

VERIFIED Verified By : Das Rajib Vascular Studies 25-Aug-2023
Typed By : Das Rajib Vascular Studies 25-Aug-2023

Clinical History :

AN ADDENDUM HAS BEEN ENTERED AT THE END OF THIS REPORT
US Doppler Veins Legs [RDE26673292] :

Rt leg

CFV, FV and Popliteal vein is patent and competent.

There is reurent GSV seen in the thigh which is small calibre and tortous- no reflux detected.

SPJ is patent and incompetent; drains in the SSV.

SSV demonstrated some intimal thickening (appears to be due to previous thrombophlebitic); however, fully compressible.

SSV drain in the varices in the mid and distal calf area.

SSV measures 4.0mm to 5.0mm.

ADDENDUM START by Das Rajib Vascular Studies 25-Aug-2023 15:35

Lt leg

FV is patent and incompetent.

Popliteal vein above knee appears to be incompetent however below knee segment is competent.

There is reurent GSV seen in the thigh which is small calibre and tortous- no reflux detected.

GSV below is incompetent.

SPJ is patent and incompetent; drains in the SSV.

SSV drain in the varices in the mid and distal calf area.

SSV measures 5.0mm to 5.0mm.

Event Number : E-26120576

Courier :

Examination Date : **25-Aug-2023**

Ref. Source : AHMAD, I, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER RO

Examinations : **US Doppler Veins Legs**

VERIFIED Verified By : Das Rajib Vascular Studies 26-Aug-2023
Typed By : Das Rajib Vascular Studies 26-Aug-2023

Clinical History :

US Doppler Veins Leg Rt [RDE26698399] :

CFV, FV and Popliteal vein is patent and competent.

GSV mostly thrombosed in thigh and a short segment of the knee and below (post RFA?).

GSV at mid calf and below is patent and competent.

SSV is patent and competent.

There is no obvious/detectable venous incompetence.

Event Number : E-26143150

Courier :

Examination Date : **26-Aug-2023**

Ref. Source : SIDHARTHA SINHA, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler Veins Leg Rt**

VERIFIED Verified By : Das Rajib Vascular Studies 26-Aug-2023
Typed By : Das Rajib Vascular Studies 26-Aug-2023

Clinical History :

US Doppler Veins Leg Rt [RDE26667018] :

CFA, FV and Popliteal vein is patent and competent.

SFJ is incompetent and drains in the GSV.

GSV measures 8.0mm to 14.0mm from SFJ to the knee.

GSV comes out of deep plane in the distal mid thigh and refluxes in the more varices in the anterior medial aspect of the thigh which descends down below knee and drains in more varices.

Mid thigh perforator appears to be incompetent, measures 4.3mm which communicate with anterior medial thigh varices.

There is no true SPJ .

A short segment of the SSV in the proximal calf is patent and competent, However mid calf to distal segment of the SSV is incompetent where it drains from a incompetent branch of GSV.

Mid - distal SSV 3.0mm to 3.5mm.

Event Number : E-26114905

Courier :

Examination Date : **26-Aug-2023**

Ref. Source : VRIENS BIANCA, CLACTON AND DISTRICT HOSPITAL, CLACTON AND DISTRICT HOSPITAL, TOW

Examinations : **US Doppler Veins Leg Rt**

VERIFIED Verified By : Das Rajib Vascular Studies 26-Aug-2023
Typed By : Das Rajib Vascular Studies 26-Aug-2023

Clinical History :

US Doppler Veins Leg Rt [RDE26662533] :

CFV, FV and Popliteal vein is patent and competent.

SFJ is patent and incompetent drains in the GSV.

GSV is patent and incompetent which drains in the varices below knee.

GSV measures 6.0mm to 9.0mm from SFJ to knee.

GSV below knee appears to be competent.

SPJ and A short segment of the SSV beyond the junction is competent; beyond the rest of the SSV is incompetent where it drains from incompetent branch of the GSV and incomp. Posterior mid calf perforator (measures 3.2mm).

SSV mid calf to distal incompetent.

Mid thigh perforator (Measures 3.4mm) is incompetent which communicating with varices.

Event Number : E-26110867

Courier :

Examination Date : **26-Aug-2023**

Ref. Source : GURUNATHAN MANI SIVARAMAN, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL

Examinations : **US Doppler Veins Leg Rt**

VERIFIED Verified By : Das Rajib Vascular Studies 26-Aug-2023
Typed By : Das Rajib Vascular Studies 26-Aug-2023

Clinical History :

US Doppler Veins Leg Rt [RDE26673269] :

Limited scan due to pt body habitus.

CFv, FV and Popliteal vein is patent and competent.

SFJ is incompetent which drains in the AASV.

AASV measures 9.0mm to 24.0mm which is tortuous drains in the varices distal thigh and below knee.

SSV is patent and competent.

Event Number : E-26120553

Courier :

Examination Date : **26-Aug-2023**

Ref. Source : VRIENS BIANCA, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURN

Examinations : **US Doppler Veins Leg Rt**

VERIFIED Verified By : Das Rajib Vascular Studies 26-Aug-2023
Typed By : Das Rajib Vascular Studies 26-Aug-2023

Clinical History :

US Doppler Veins Leg Lt [RDE26698398] :

CFV, FV and Popliteal vein is patent and competent.

GSV is very small calibre and in the thigh which is competent.

GSV below knee is patent and competent.

AASV is also patent and competent.

SPJ and SSV is patent and competent.

There is no evidence of any deep or superficial venous incompetence.

Event Number : E-26143149

Courier :

Examination Date : **26-Aug-2023**

Ref. Source : SIDHARTHA SINHA, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler Veins Leg Lt**

VERIFIED Verified By : Das Rajib Vascular Studies 26-Aug-2023
Typed By : Das Rajib Vascular Studies 26-Aug-2023

Clinical History :

US Doppler Veins Leg Lt [RDE26658948] :

CFV, FV and Popliteal vein, PTV and Per Veins is patent and competent.

SFJ is incompetent; drains in the AASV.

AASV swings in the anterior later aspect of the mid -distal thigh which is tortous; descend down below knee and drains in the posterior calf varices.

GSV is patent and competent.

SPJ and SSV is also patent and competent.

AASV measures 6.0mm to 7.0mm from SFJ - mid thigh which is straight and uniform; lies within deep plane which appears to be suitable for RFA?

Event Number : E-26107606

Courier :

Examination Date : **26-Aug-2023**

Ref. Source : SIDHARTHA SINHA, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler Veins Leg Lt**

VERIFIED Verified By : Das Rajib Vascular Studies 26-Aug-2023
Typed By : Das Rajib Vascular Studies 26-Aug-2023

Clinical History :

US Doppler Veins Leg Lt [RDE26667017] :

CFV, FV and Popliteal vein is patent and competent.

SFJ is incompetent drains in the AASV.

AASV swings in the anterior lateral aspects of the distal mid thigh and drains in the varices below knee.

AASV measures 7.0mm to 7.3mm from origin to mid thigh; comes out of the deep plane in the mid thigh where the vein is tortuous.

No true SPJ.

A short segment of the proximal SSV in the proximal calf is competent however mid to distal calf segment of the SSV is incompetent where it drains from poster calf perforator/communicating vein (measures 5.4mm).

SSV measures 4.5mm to 4.6mm from mid to distal Calf.

GSV is patent and competent.

Event Number : E-26114904

Courier :

Examination Date : **26-Aug-2023**

Ref. Source : VRIENS BIANCA, CLACTON AND DISTRICT HOSPITAL, CLACTON AND DISTRICT HOSPITAL, TOW

Examinations : **US Doppler Veins Leg Lt**

VERIFIED Verified By : Das Rajib Vascular Studies 26-Aug-2023
Typed By : Das Rajib Vascular Studies 26-Aug-2023

Clinical History :

US Doppler Veins Leg Lt [RDE26658911] :

CFA, FV and Popliteal vein is patent and competent.

SFJ is incompetent; drains in the GSV.

GSV drains in the varices at the level of knee and below.

GSV measures 5.0mm to 7.0mm from the SFJ to knee which is straight and uniform and appears to be suitable for RFA.

GSV from knee to mid calf is competent, however, GSV mid to distal calf is incompetent; measures 3.0mm to 4.0mm.

SPJ and SSV is patent and competent.

Event Number : E-26107572

Courier :

Examination Date : **26-Aug-2023**

Ref. Source : UNKNOWN NURSE SPECIALIST, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL H

Examinations : **US Doppler Veins Leg Lt**

VERIFIED Verified By : Das Rajib Vascular Studies 26-Aug-2023
Typed By : Das Rajib Vascular Studies 26-Aug-2023

Clinical History :

US Doppler Veins Leg Lt [RDE26673268] :

CFV, FV and Popliteal vein is patent and competent.

SFJ is incompetent which drains in the GSV.

GSV refluxes in the varices in the mid thigh and distal thigh.

GSV measures 5.0mm to 6.0mm from SFJ to the knee.

GSV below knee is patent and competent.

SSV is patent and competent.

Event Number : E-26120552

Courier :

Examination Date : **26-Aug-2023**

Ref. Source : VRIENS BIANCA, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURN

Examinations : **US Doppler Veins Leg Lt**

VERIFIED Verified By : Das Rajib Vascular Studies 26-Aug-2023
Typed By : Das Rajib Vascular Studies 26-Aug-2023

Clinical History :

US Doppler Veins Leg Lt [RDE26676048] :

CFV, FV and Popliteal vein is patent and competent.

SFJ is incompetent which drains in the GSV.

GSV drains in the varices in the distal thigh.

GSV is patent incompetent from SFJ to the distal thigh.

GSV distal thigh and below is patent and competent.

GSV measures 6.0mm to 9.0mm from SFJ to distal thigh which is straight and uniform;
appears to be suitable for RFA?

SPJ and SSV is patent and competent.

Posterior ankle perforator ~7cm above the MM is incompetent which measures 2.0mm.

Event Number : E-26123067

Courier :

Examination Date : **26-Aug-2023**

Ref. Source : S CHOKSY, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER R

Examinations : **US Doppler Veins Leg Lt**

VERIFIED Verified By : Das Rajib Vascular Studies 15-Jul-2023
Typed By : Das Rajib Vascular Studies 15-Jul-2023

Clinical History :

Recently healed leg ulceration, visible varicose veins, ankle flare and venous stasis.
please assess both the superficial and deep veins to see if suitable to venous
intervention

**** Entered by Ordercomms ****

Provisional Diagnosis: Recently healed leg ulceration, visible varicose veins, ankle flare
and venous stasis. please assess both the superficial and deep veins to see if suitable
to venous intervention

Clinical History :

US Doppler Veins Leg Rt [RDE26625804] :

Very limited scan due to pt body habitus.

Unable to assess CFV and FV.
Pop V is patent and competent.
GSV mid thigh - below is patent and incompetent.
SSV is patent and competent.
GSV measures 5.0-6.0mm.

Event Number : E-26077880

Courier :

Examination Date : **15-Jul-2023**

Ref. Source : UNKNOWN NURSE SPECIALIST, CLACTON AND DISTRICT HOSPITAL, CLACTON AND DISTRICT H

Examinations : **US Doppler Veins Leg Rt**

VERIFIED Verified By : Das Rajib Vascular Studies 15-Jul-2023
Typed By : Das Rajib Vascular Studies 15-Jul-2023

Clinical History :

vv right leg ? feep and superficial incomeptence

** Entered by Ordercomms **

Provisional Diagnosis: cc right leg ? suitable for rfa

Clinical History :

US Doppler Veins Leg Rt [RDE26625785] :

CFV, FV and Popliteal vein is patent and competent.

SFJ is patent and incompetent, drains in the GSV.

GSV refluxes in the medial thigh varices and below knee.

GSV measures 5.0-12.0mm from SFJ-knee and 4.0mm and 7.0mm below knee.

SSV is patent and incompetent mid calf - ankle (drains from varices of the GSV).

SSV measures 4.0-5.0mm from mid calf - ankle.

Event Number : E-26077861

Courier :

Examination Date : **15-Jul-2023**

Ref. Source : HOWARD ADAM, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURN

Examinations : **US Doppler Veins Leg Rt**

VERIFIED Verified By : Das Rajib Vascular Studies 15-Jul-2023
Typed By : Das Rajib Vascular Studies 15-Jul-2023

Clinical History :

healed venous leg ulcer, in compression hosiery please assess deep and superficial veins to see if ameanable to treatment

** Entered by Ordercomms **

Provisional Diagnosis: healed venous leg ulcer, in compression hosiery please assess deep and superficial veins to see if ameanable to treatment

Clinical History :

US Doppler Veins Leg Rt [RDE26513477] :

Limited scan due to pt body habitus.

FV and Popliteal vein is patent and competent.

SFJ is patent and incompetent- drains in the GSV.

GSV is patent and incompetent, drain the medial varices below knee.

GSV measures 7.0mm to 8.0mm; SFJ- Knee.

GSV measures 5.0-6.0mm below knee.

SSV is patent and competent.

Event Number : E-25976588

Courier :

Examination Date : **15-Jul-2023**

Ref. Source : UNKNOWN NURSE SPECIALIST, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL H

Examinations : **US Doppler Veins Leg Rt**

VERIFIED Verified By : Das Rajib Vascular Studies 01-Jul-2023
Typed By : Das Rajib Vascular Studies 01-Jul-2023

Clinical History :

AN ADDENDUM HAS BEEN ENTERED AT THE END OF THIS REPORT

US Doppler Veins Leg Lt [RDE26625759] :

CFV, FV and Popliteal vein is patent and competent.

GSV is very small which is also patent and competent.

SPJ is incompetent which drains in the SSV.

SSV is incompetent and refluxes in the varies in the medial and later aspect of the proximal, mid and distal calf.

SSV measures 1.7mm to 5.2mm.

ADDENDUM START by Das Rajib Vascular Studies 01-Jul-2023 08:45

A short segment SSV demonstrates some mild wall thickening which is compressible; it appears to be due to the previous sclerotherapy?

Event Number : E-26077835

Courier :

Examination Date : **01-Jul-2023**

Ref. Source : UNKNOWN NURSE SPECIALIST, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL H

Examinations : **US Doppler Veins Leg Lt**

VERIFIED Verified By : Das Rajib Vascular Studies 01-Jul-2023

Typed By : Das Rajib Vascular Studies 01-Jul-2023

Clinical History :

US Doppler Veins Leg Lt [RDE26625792] :

CFV, FV and popliteal vein is patent and competent.

SFJ is incompetent.

GSV is patent and incompetent in the thigh, measures 6.0-11.0 mm in the thigh, which appears to be suitable for RFA.

GSV is competent below knee.

SPJ is patent and competent.

SSV origin - mid calf is patent and competent.

Mid calf - ankle is patent and incompetent where it drains from the varices of GSV.

SSV measures 3.0 mm to 3.1 mm (SPJ- Mid calf) and 4.0-5.0mm (Mid calf - ankle).

GSV drains in the varices in the medial and lateral aspect of the calf muscle.

Event Number : E-26077868

Courier :

Examination Date : **01-Jul-2023**

Ref. Source : HOWARD ADAM, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURN

Examinations : **US Doppler Veins Leg Lt**

VERIFIED Verified By : Das Rajib Vascular Studies 01-Jul-2023
Typed By : Das Rajib Vascular Studies 01-Jul-2023

Clinical History :

US Doppler Veins Leg Rt [RDE26625760] :

CFV, FV and popliteal vein is patent and competent.

SFJ is incompetent.

GSV is patent and incompetent in the thigh, measures 5.0-10.0 mm in the thigh, which appears to be suitable for RFA.

GSV is competent below knee.

SPJ is patent and competent.

SSV origin - mid calf is patent and competent.

Mid calf - ankle is patent and incompetent where it drains from the varices of GSV.

SSV measures 1.4mm to 1.9mm (SPJ- Mid calf) and 3.4-3.9mm (Mid calf - ankle).

GSV drains in the varices in the medial and lateral aspect of the calf muscle.

Event Number : E-26077836

Courier :

Examination Date : **01-Jul-2023**

Ref. Source : UNKNOWN NURSE SPECIALIST, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL H

Examinations : **US Doppler Veins Leg Rt**

VERIFIED Verified By : Das Rajib Vascular Studies 01-Jul-2023
Typed By : Das Rajib Vascular Studies 01-Jul-2023

Clinical History :

US Doppler Veins Leg Rt [RDE26625790] :

CFV, POP V patent and competent.

FV demonstrated some mild -moderate incompetence reflux time 0.85sec.

SFJ is incompetent, drains in the AASV.

AASV refluxes in the varices mid thigh which descends down below knee and drains in more varices.

AASV measures 6.0-12mm in the thigh which appears to be suitable for RFA.

Mid thigh Perforator, measures 6.0mm is also incompetent.

GSV mid - calf to distal is also incompetent, measures 5.0-5.5mm.

SSV is patent and competent.

Event Number : E-26077866

Courier :

Examination Date : **01-Jul-2023**

Ref. Source : HOWARD ADAM, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURN

Examinations : **US Doppler Veins Leg Rt**

VERIFIED Verified By : Das Rajib Vascular Studies 15-Jul-2023
Typed By : Das Rajib Vascular Studies 15-Jul-2023

Clinical History :

LEFT VV PREVIOUS TREATMENT-DONT KNOW WHAT WAS IT

** Entered by Ordercomms **

Provisional Diagnosis: VV

Clinical History :

US Doppler Veins Leg Lt [RDE26647407] :

Limited scan due to pt body habitus, high BMI.

FV, POP V is patent and competent.

There is recurrent GSV seen in the mid thigh which is incompetent/tortous ; swings in the anterior lateral spect of the mid thigh and descends down below where it drains in more varices.

SSV is patent and competent.

Event Number : E-26097230

Courier :

Examination Date : 15-Jul-2023

Ref. Source : GURUNATHAN MANI SIVARAMAN, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL

Examinations : **US Doppler Veins Leg Lt**

VERIFIED Verified By : Das Rajib Vascular Studies 15-Jul-2023
Typed By : Das Rajib Vascular Studies 15-Jul-2023

Clinical History :

high tei end strip now skin changes and recurrent veins.

** Entered by Ordercomms **

Provisional Diagnosis: recurrent vv

Clinical History :

US Doppler Veins Leg Lt [RDE26625722] :

CFV, FV and Popliteal vein is patent and competent.

There is recurrent GSV seen in the medial and lateral thigh which is tortous and incompetent- descends down below knee and drains in more varices.

A short segment of the SSV in the mid calf is thrombosed, rest of the vessels is patent and incompetent.

Event Number : E-26077801

Courier :

Examination Date : 15-Jul-2023

Ref. Source : GURUNATHAN MANI SIVARAMAN, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL

Examinations : **US Doppler Veins Leg Lt**

VERIFIED Verified By : Das Rajib Vascular Studies 15-Jul-2023
 Typed By : Das Rajib Vascular Studies 15-Jul-2023

Clinical History :

Had cellulitis, in compression hosiery. Had previous VV stripping many years ago.
 Prominent VV in L thigh (medial aspect).. Pelase assess deep and superficial veins to
 see if suitable for venous intervention

** Entered by Ordercomms **

Provisional Diagnosis: Had cellulitis, in compression hosiery. Had previous VV stripping
 many years ago. Prominent VV in L thigh (medial aspect).. Pelase assess deep and
 superficial veins to see if suitable for venous in

Clinical History :

US Doppler Veins Leg Lt [RDE26648377] :

CFV, FV and Popliteal vein is patent and competent.

No true SFJ.

There is is recurrent GSV seen the medial thigh which is incompetent; small calibre and
 tortous, descends down below knee and drains in more varices.

SSV is patent and competent.

Event Number : E-26098092	Courier :	Examination Date : 15-Jul-2023
Ref. Source : UNKNOWN NURSE SPECIALIST, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL H		
Examinations : US Doppler Veins Leg Lt		

VERIFIED Verified By : Das Rajib Vascular Studies 15-Jul-2023
Typed By : Das Rajib Vascular Studies 15-Jul-2023

Clinical History :

Right leg LM ulcer; possibly venous; patient is KNOWN to have a right pop V DVT and old left femoral DVT. Please check his RIGHT leg for any superficial venous reflux.

** Entered by Ordercomms **

Provisional Diagnosis: Right leg ulcer

Clinical History :

US Doppler Veins Leg Rt [RDE26649070] :

GSV is patent and incompetent; drains in the varices in the mid thigh.

GSV measures 4.0-6.0mm in the thigh and 4.0-5.0mm below knee.

SSV is also patent and incompetent, measures 4.0-6.0mm.

Mid calf perforator ~15cm above the MM is also incompetent.

Event Number : E-26098693

Courier :

Examination Date : **15-Jul-2023**

Ref. Source : SIDHARTHA SINHA, CLACTON AND DISTRICT HOSPITAL, CLACTON AND DISTRICT HOSPITAL, TC

Examinations : **US Doppler Veins Leg Rt**

VERIFIED Verified By : Das Rajib Vascular Studies 21-Jul-2023
 Typed By : Das Rajib Vascular Studies 21-Jul-2023

Clinical History :

Currently an in patient, has bilateral lower limbs swelling, leg ulcer to R leg, dressed. Has monophasic signals to DP, and PT toe pressure reduced. visible varicose veins, ? mixed arteriovenous ulcer. Please assess arteries and deep and superficial veins to see if intervention is required.

Could you please do the scans as an inpatient? We will cancel the previous scans booked.

** Entered by Ordercomms **

Provisional Diagnosis: Bilateral lower limbs swelling with an ulcer in lateral aspect of the right leg

Clinical History :

US Doppler Veins Legs [RDE26662327] :

Limited scan.

CFV, FV and Popliteal vein is fully compressible in both sides.
 SFJ and GSV is incompetent in both right and left sides.

Event Number : E-26110693 Courier : Examination Date : 21-Jul-2023
 Ref. Source : GANESHALINGAM SRIRAM, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSP
 Examinations : **US Doppler Veins Legs**

VERIFIED Verified By : Das Rajib Vascular Studies 31-Jul-2023
Typed By : Das Rajib Vascular Studies 31-Jul-2023

Clinical History :

pt has suffered with left leg swelling since having cellulitis and sepsis back in october 22.
Triphasic doppler signals
please assess for any venous incompetences

** Entered by Ordercomms **

Provisional Diagnosis: pt has suffered with left leg swelling since having cellulitis and sepsis back in october 22.

Triphasic doppler signals
please assess for any venous incompetences

Clinical History :

US Doppler Veins Leg Lt [RDE26644680] :

CFV, FV and Popliteal vein is patent and competent.

SFJ is patent and competent.

GSV in the thigh is patent and competent.

SPJ and SSV is patent and competent.

Mid calf perforator is incompetent which measures 6.0mm drains in the GSV.

GSV mid calf - distal is patent and incompetent.

Mid calf perforator is incompetent.

GSV mid calf to distal is also incompetent.

Event Number : E-26094800

Courier :

Examination Date : **31-Jul-2023**

Ref. Source : UNKNOWN NURSE SPECIALIST, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL H

Examinations : **US Doppler Veins Leg Lt**

VERIFIED Verified By : Das Rajib Vascular Studies 17-Jul-2023
Typed By : Das Rajib Vascular Studies 17-Jul-2023

Clinical History :

Rt leg varicose vein ? suitable for intervention , please assess DVI anf SVI , previous vein stripping 20 yrs ago

** Entered by Ordercomms **

Provisional Diagnosis: Rt leg varicose vein ? suitable for intervention , please assess DVI anf SVI , previous vein stripping 20 yrs ago

Clinical History :

US Doppler Veins Leg Rt [RDE26644673] :

CFV, FV and Popliteal vein is patent and competent.

SFJ is absent.

There is recurrent incompetent tortous veins in the anterior medial and and later aspect of the thigh which descends down below knee and drains in more varices.

SPJ and SSV is patent and competent.

Event Number : E-26094794

Courier :

Examination Date : 17-Jul-2023

Ref. Source : UNKNOWN NURSE SPECIALIST, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL H

Examinations : **US Doppler Veins Leg Rt**

VERIFIED Verified By : Das Rajib Vascular Studies 18-Jul-2023
Typed By : Das Rajib Vascular Studies 18-Jul-2023

Clinical History :

Seen by vascular team for unhealing leg ulcers. Reviewed by vascular surgeons who have requested duplex right lower limb. Noted right limb is more swollen than the left so Dr Pillai has also has for doppler veins to r/o dvt. Thank you

** Entered by Ordercomms **

Provisional Diagnosis: Unhealing leg ulcer plus right leg swelling
r/o dvt.

Clinical History :

US Doppler Veins Leg Rt [RDE26680533] :

Limited scan.

CFV is patent fully compressible.

FV appears to have post thrombotic scarring which is in keeping with previous DVT.

Popliteal vein is also fully compressible.

There is no visible dilated/ varicose veins.

Event Number : E-26127045

Courier :

Examination Date : 18-Jul-2023

Ref. Source : PILLAI A, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER ROAD

Examinations : **US Doppler Veins Leg Rt**