

Clinical Indication: ulcer. Not tolerating compression ?venous targets for treatment ?arterial component?
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Findings:

Right

Lower limb arterial duplex

Patent CFA, proximal PFA, SFA, popliteal artery with triphasic flow.

The very distal calf could not be assessed due to patient bandaging.

Heavily calcified crural vessels, however the ATA is widely patent to distal calf with triphasic flow.

Very limited views of the peroneal artery due to calcification however where seen biphasic waveforms demonstrated.

No flow could be seen in the distal PTA, ?occluded. The prox-mid PTA is heavily calcified but biphasic flow seen in segments.

Lower limb venous duplex

Limited venous duplex due to the patient being unable to stand and found performing the Valsalva maneuver difficult.

No evidence of significant DVI.

No evidence of obvious SVI in the GSV.

The mid SSV appears incompetent as an incompetent branch of the GSV drains into it however is only incompetent for a small segment. The proximal SSV and very distal SSV were competent.

Reported By:

Georgina Parsons
Clinical Vascular Scientist