**Countess of Chester Hospital** 

NHS Foundation Trust

The Countess of Chester Health Park

Liverpool Road

Chester

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Study Description: **US Doppler lower limb veins Rt** Study Date: **31/05/2023**

**Indication:**

STP LOWER LSV APRIL 2023

**RIGHT LOWER LIMB VENOUS DUPLEX ASSESSMENT**

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

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

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

Sapheno-femoral junction (SFJ) is incompetent (reflux >1.0s).

Long Saphenous vein (LSV) is patent, and incompetent in the thigh, tracking a relatively linear course within the fascia. Evidence of STP scarring and occlusive / non occlusive mixed STP in the LSV in the mid-distal thigh, there is no evidence of acute STP at this moment in time.

The incompetent LSV leaves the fascia in the proximal calf and tracks down the medial calf. A small LSV via a tributary branch re-enters the fascia in the distal calf, where is appears competent.

Transverse (AP) dimensions of LSV:

Proximal thigh - 0.42cm

Mid- thigh - 0.45cm

Distal thigh - 0.37cm

Sapheno-popliteal junction (SPJ) was not identified. Short Saphenous vein (SSV) is competent and is continuous with a competent vein of Giacomini.

**Conclusion**

**Deep veins are competent.**

**SFJ and LSV in the thigh and proximal calf are incompetent.**

**Evidence of STP scarring and occlusive / non occlusive mixed STP in the LSV in the mid-distal thigh, there is no evidence of acute STP at this moment in time.**

**Priority:** **++ Routine ++**

**Reported by:**

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Final Date & Time: 31/05/2023 08:41:26