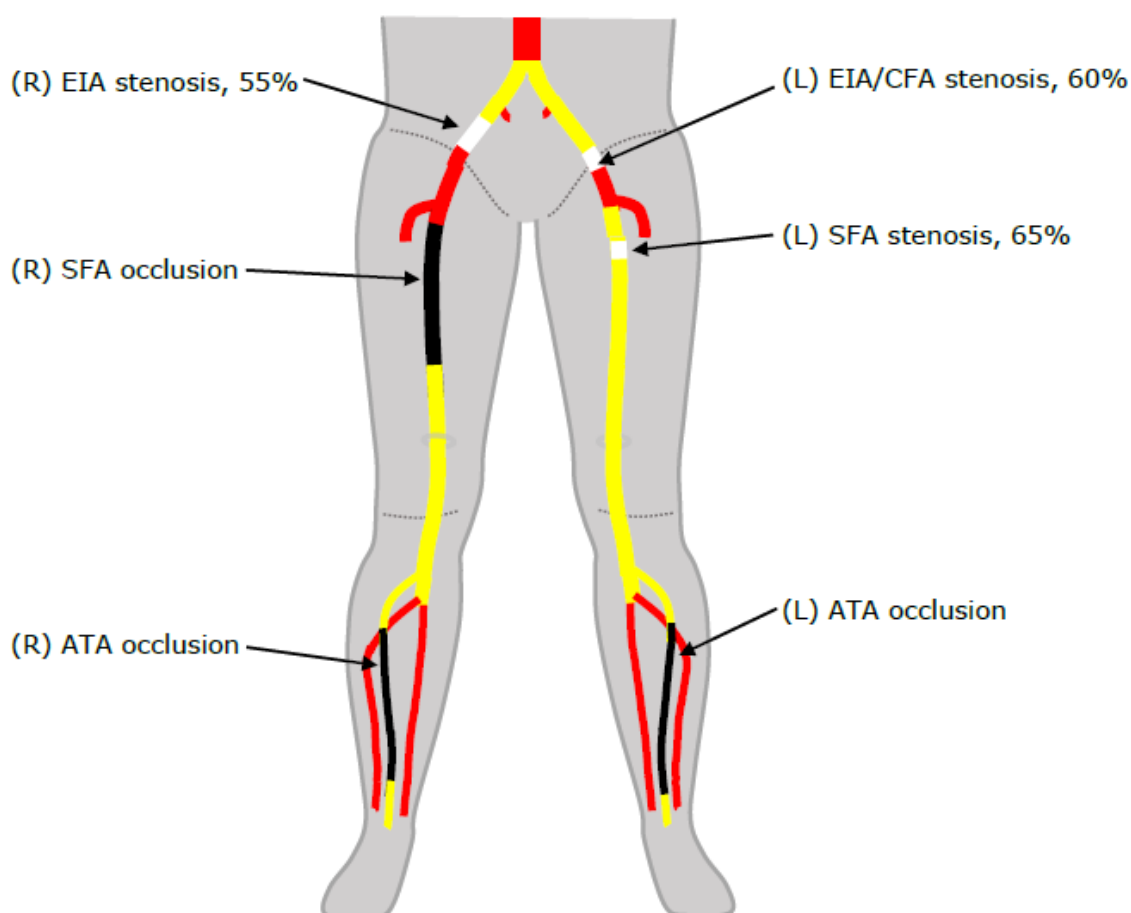
Initial UA scan. Graft widely patent. Next planned scan 16/02/2023 (6weeks).

Reported by: W. Navarro 
Clinical Vascular Ultrasound Sci.

DUPLEX ASSESSMENT LOWER LIMB ARTERIAL

Scan Date: 03.01.2023

1-19% ■
20-49% ■
50-99% ■
Occluded ■
Unscanned ■



Conclusion:

1. (R) EIA stenosis, 50-99% (nearer 55%).
2. (R) SFA occludes ~9.7mm from origin, flow reforms at mid-thigh.
3. (R) ATA occludes proximally, very low flow reforms distally.
4. (L) EIA/CFA stenosis, 50-99% (nearer 60%).
5. (L) SFA proximal stenosis, 50-99% (nearer 65%).
6. (L) ATA occludes proximally, retrograde flow reforms at ankle.
7. Moderate disease in remaining bilateral iliac arteries, SFAs, POPs, TP-trunks and ATAs, 20-49%.
8. Minor disease in remaining bilateral lower limb arteries, 1-19%.

See separate report for ABPI assessment.

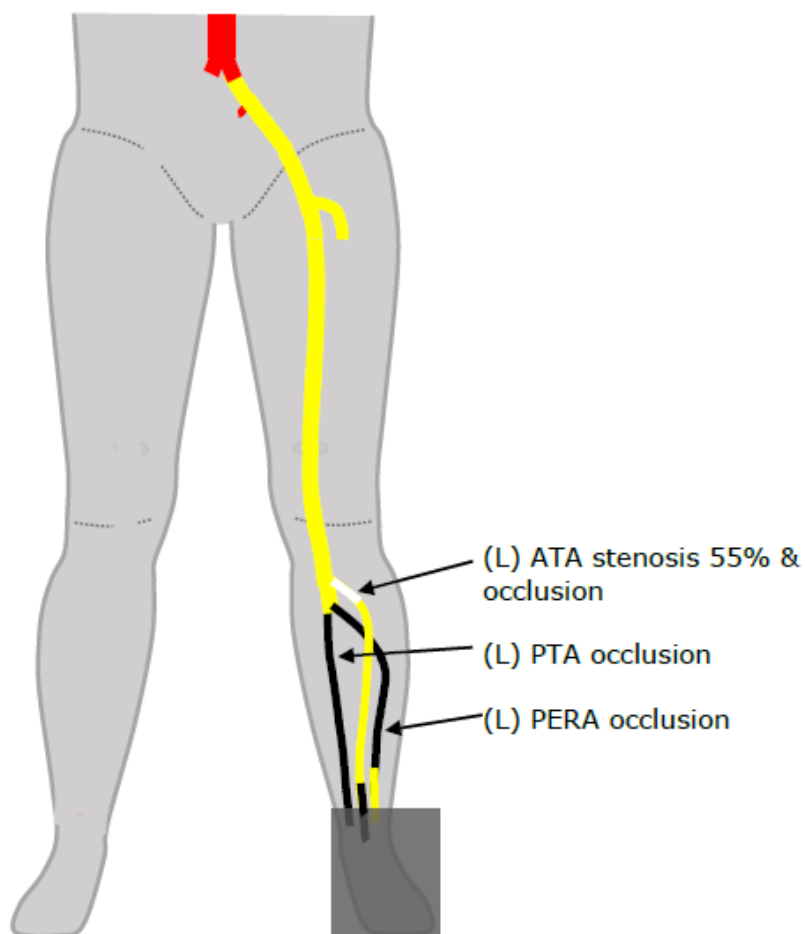
Reported by: S. Poyntz
Tr. Clinical Scientist

Authorised by: W. Navarro *[Signature]*
Clin. Vascular Ult. Sci.

DUPLEX ASSESSMENT LOWER LIMB ARTERIAL

Scan Date: 03.01.2023

1-19% ■
20-49% ■
50-99% ■
Occluded ■
Unscanned ■

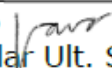


Conclusion:

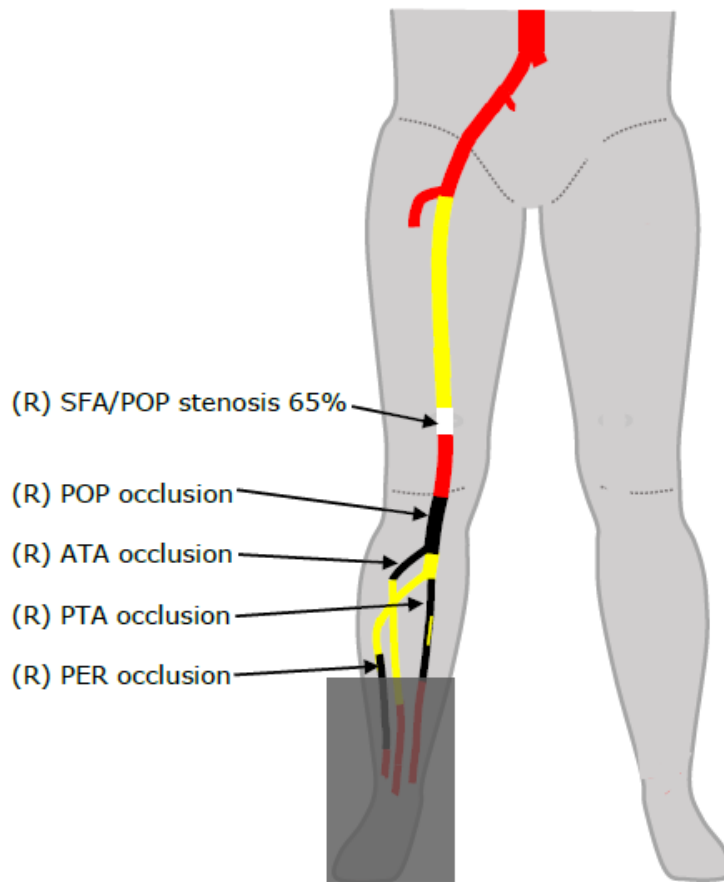
Limited assessment, (L) tibial arteries at ankle not assessed due to bandage.

1. (L) ATA origin stenosis, 50-99% (nearer 55%). Then ATA occludes distally.
2. (L) PTA occluded.
3. (L) PERA occluded, flow reforms distally.
4. Moderate disease detected in remaining (L) lower limb arteries, 20-49%.

Reported by: S. Poyntz
Tr. Clinical Scientist

Authorised by: W. Navarro 
Clin. Vascular Ult. Sci.

1-19% ■
 20-49% ■
 50-99% ■
 Occluded ■
 Unscanned ■



Conclusion:

Limited assessment, (R) tibial arteries below mid-calf level not assessed due to ulcer bandage.

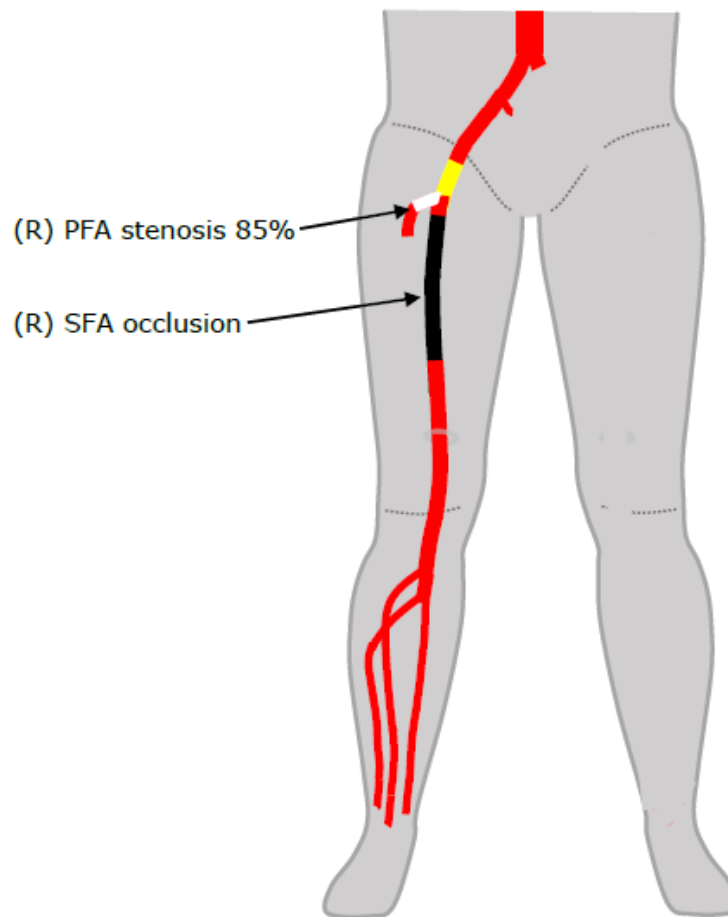
1. (R) distal SFA/ POP stenosis, 50-99% (nearer 65%).
2. (R) POP BK occluded, flow reforms in TP-trunk and proximal ATA. ATA origin occluded.
3. (R) PER occludes above mid-calf level.
4. (R) PTA occluded. Some recanalisation demonstrated in proximal calf.
5. Moderate disease in remaining (R) SFA, 20-49%.
6. Minor disease in remaining (R) lower limb arteries, 1-19%.

Reported by: W. Navarro *[Signature]*
 Clinical Vascular Ultrasound Sci.

DUPLEX ASSESSMENT LOWER LIMB ARTERIAL

Scan Date: 29.12.2022

1-19% ■
20-49% ■
50-99% ■
Occluded ■
Unscanned ■

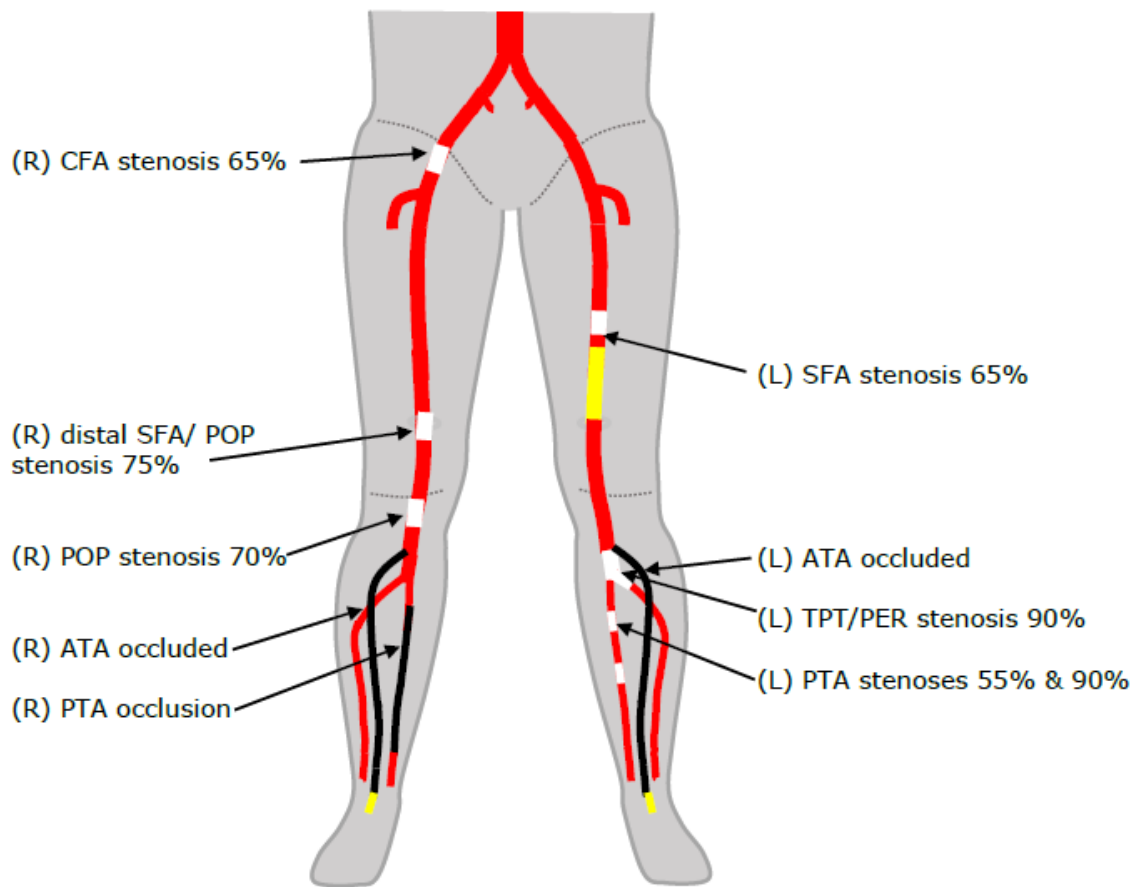


Conclusion:

1. (R) SFA occludes ~2mm after the origin, flow reforms distally.
2. (R) PFA origin stenosis, 50-99% (nearer 85%).
3. Moderate disease in (R) CFA, 20-49%.
4. Abdominal aorta ectatic, maximum AP diameter 2.5cm.
5. Minor disease in remaining (R) lower limb arteries, 1-19%.

Reported by: W. Navarro
Clinical Vascular Ultrasound Sci.

1-19% ■
 20-49% ■
 50-99% ■
 Occluded ■
 Unscanned ■

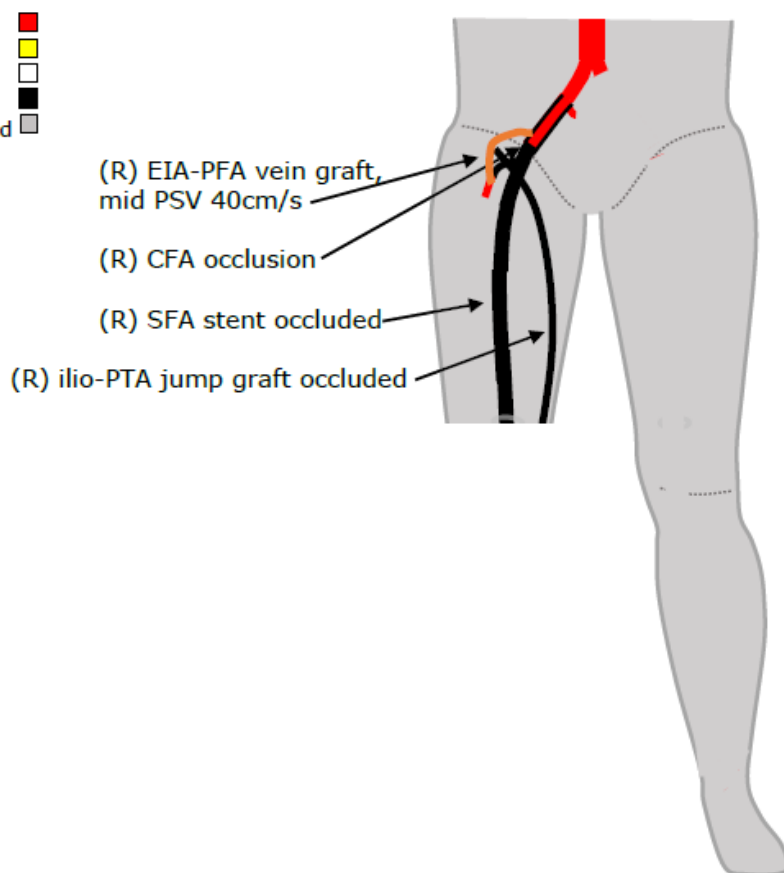


Conclusion:

1. (R) CFA stenosis, 50-99% (nearer 65%).
2. (R) distal SFA/POP stenosis, 50-99% (nearer 75%).
3. (R) POP just BK stenosis, 50-99% (nearer 70%).
4. (R) ATA occluded, flow reforms in DP.
5. (R) PTA occludes proximally, flow reforms at ankle.
6. (L) mid SFA stenosis, 50-99% (nearer 65%).
7. (L) ATA occluded, flow reforms in DP.
8. (L) TP-trunk/PER origin stenosis, 50-99% (nearer 90%).
9. (L) PTA stenoses, 50-99%, proximally (nearer 55%) and at mid (nearer 90%).
10. Moderate disease in distal (L) SFA, 20-49%.
11. Minor disease in remaining bilateral lower limb arteries, 1-19%.

Reported by: W. Navarro
 Clinical Vascular Ultrasound Sci.

1-19% ■
 20-49% ■
 50-99% ■
 Occluded ■
 Unscanned ■



Conclusion:

1. (R) EIA stent patent, 1-19%.
2. (R) EIA-PFA vein graft patent, mid PSV 40cm/s. PFA just distal to graft patent.
3. (R) ilio-PTA jump graft occluded.
4. (R) CFA and SFA stent occluded.
5. Minor disease in abdominal aorta and (R) CIA, 1-19%.

Summary and next planned scan:

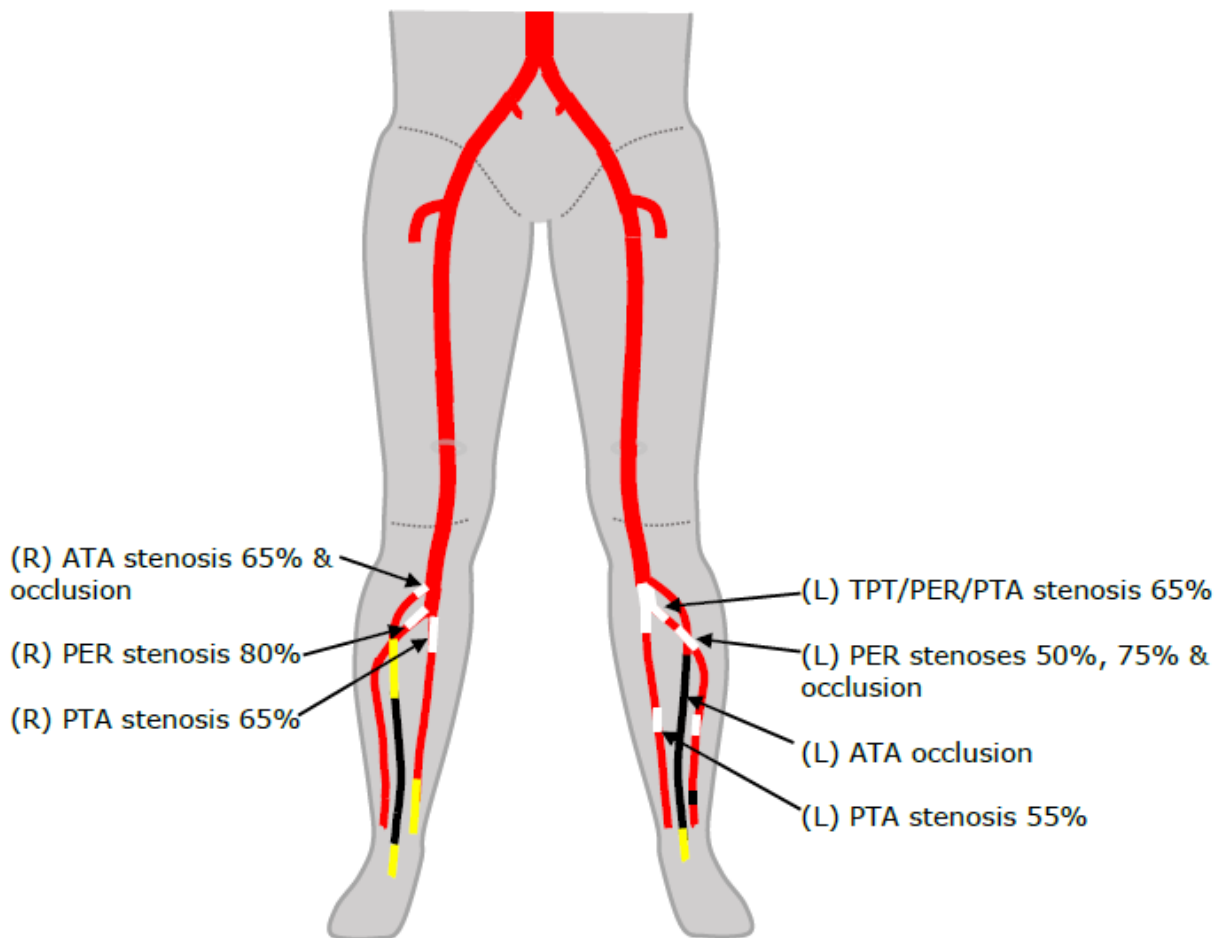
(R) EIA-PFA graft patent. Known occluded jump graft and recent AK amputation – no next planned scan.
 Please request on EPR if further surveillance scans required.

Reported by: W. Navarro *[Signature]*
 Clinical Vascular Ultrasound Sci.

DUPLEX ASSESSMENT LOWER LIMB ARTERIAL

Scan Date: 07.12.2022

1-19% ■
20-49% ■
50-99% ■
Occluded ■
Unscanned ■



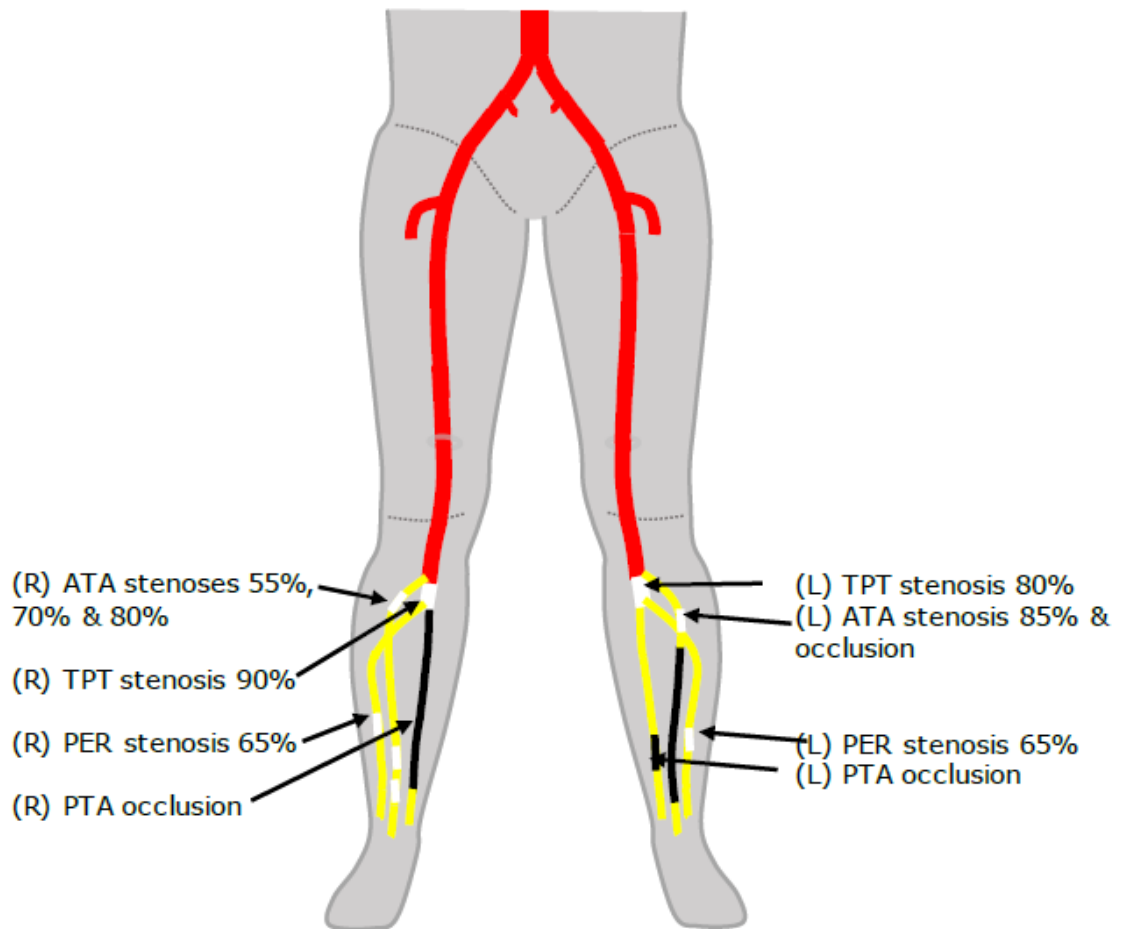
Conclusion:

1. (R) ATA origin stenosis, 50-99% (nearer 65%). Irregular flow lumen in proximal ATA suggests previously occluded, now recanalised. Then ATA occludes proximally, flow reforms in DP.
2. (R) PER origin stenosis, 50-99% (nearer 80%).
3. (R) PTA origin stenosis, 50-99% (nearer 65%). Moderate disease in distal PTA, 20-49%.
4. (L) ATA occludes proximally, retrograde flow reforms below ankle level.
5. (L) distal TP-trunk stenosis extending into both PER and PTA origins, 50-99% (nearer 65%).
6. (L) PER stenoses, 50-99%, proximally (nearer 50%) and mid (nearer 75%). Short segment occlusion in PER above ankle, length 8mm.
7. (L) PTA stenosis at mid, 50-99% (nearer 55%).
8. Minor disease in remaining bilateral lower limb arteries, 1-19%.

See separate report for bilateral lower limb venous duplex assessment.

Reported by: W. Navarro *[Signature]*
Clinical Vascular Ultrasound Sci.

1-19% ■
 20-49% ■
 50-99% ■
 Occluded ■
 Unscanned ■



Conclusion:

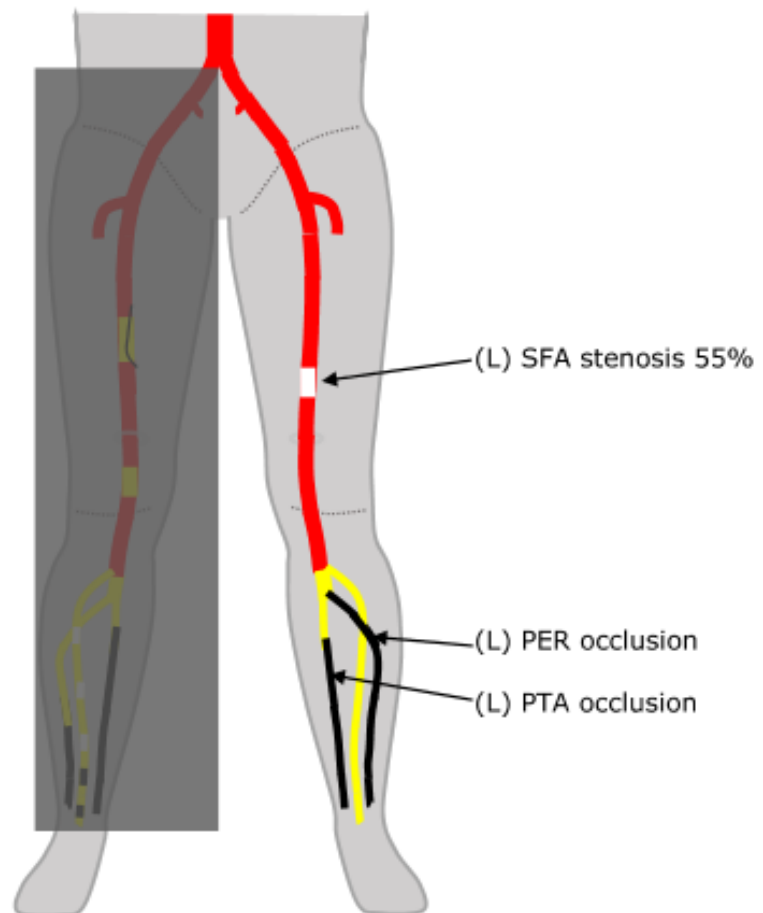
1. (L) ATA proximal stenosis, 50-99% (nearer 85%). Then ATA occludes proximally, flow reforms above ankle.
2. (L) TP-trunk stenosis, 50-99% (nearer 80%).
3. (L) PER distal stenosis, 50-99% (nearer 65%).
4. (L) PTA occludes distally, flow reforms above ankle.
5. (R) ATA stenoses, 50-99%, at origin (nearer 55%) and two distally (nearer 70% and nearer 80%).
6. (R) TP-trunk stenosis, 50-99% (nearer 90%).
7. (R) PER mid stenosis, 50-99% (nearer 65%).
8. (R) PTA occluded, flow reforms distally.
9. Moderate disease in remaining bilateral tibial arteries, 20-49%.
10. Minor disease in remaining bilateral lower limb arteries, 1-19%.

Reported by: W. Navarro
 Clinical Vascular Ultrasound Sci.

DUPLEX ASSESSMENT LOWER LIMB ARTERIAL

Scan Date: **23.02.2023**

1-19% ■
20-49% ■
50-99% ■
Occluded ■
Unscanned ■








Conclusion:

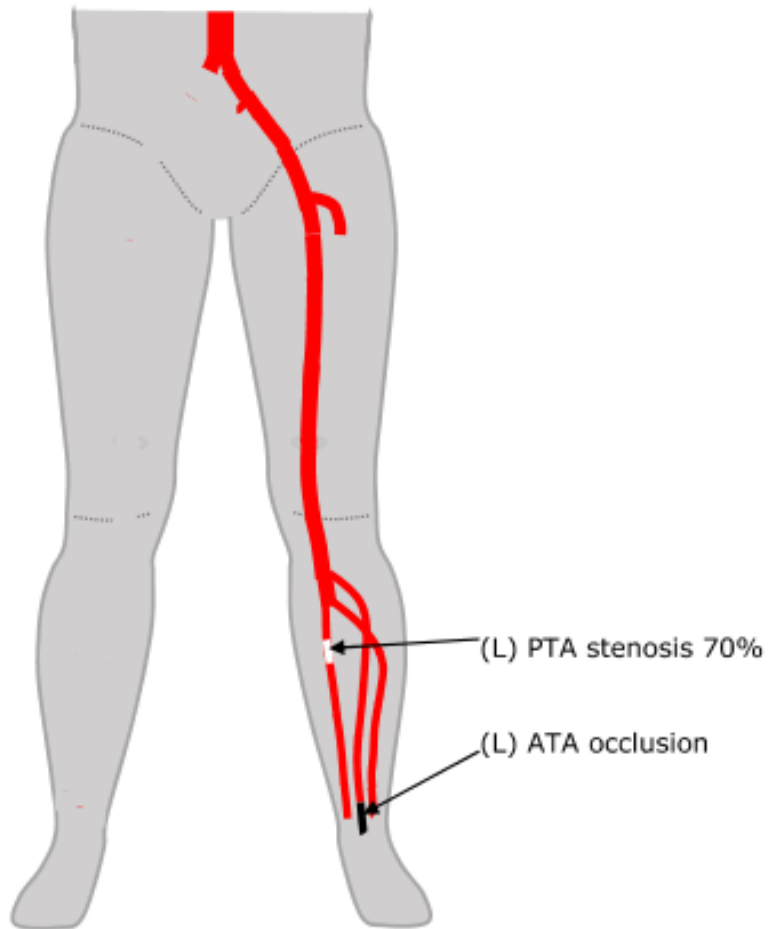
1. (L) distal SFA stenosis, 50-99% (nearer 55%).
2. (L) ATA patent with diffuse calcification, moderate disease, 20-49%.
3. (L) PER and PTA occludes proximally.
4. Diffuse disease in remaining (L) tibial arteries, 20-49%.
5. Minor disease in remaining (L) lower limb arteries, 1-19%.

Reported by: W. Navarro
Clinical Vascular Ultrasound Sci.

DUPLEX ASSESSMENT LOWER LIMB ARTERIAL


Scan Date: **22.02.2023**

1-19% 
20-49% 
50-99% 
Occluded 
Unscanned 



Conclusion:

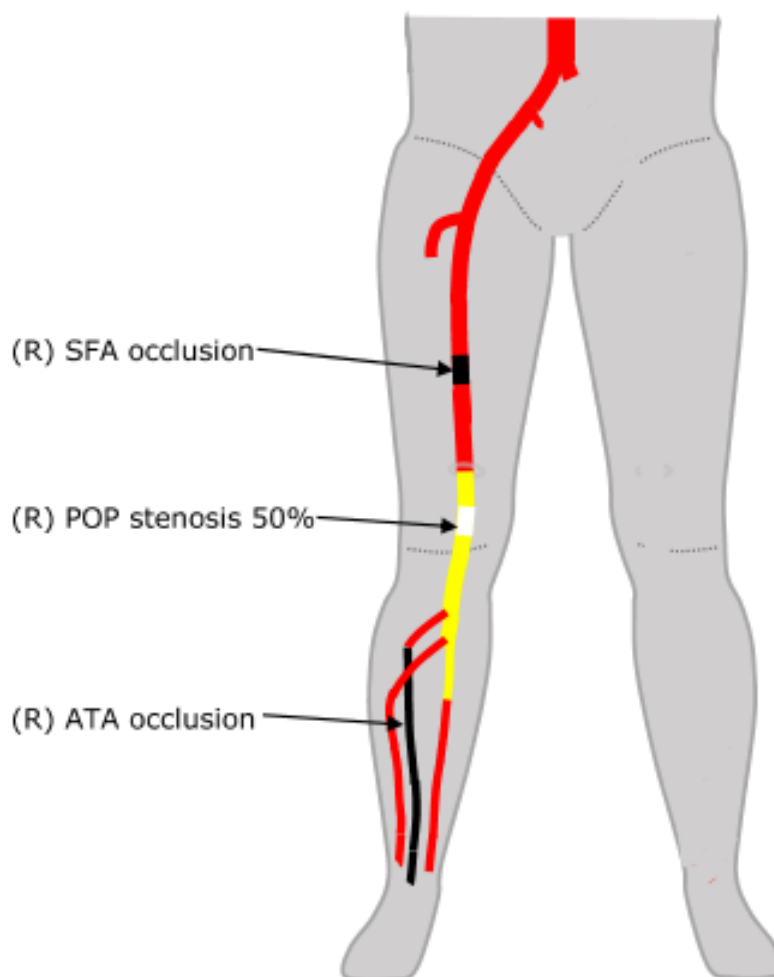
1. (L) ATA occludes at ankle.
2. (L) proximal PTA stenosis, 50-99% (nearer 70%).
3. Minor disease in remaining (L) lower limb arteries, 1-19%.

Reported by: W. Navarro 
Clinical Vascular Ultrasound Sci.

DUPLEX ASSESSMENT LOWER LIMB ARTERIAL

Scan Date: **21.02.2023**

1-19% ■
20-49% ■
50-99% ■
Occluded ■
Unscanned ■



Conclusion:

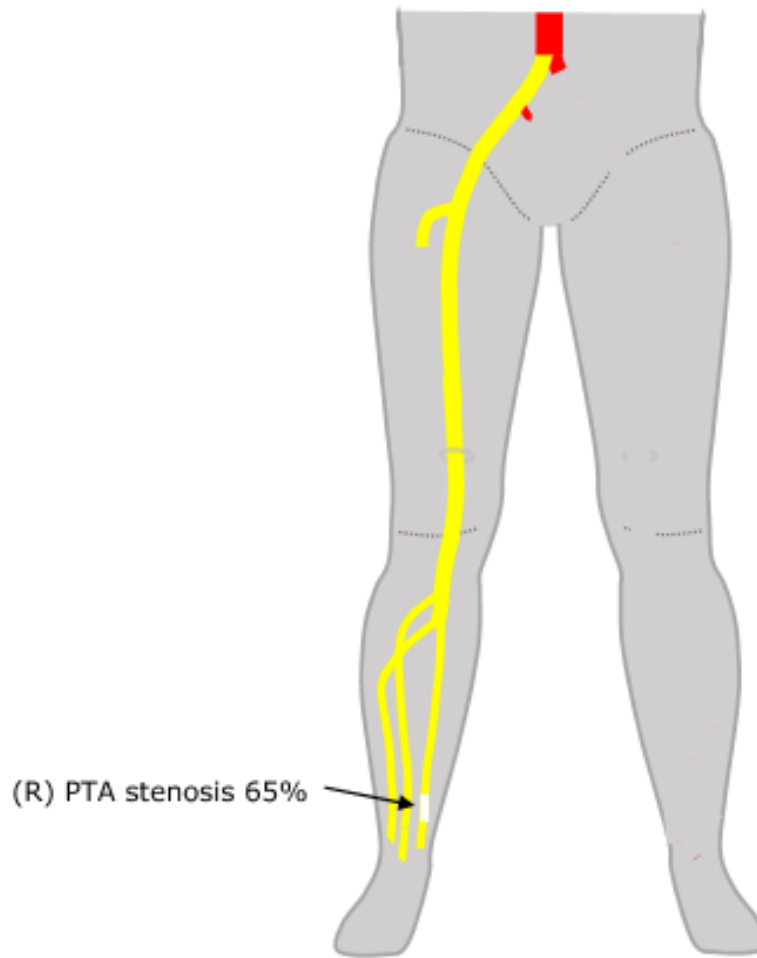
1. (R) mid SFA short segment occlusion, length ~1.8cm.
2. (R) AK POP stenosis, 50-99% (nearer 50%).
3. (R) ATA occludes proximally.
4. Moderate disease in (R) remaining POP, TP-trunk and proximal PTA, 20-49%.
5. Minor disease in remaining (R) lower limb arteries, 1-19%.

Reported by: W. Navarro *[Signature]*
Clinical Vascular Ultrasound Sci.

DUPLEX ASSESSMENT LOWER LIMB ARTERIAL

Scan Date: **21.02.2023**


1-19% ■
20-49% ■
50-99%
Occluded ■
Unscanned ■



Conclusion:

Limited assessment of (R) tibial arteries due to heavy calcification.

1. (R) PTA stenosis just above ankle, 50-99% (nearer 65%).
2. Moderate disease in mid (R) ATA, 20-49% (nearer 49%).
3. Moderate disease in remaining (R) lower limb arteries, 20-49%.

Reported by: W. Navarro 
Clinical Vascular Ultrasound Sci.

DUPLEX ASSESSMENT LOWER LIMB ARTERIAL

Scan Date: **21.02.2023**

1-19% ■
20-49% ■
50-99% ■
Occluded ■
Unscanned ■

(R)-(L) Fem-fem crossover graft,
mid PSV 82cm/s

(R) SFA-SFA graft,
mid PSV 77cm/s

(R) POP stent stenosis, 75%

(R) ATA occlusion

(R) PTA stenosis, 70%

(L) SFA occlusion

Conclusion:

1. (R) CIA and EIA stents patent with moderate narrowing, 20-49%.
2. (R)-(L) fem-fem crossover graft patent, mid PSV 82cm/s. Moderate narrowing at graft proximal anastomosis, 20-49%.
3. (R) SFA-SFA PTFE graft patent, mid PSV 77cm/s. Moderate narrowing at graft distal anastomosis, 20-49%.
4. (R) POP stent patent. Stenosis in distal end of POP stent, 50-99% (nearer 75%).
5. (R) PER and PTA stents patent. Stenosis in proximal (R) PTA, 50-99% (nearer 70%).
6. (R) ATA occluded at origin, flow reforms proximally.
7. Moderate disease in (R) CFA, PFA origin, SFA proximal and distal to graft, and remaining tibial arteries, 20-49%.
8. (L) SFA occluded at origin. Minor disease in (L) CFA distal to graft and PFA origin, 1-19%. No further assessment of (L) lower limb arteries.






Summary and Planned Surveillance:

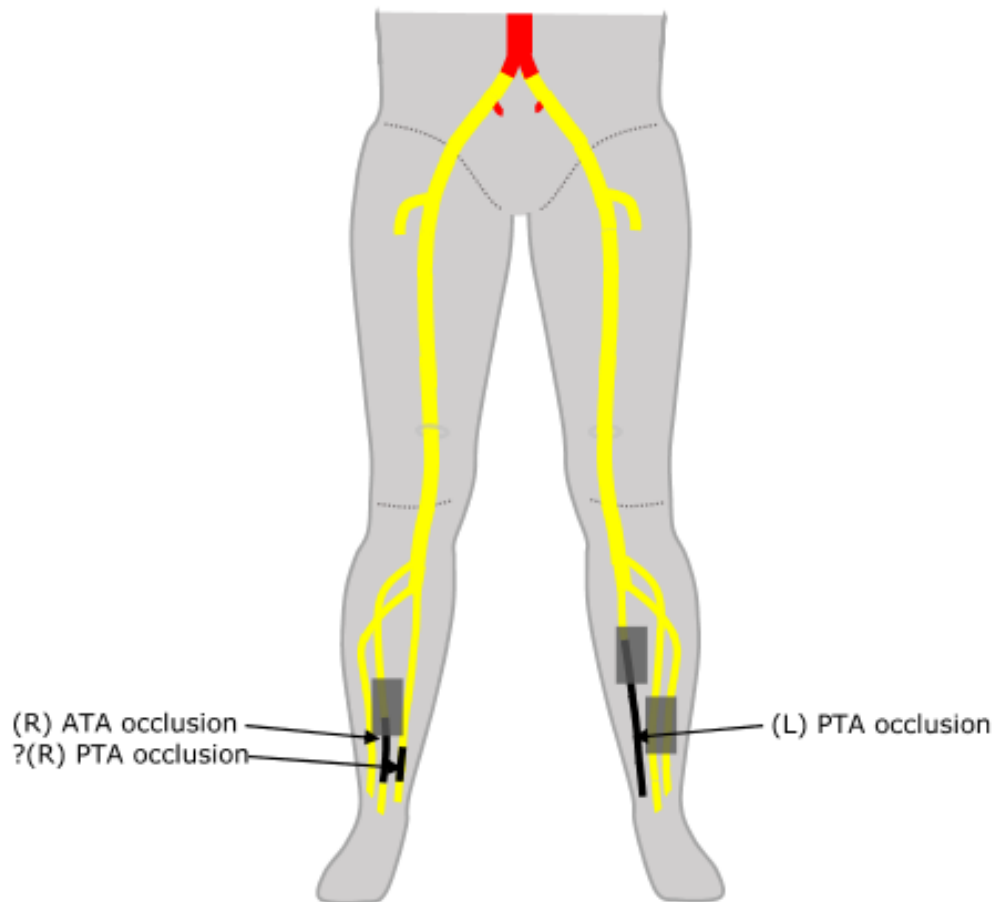
Stable grafts and outflow disease. Next planned scan May 2023.

Reported by: W. Navarro
Clinical Vascular Ultrasound Sci.

DUPLEX ASSESSMENT LOWER LIMB ARTERIAL

Scan Date: **20.02.2023**


1-19% 
20-49% 
50-99% 
Occluded 
Unscanned 



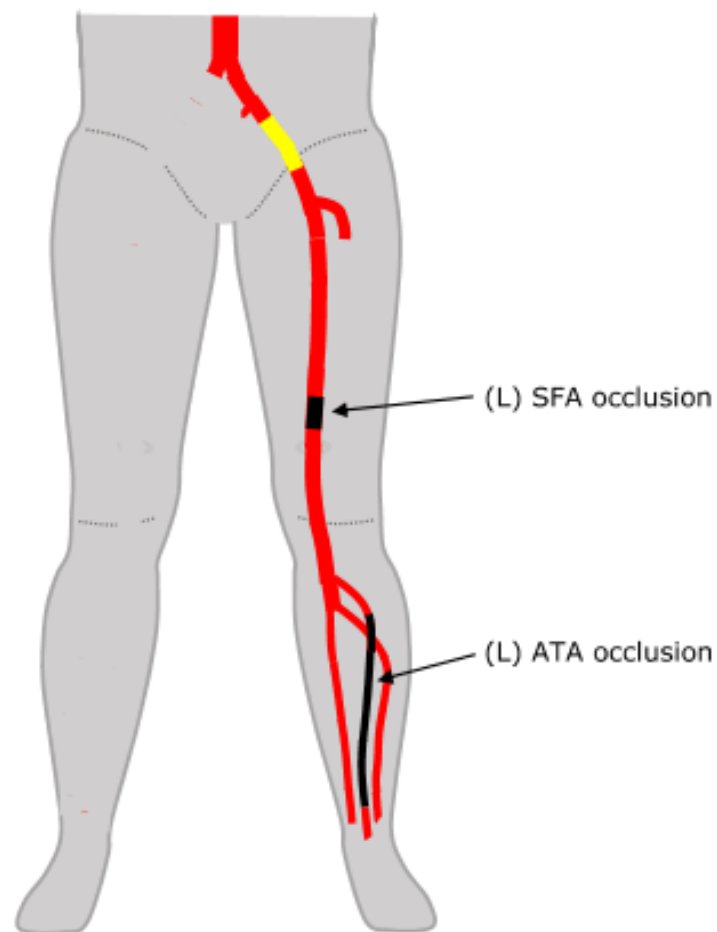
Conclusion:

Limited assessment of bilateral tibial arteries due to ulcers, ulcer dressings and heavy calcification.

1. (R) ATA occludes distally, flow reforms at ankle.
2. No flow detected in (R) PTA above ankle level -?occlusion. Limited assessment due to heavy calcification and ulcer dressing.
3. (L) PTA occludes proximally.
4. Moderate disease detected in remaining bilateral lower limb arteries, 20-49%.

Reported by: W. Navarro 
Clinical Vascular Ultrasound Sci.

1-19% ■
 20-49% ■
 50-99%
 Occluded
 Unscanned



Conclusion:

1. (L) SFA distal short segment occlusion, approximately 3cm in length.
2. (L) ATA occludes proximally, flow reforms distally.
3. Moderate disease in (L) EIA, 20-49%.
4. Minor disease in remaining (L) lower limb arteries, 1-19%.

Reported by: S. Poyntz
 Tr. Clinical Scientist

Authorised by: W. Navarro *[Signature]*
 Clin. Vascular Ult. Sci.

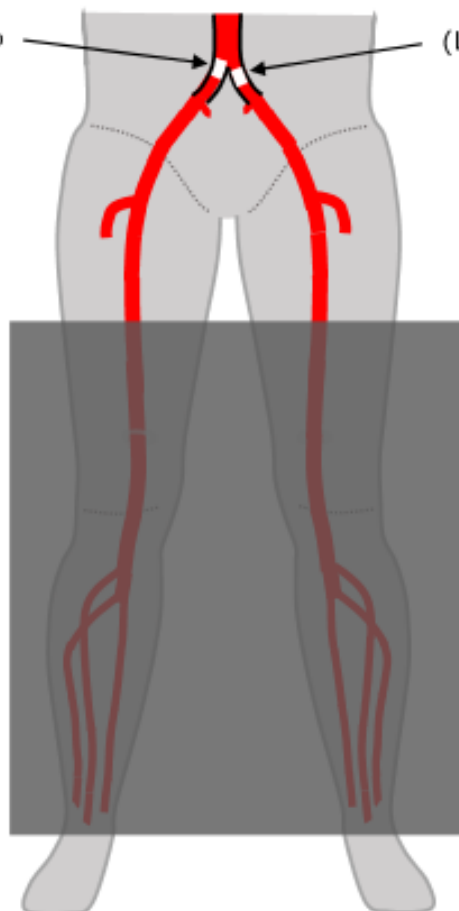
DUPLEX ASSESSMENT LOWER LIMB ARTERIAL

Scan Date: **17.02.2023**

1-19% ■
20-49% ■
50-99% ■
Occluded ■
Unscanned ■

(R) CIA stenosis, 60%

(L) CIA stenosis, 55%



ABI= 150/ 160 = 0.94


ABI= 155 / 160 = 0.97

Conclusion:

1. Bilateral iliac kissing stents patent with stenoses, 50-99%, detected at (R) CIA stent origin (nearer 60%) and proximal (L) CIA stent (nearer 55%).
2. Minor disease in abdominal aorta, bilateral EIAs, CFAs, PFA origins and proximal SFAs, 1-19%. No further assessment.
3. ABPIs within normal range bilaterally, (R) ABPI: 150/160=0.94 and (L) ABPI: 155/160=0.97.

Summary and next planned surveillance:

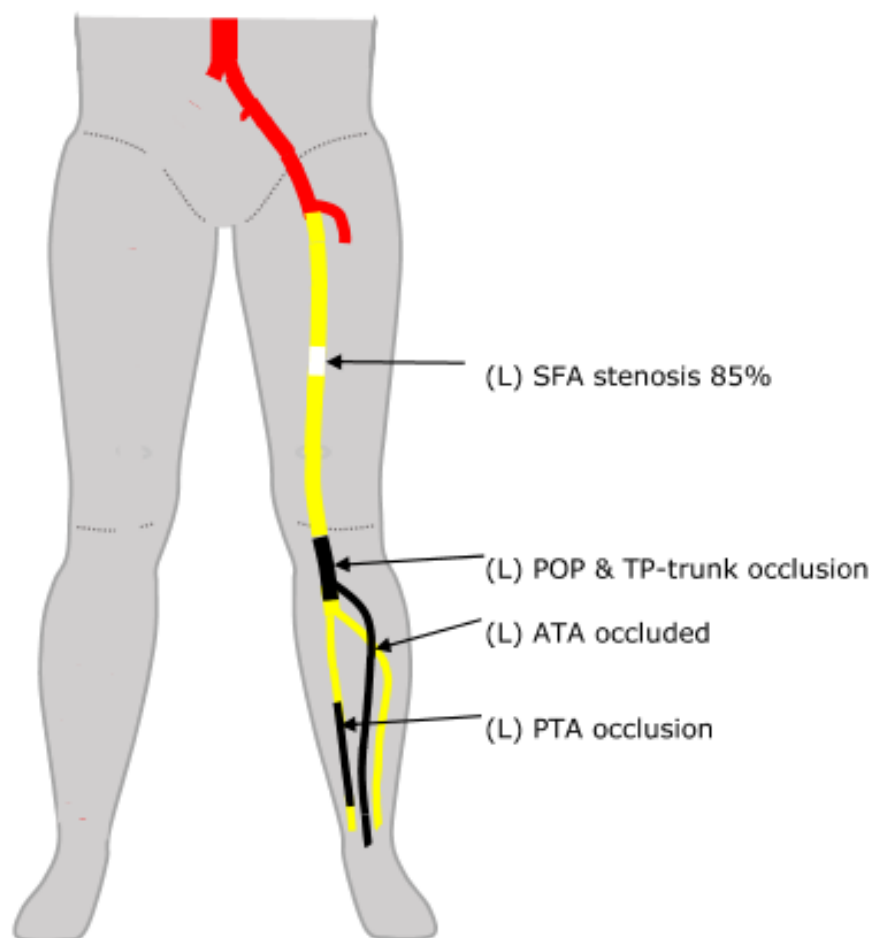
Stable stent stenoses. Next planned scan February 2024.

Reported by: W. Navarro 
Clinical Vascular Ultrasound Sci.

DUPLEX ASSESSMENT LOWER LIMB ARTERIAL


Scan Date: **16.02.2023**

1-19% ■
20-49% ■
50-99%
Occluded ■
Unscanned ■



Conclusion:

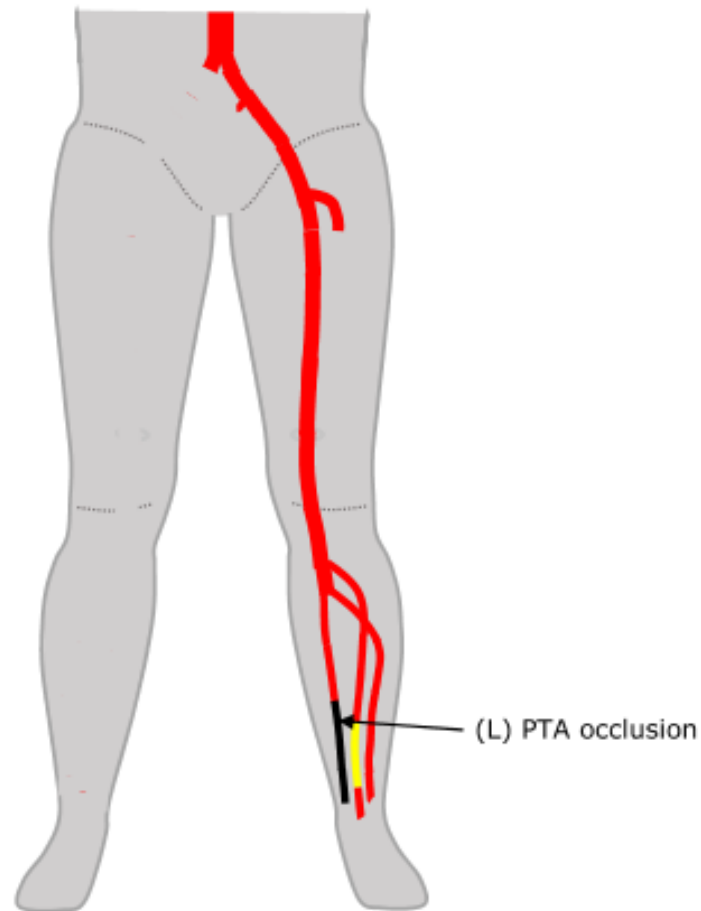
1. (L) CFA and PFA origin patent post-angioplasty, 1-19%.
2. (L) SFA stenosis at mid-thigh, 50-99% (nearer 85%).
3. (L) POP occludes BK, flow reforms in distal TP-trunk.
4. (L) ATA occluded.
5. (L) PTA occludes at mid-calf, very low flow reforms at ankle.
6. Minor disease detected in abdominal aorta and (L) iliac arteries, 1-19%.
7. Moderate disease in remaining (L) lower limb arteries, 20-49%.

Reported by: W. Navarro 
Clinical Vascular Ultrasound Sci.

DUPLEX ASSESSMENT LOWER LIMB ARTERIAL

Scan Date: **16.02.2023**

1-19% ■
20-49% ■
50-99% ■
Occluded ■
Unscanned ■








Conclusion:

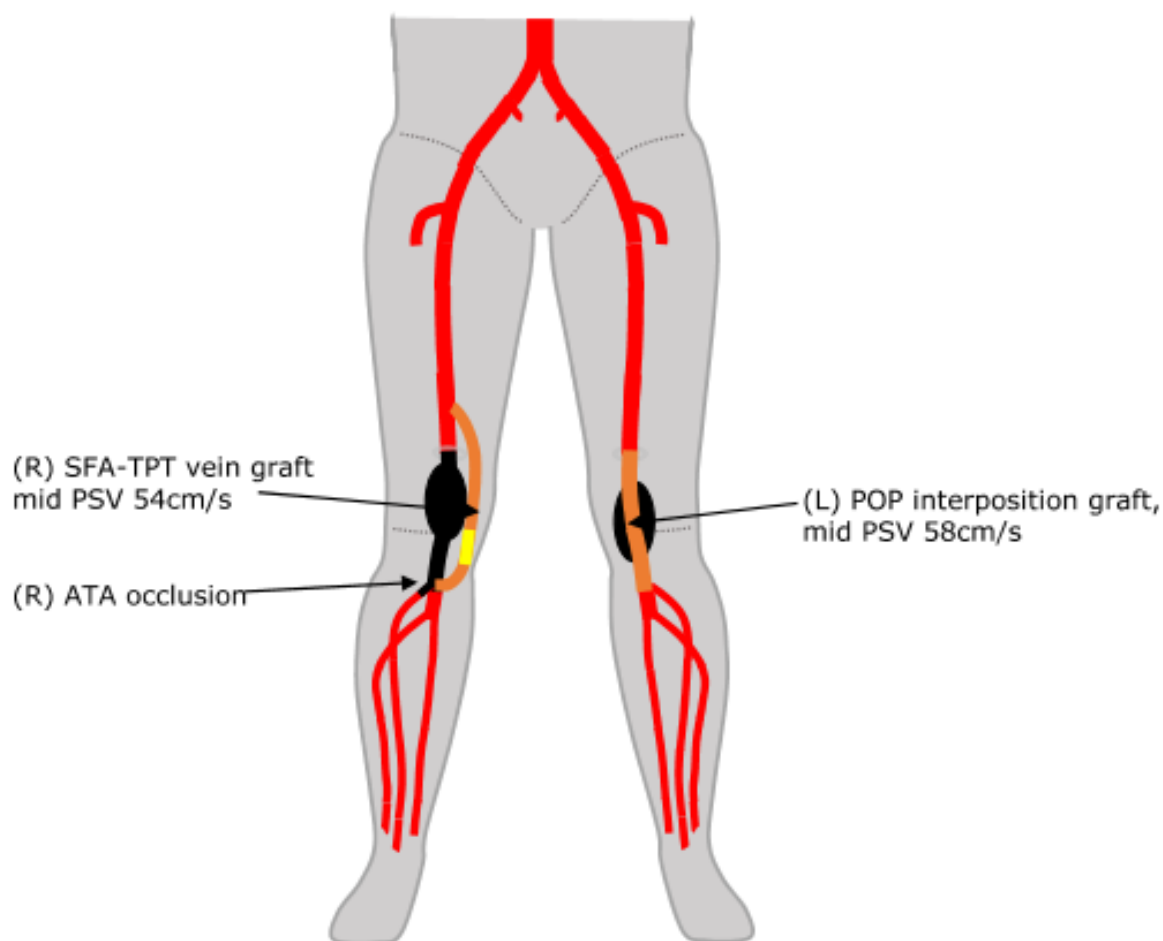
1. (L) SFA and POP patent post-atherectomy, 1-19%.
2. (L) ATA patent post-angioplasty with moderate disease distally, 20-49% (nearer 49%).
3. (L) PTA occludes at mid-calf.
4. Minor disease detected in remaining (L) lower limb arteries, 1-19%. Abdominal aorta ectatic, maximum diameter 2.8cm.

Reported by: W. Navarro *W. Navarro*
Clinical Vascular Ultrasound Sci.

DUPLEX ASSESSMENT LOWER LIMB GRAFT

Scan Date: **16.02.2023**

1-19% 
20-49% 
50-99% 
Occluded 
Unscanned 



Conclusion:

1. (L) POP interposition graft patent, mid PSV 58cm/s. Thrombosed POP aneurysm, residual sac diameter 2.5cm.
2. (R) SFA-TPT vein graft patent, mid PSV 54cm/s. Moderate narrowing in short segment of graft just BK, 20-49%. Thrombosed POP aneurysm.
3. Short segment occlusion in (R) ATA origin. Retrograde flow detected in remaining ATA.
4. Abdominal aorta ectatic, maximum AP diameter 2.5cm. (R) CIA maximum diameter 2.1cm.
5. Minor disease detected in remaining bilateral lower limb arteries, 1-19%.

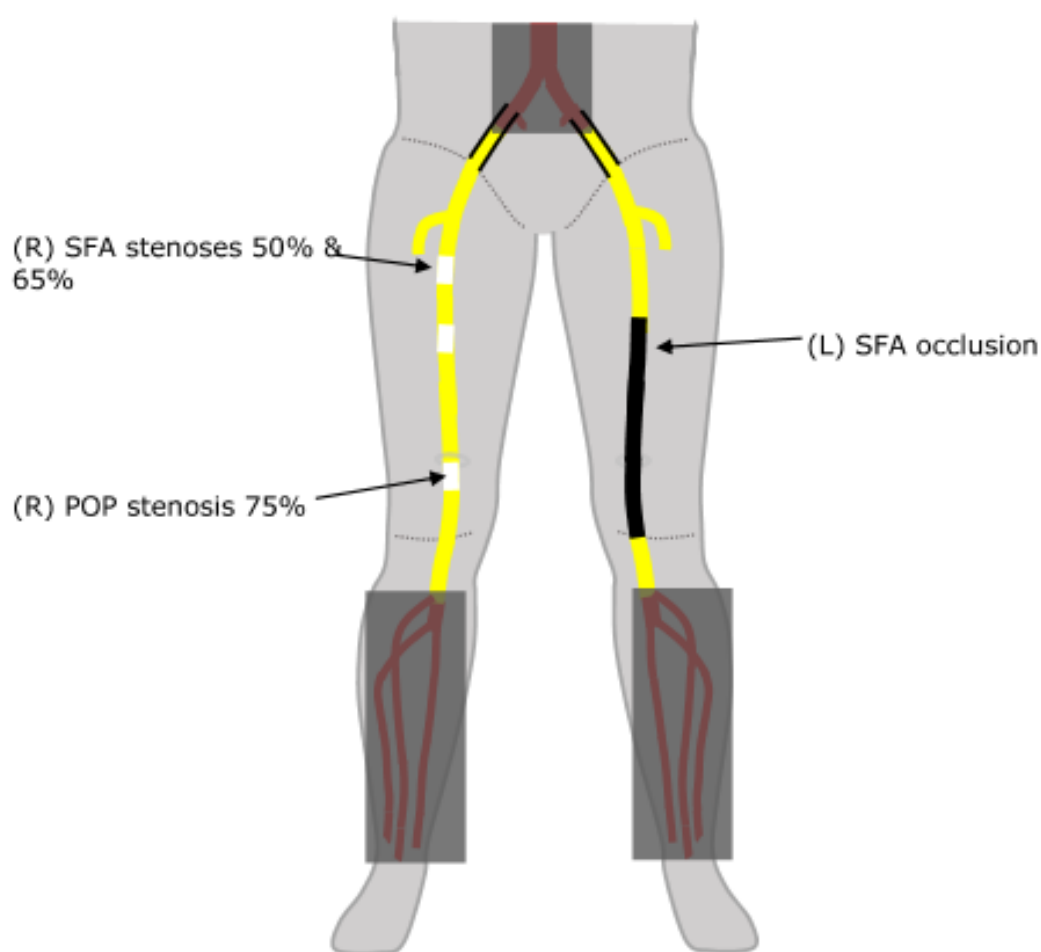
Summary and next planned surveillance:

Stable bilateral grafts. Next planned scan February 2024.

Reported by: L. Stone
Tr. Clinical Scientist

Authorised by: W. Navarro
Clin. Vascular Ult. Sci.

1-19% ■
 20-49% ■
 50-99% ■
 Occluded ■
 Unscanned ■



Conclusion:

Limited assessment: aorta, bilateral CIAs and proximal EIAs not visualised due to bowel gas and habitus. Bilateral tibial arteries not assessed due to bandage.

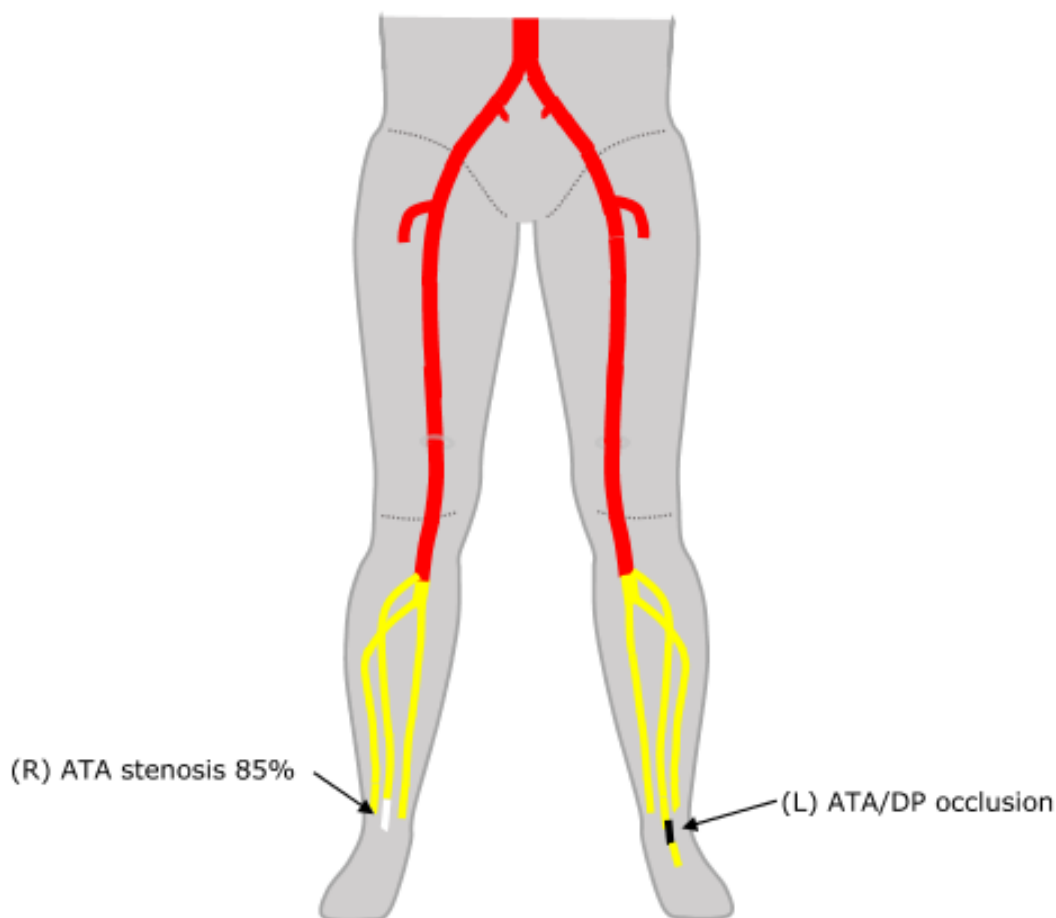
1. Bilateral distal EIA stents patent with elevated velocities but no focal stenosis, moderate narrowing, 20-49%. Biphasic waveforms demonstrated in the EIA stents suggest patent stents proximally.
2. (L) SFA occludes at mid-thigh, flow reforms in POP BK.
3. (R) SFA stenoses, 50-99%, proximally (nearer 50%) and at mid-thigh (nearer 65%).
4. (R) AK POP stenosis, 50-99% (nearer 75%).
5. Moderate disease detected in bilateral CFAs, PFA origins, remaining SFAs and POPs, 20-49%.

Reported by: W. Navarro *[Signature]*
 Clinical Vascular Ultrasound Sci.

DUPLEX ASSESSMENT LOWER LIMB ARTERIAL

Scan Date: **15.02.2023**

1-19% ■
20-49% ■
50-99% ■
Occluded ■
Unscanned ■



Conclusion:

1. Short segment occlusion in (L) ATA below ankle/ DP, length ~8mm.
2. (R) ATA stenosis at ankle, 50-99% (nearer 85%).
3. Moderate disease detected in remaining bilateral tibial arteries, 20-49%.
4. Minor disease detected in remaining bilateral lower limb arteries, 1-19%.

Reported by: W. Navarro
Clinical Vascular Ultrasound Sci.