**Countess of Chester Hospital** 

NHS Foundation Trust

The Countess of Chester Health Park

Liverpool Road

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Study Description: **US Doppler lower limb veins Both** Study Date: **05/04/2023**

**Indication:**

reflux study b/l LL as STP R leg x2 and varicose eczema both ankles

**Report:**

**BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT**

**RIGHT - Patient has had previous right lower limb VV intervention.**

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration, suggesting proximal vein patency.

All visualised deep veins appear patent with no evidence of previous DVT.

Incompetent flow (reflux >1.0s) identified in the CFV and proximal SFV, distal POP V and multiple gastrocnemius veins. All other deep veins appear competent.

All measurements are proximal to the medial malleolus unless otherwise stated.

Sapheno-femoral junction (SFJ) was identified and appears patent, tortuous and incompetent.

Long Saphenous vein (LSV) is patent and compressible in the thigh. The LSV is tortuous for approx. 12cm distal to the SFJ, after which it is linear for approx. 6cm in the mid thigh. Incompetent branch noted off the LSV in the mid thigh at 62cm forming tortuous VV. The LSV tracks in the fascia in thigh until it leaves the fascia in the distal thigh at 50cm, and becomes highly tortuous and tracks down into the calf.

A LSV appears re-enter the fascia in the mid calf at 26cm, and is slightly incompetent (reflux >0.5s <1.0s). Incompetent branch communicates with the LSV in the distal calf at approx. 10cm, distal to this the LSV is incompetent to the ankle.

Transverse (AP) dimensions of LSV:

Proximal thigh - 0.90-0.63cm

Mid- thigh - 0.90cm

Distal thigh - 0.75cm

Mid calf - 0.20cm

Distal calf – 0.27cm

Sapheno-popliteal junction (SPJ) is patent and competent. The SSV is patent and competent along its length.

Sapheno-popliteal junction (SPJ) was not identified. Short Saphenous vein (SSV) is small and difficult to track in the proximal calf, however the SSV appears competent to the ankle.

An incompetent perforator (gastrocnemius in origin) forms incompetent VV in the posterior calf.

**RIGHT CONCULSION**

**Evidence of deep vein incompetency.**

**The LSV is incompetent and tortuous in the thigh.**

**No evidence of old STP in the calf.**

**LEFT**

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration, suggesting proximal vein patency.

All visualised deep veins appear patent with no evidence of previous DVT.

Incompetent flow identified in the CFV. All other deep veins appear competent.

All measurements are proximal to the medial malleolus unless otherwise stated.

SFJ was identified and appears patent and incompetent.

LSV is patent, compressible and incompetent in the thigh. The LSV tracks in the fascia however is slightly tortuous and dilates in multiple segments.

The LSV appears patent and incompetent along its length in the calf. Incompetent branch noted off the LSV in the prox and mid calf at 26cm and 21cm respectively.

Transverse (AP) dimensions of LSV:

Proximal thigh - 1.04-1.45cm

Mid- thigh - 1.13-0.74cm

Distal thigh - 0.74cm

Prox calf - 0.78cm

Mid calf - 0.50cm

Distal calf – 0.31cm

SPJ was not identified. SSV appears competent to the ankle.

**LEFT CONCULSION**

**Evidence of deep vein incompetency.**

**LSV is incompetent in the thigh and calf.**

**Priority:** **++ Significant or Unexpected Finding ++**

**Reported by:**

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Final Date & Time: 05/04/2023 17:42:09