

US Doppler carotid artery Both [RDE26723319] :

Right Side:

Normal Doppler signals in the common carotid artery (PSV 50 cm/sec, EDV 6.0 cm/sec) , internal carotid artery (PSV 46 cms/sec, EDV 17 cms/sec) and external carotid artery (PSV 39 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Normal Doppler signals in the common carotid artery (PSV 58 cm/sec, EDV 10.0 cm/sec) , internal carotid artery (PSV 37 cms/sec, EDV 9.0- cms/sec) and external carotid artery (PSV 63 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26165664

Courier :

Examination Date : **04-Sep-2023**

Ref. Source : Amer Esam, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER R

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26719158] :

CFA measures within the normal calibre; patent, tri/biphasic Doppler signals seen.

Rt Popliteal artery is occluded.

Left Popliteal artery measures 1.3cm which is patent; triphasic doppler signals seen.

US Doppler Arteries Femoro-Popliteal [RDE26719159] :

Right Side:

Mild wall thickening seen in the common carotid artery. Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery with no haemodynamic significance.

Normal Doppler signals in the common carotid artery (PSV 40 cm/sec, EDV 5.0 cm/sec) , internal carotid artery (PSV 37 cms/sec, EDV 10 cms/sec) and external carotid artery (PSV 102cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall thickening seen in the common carotid artery. Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery with no haemodynamic significance.

Normal Doppler signals in the common carotid artery (PSV 53 cm/sec, EDV 10 cm/sec) , internal carotid artery (PSV 60 cms/sec, EDV 25 cms/sec) and external carotid artery (PSV 83 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

Event Number : E-26161938

Courier :

Examination Date : **07-Sep-2023**

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

Examinations : **US Doppler carotid artery Both,US Doppler Arteries Femoro-Popliteal**

US Doppler carotid artery Both [RDE26658885] :

Limited scan as the pt is not able move his neck as required.

Right side

CCA is patent in the distal segment, PSV 19cm/s and EDV 10cm/s.

There is some irregular heterogenous plaques seen in the carotid bulb causing >70% narrowing which is associated with enhanced velocities, PSV 361cm/s and EDV 36cm/s, PSVR >5 which is in keeping with >90% stenosis.

Distal ICA is patent.

Unable to asses Vertebral artery.

Left side

There is no flow detected in the distal CCA and ICA which is in keeping with occlusions of the vessels.

ECA is patent.

Patent vertebral artery, normal antegrade doppler signals seen.

Event Number : E-26107547

Courier :

Examination Date : **03-Jul-2023**

Ref. Source : HOWARD ADAM, CLACTON AND DISTRICT HOSPITAL, CLACTON AND DISTRICT HOSPITAL, TOW

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26662473] :

Right Side:

Mild wall thickening seen in the common carotid artery. Mixed plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 79 cm/sec, EDV 16 cm/sec) , internal carotid artery (PSV 74 cms/sec, EDV 13 cms/sec) and external carotid artery (PSV 112 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall thickening seen in the common carotid artery. Mixed plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 80 cm/sec, EDV 19 cm/sec) , internal carotid artery (PSV 106 cms/sec, EDV 34 cms/sec) and external carotid artery (PSV 72 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26110816

Courier :

Examination Date : **29-Jun-2023**

Ref. Source : CIOBOTARU S, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNE

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26658990] :

Right Side:

Mild wall thickening seen in the common carotid artery. Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 107 cm/sec, EDV 33 cm/sec) , internal carotid artery (PSV 76 cms/sec, EDV 31 cms/sec) and external carotid artery (PSV 119 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild diffuse wall thickening seen in the common carotid artery. Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 116 cm/sec, EDV 45 cm/sec) , internal carotid artery (PSV 93 cms/sec, EDV 40 cms/sec).

Velocities in the external carotid artery is enhanced (PSV 152 cm/sec) with significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: Significant left ECA disease.

Please consider another modality of imaging.

NASCET method used for velocity criteria.

Event Number : E-26107646

Courier :

Examination Date : **29-Jun-2023**

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26662347] :

There is some mild wall thickening seen of the CCA with no haemodynamic significance.
Small amount of mixed plaques seen in the Carotid bifurcations extended in the proximal ICA and ECA in both sides; no haemodynamic significance.

CCA, ICA and ECA is patent bilaterally.

Patent vertebral arteries; normal antegrade doppler signals seen.

There is no sonographic evidence of any significant extracranial Carotid disease.

Event Number : E-26110707

Courier :

Examination Date : **29-Jun-2023**

Ref. Source : Francis Rohin Dr, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURN

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26659633] :

Right Side:

Mild wall thickening seen in the common carotid artery. Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 68 cm/sec, EDV 12 cm/sec), internal carotid artery (PSV 64 cm/sec, EDV 20 cm/sec) and external carotid artery (PSV 66 cm/sec) with no significant flow disturbance.

Irregular heterogeneous plaques seen in the origin of subclavian artery; velocities are enhanced, PSV 134 cm/s.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall thickening seen in the common carotid artery. **Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery, causing ~50% narrowing.**

Normal Doppler signals in the common carotid artery (PSV 65 cm/sec, EDV 15 cm/sec).

Tortuous internal carotid artery (PSV 100 cm/sec, EDV 20 cm/sec) and external carotid artery (PSV 102 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: There is >50% narrowing seen of the proximal internal carotid artery.

Rt subclavian artery demonstrated some heterogeneous plaques in the origin.

Another modality of imaging is recommended.

NASCET method used for velocity criteria.

Event Number : E-26108246

Courier :

Examination Date : **27-Jun-2023**

Ref. Source : NGEH JKT, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER ROAD

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26659830] :

Right Side:

Small amount of heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 42 cm/sec, EDV 9.0 cm/sec), internal carotid artery (PSV 45 cms/sec, EDV 15 cms/sec) and external carotid artery (PSV 63 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall thickening seen in the common carotid artery. Irregular mixed plaques, predominantly hypoechoic seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 43 cm/sec, EDV 7.0 cm/sec)

Heterogenous plaques in the carotid bulb and proximal internal carotid artery causing >80% narrowing which is also significant haemodynamically, enhanced velocities seen in the internal carotid artery (PSV 131 cms/sec, EDV 23cms/sec), PSVR 5 which is in keeping with >90% stenosis, mid - distal ICA is patent.

Normal external carotid artery (PSV 47 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: **Haemodynamically there is is >90% stenosis of the proximal internal carotid artery.**

NASCET method used for velocity criteria.

***** URGENT *****

The above report contains URGENT clinical findings which are either unexpected based on the clinical information provided on the request or which have not already been documented based on the available radiological history. This report must be urgently highlighted to a SENIOR CLINICIAN for appropriate further management.

Event Number : E-26108424

Courier :

Examination Date : **27-Jun-2023**

Ref. Source : Sheheryar Raja, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNE

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26658628] :

Right Side:

Mild wall thickening seen of the common carotid artery. Small amount of heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 39 cm/sec, EDV 7.0 cm/sec), internal carotid artery (PSV 41 cms/sec, EDV 8.0 cms/sec) and external carotid artery (PSV 71 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall thickening seen of the common carotid artery. Small amount of heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 40 cm/sec, EDV 8.0 cm/sec), internal carotid artery (PSV 34 cms/sec, EDV 8.0 cms/sec) and external carotid artery (PSV 61 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26107320

Courier :

Examination Date : **27-Jun-2023**

Ref. Source : GANNON DAVID, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURN

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26658512] :

Right Side:

Mild wall calcification seen in the common carotid artery, Irregular , heterogeneous plaque seen in carotid bulb and proximal internal carotid artery and external carotid artery.

Normal Doppler signals in the common carotid artery (PSV 97 cm/sec, EDV 21 cm/sec) , internal carotid artery (PSV 100 cms/sec,EDV 21 cms/sec) and external carotid artery (PSV 137 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall thickening with calcification seen in the common carotid artery. Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery and external Carotid artery.

Normal Doppler signals in the common carotid artery (PSV 113 cm/sec, EDV 23 cm/sec) , internal carotid artery (PSV 70 cms/sec,EDV 14 cms/sec) and external carotid artery (PSV 97 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra- cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26107218

Courier :

Examination Date : **27-Jun-2023**

Ref. Source : NGEH JKT, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER R

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26658660] :

Right Side:

Small amount of heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 53 cm/sec, EDV 8.0 cm/sec) , internal carotid artery (PSV 40 cms/sec, EDV 9.0 cms/sec) and external carotid artery (PSV 50 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Small amount of heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 58 cm/sec, EDV 10 cm/sec) , internal carotid artery (PSV 41 cms/sec, EDV 8.0 cms/sec) and external carotid artery (PSV 45 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26107348

Courier :

Examination Date : **26-Jun-2023**

Ref. Source : TOH VIVIEN KAH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURI

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26658607] :

Right Side:

Small amount of Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 66 cm/sec, EDV 16 cm/sec) , internal carotid artery (PSV 41 cms/sec, EDV 13 cms/sec) and external carotid artery (PSV 63 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Small amount of Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 68 cm/sec, EDV 15 cm/sec) , internal carotid artery (PSV 57 cms/sec, EDV 18 cms/sec) and external carotid artery (PSV 87 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26107302

Courier :

Examination Date : **26-Jun-2023**

Ref. Source : TATARANU A, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26638632] :

There is some irregular heterogenous plaques seen in the carotid bifurcations extended in the proximal ICA.

CCA, ICA and ECA is patent in both right and left sides, demonstrated normal doppler signals and velocities.

Patent vertebral arteries, normal antegrade doppler signals seen.

There is no sonographic evidence of any significant extracranial Carotid disease.

Event Number : E-26089387

Courier :

Examination Date : **08-Jun-2023**

Ref. Source : RAMACHANDRAN SIVAKUMAR, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HC

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26641869] :

Right Side:

Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery. Normal Doppler signals in the common carotid artery (PSV 55 cm/sec, EDV 5.0 cm/sec) , internal carotid artery (PSV 46 cms/sec, EDV 7.0 cms/sec) and external carotid artery (PSV 67 cm/sec) with no significant flow disturbance. Patent vertebral artery with antegrade flow.

Left Side:

Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery. Normal Doppler signals in the common carotid artery (PSV 55 cm/sec, EDV 8.0 cm/sec) , internal carotid artery (PSV 41 cms/sec, EDV 8.0 cms/sec) and external carotid artery (PSV 71 cm/sec) with no significant flow disturbance. Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.
Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26092322

Courier :

Examination Date : **08-Jun-2023**

Ref. Source : TOH VIVIEN KAH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURF

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26625810] :

Right Side:

Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery. Normal Doppler signals in the common carotid artery (PSV 45 cm/sec, EDV 2.0 cm/sec) , internal carotid artery (PSV 50 cms/sec, EDV 8.0 cms/sec) and external carotid artery (PSV 52 cm/sec) with no significant flow disturbance. Patent vertebral artery with antegrade flow.

Left Side:

Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery. Normal Doppler signals in the common carotid artery (PSV 55 cm/sec, EDV 6.0 cm/sec) , internal carotid artery (PSV 46 cms/sec, EDV 6.0 cms/sec) and external carotid artery (PSV 66 cm/sec) with no significant flow disturbance. Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26077886

Courier :

Examination Date : **08-Jun-2023**

Ref. Source : PARISIADOU, ANNA, CLACTON AND DISTRICT HOSPITAL, CLACTON AND DISTRICT HOSPITAL, T

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26625809] :

Right Side:

Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery. Normal Doppler signals in the common carotid artery (PSV 110 cm/sec, EDV 28 cm/sec), internal carotid artery (PSV 73 cms/sec, EDV 28 cms/sec) and external carotid artery (PSV 87 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery. Normal Doppler signals in the common carotid artery (PSV 92 cm/sec, EDV 31 cm/sec), internal carotid artery (PSV 81 cms/sec, EDV 24 cms/sec) and external carotid artery (PSV 68 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26077885

Courier :

Examination Date : **08-Jun-2023**

Ref. Source : TANG KH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER RO

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26635433] :

Right Side:

Irregular, heterogeneous plaque, predominantly calcified seen in carotid bulb and proximal internal carotid artery causing >50% luminal reduction of the proximal ICA which is not associated with any enhanced velocities. Proximal common carotid artery appears to be small calibre and tortuous which is not associated with any enhanced velocities. Normal Doppler signals in the common carotid artery (PSV 49 cm/sec, EDV 32 cm/sec) , internal carotid artery (PSV 74 cms/sec, EDV 14 cms/sec) and external carotid artery (PSV 124 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Normal Doppler signals in the common carotid artery (PSV 71 cm/sec, EDV 10 cm/sec) , internal carotid artery (PSV 51 cms/sec, EDV 9.0 cms/sec) and external carotid artery (PSV 70 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: There is >50% luminal reduction seen of the proximal ICA, however not flow limiting as mentioned above. please consider another modality of imaging if clinically indicated.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26086518

Courier :

Examination Date : **06-Jun-2023**

Ref. Source : NGEH JKT, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER ROAD

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26625702] :

Right Side:

Small amount of heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 54 cm/sec, EDV 13 cm/sec) , internal carotid artery (PSV 58 cms/sec, EDV 8.0 cms/sec) and external carotid artery (PSV 73 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Small amount of heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 59 cm/sec, EDV 10 cm/sec) , internal carotid artery (PSV 51 cms/sec, EDV 11 cms/sec) and external carotid artery (PSV 88 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26077781

Courier :

Examination Date : **05-Jun-2023**

Ref. Source : BANSAL VIVEK, PRIMARY CARE CENTRE, PRIMARY CARE CENTRE, TURNER ROAD, COLCHESTER

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26635430] :

Right Side:

Normal Doppler signals in the common carotid artery (PSV 62 cm/sec, EDV 9.0 cm/sec) , internal carotid artery (PSV 55 cms/sec, EDV 14 cms/sec) and external carotid artery (PSV 113 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Normal Doppler signals in the common carotid artery (PSV 93 cm/sec, EDV 16 cm/sec) , internal carotid artery (PSV 68 cms/sec, EDV 18 cms/sec) and external carotid artery (PSV 107 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26086515

Courier :

Examination Date : **05-Jun-2023**

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26633223] :

Right Side:

Mild wall thickening seen in the common carotid artery. Heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 80 cm/sec, EDV 29 cm/sec) , internal carotid artery (PSV 76 cms/sec, EDV 14 cms/sec) and external carotid artery (PSV 112 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall thickening seen in the common carotid artery. Heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 80 cm/sec, EDV 19 cm/sec) , internal carotid artery (PSV 64 cms/sec, EDV 20 cms/sec)

Velocities in the external carotid artery is enhanced (PSV 180 cm/sec) with flow disturbance, VR >2 which is in keeping with 50-69% stenosis.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: There is 50-69% stenosis of the the proximal ECA.

NASCET method used for velocity criteria.

Event Number : E-26084546

Courier :

Examination Date : **05-Jun-2023**

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26698420] :

Right Side:

Mild wall calcification seen in the common carotid artery. Small amount of heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 61 cm/sec, EDV 13 cm/sec) , internal carotid artery (PSV 60 cms/sec, EDV 17 cms/sec) and external carotid artery (PSV 82 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall calcification seen in the common carotid artery. Small amount of heterogeneous plaque seen in carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 74 cm/sec, EDV 11 cm/sec) , internal carotid artery (PSV 40 cms/sec, EDV 9.0 cms/sec) and external carotid artery (PSV 94 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26143167

Courier :

Examination Date : **04-Sep-2023**

Ref. Source : MAMMEN REGINA GHEVARGHESE, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERA

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26720774] :

Right Side:

Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery. Normal Doppler signals in the common carotid artery (PSV 35 cm/sec, EDV 5.0 cm/sec) , internal carotid artery (PSV 67 cms/sec, EDV 17 cms/sec) and external carotid artery (PSV 66 cm/sec) with no significant flow disturbance.
Patent vertebral artery with antegrade flow.

Left Side:

Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery. Normal Doppler signals in the common carotid artery (PSV 34 cm/sec, EDV 5.0 cm/sec) , internal carotid artery (PSV 70 cms/sec, EDV 19 cms/sec) and external carotid artery (PSV 80 cm/sec) with no significant flow disturbance.
Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26163386

Courier :

Examination Date : **04-Sep-2023**

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26723763] :

Right Side:

Mild wall thickening seen in the common carotid artery and carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 81 cm/sec, EDV 6.0 cm/sec) , internal carotid artery (PSV 62 cms/sec, EDV 12 cms/sec) and external carotid artery (PSV 67 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Mild wall thickening seen in the common carotid artery and carotid bulb and proximal internal carotid artery.

Normal Doppler signals in the common carotid artery (PSV 118 cm/sec, EDV 7.0 cm/sec) , internal carotid artery (PSV 108 cms/sec, EDV 20 cms/sec) and external carotid artery (PSV 92 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26166058

Courier :

Examination Date : **04-Sep-2023**

Ref. Source : SAKSENA RAJESH, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TU

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26723586] :

Right Side:

Normal Doppler signals in the common carotid artery (PSV 71 cm/sec, EDV 15 cm/sec) , internal carotid artery (PSV 54 cms/sec, EDV 37 cms/sec) and external carotid artery (PSV 76 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Left Side:

Normal Doppler signals in the common carotid artery (PSV 69 cm/sec, EDV 11 cm/sec) , internal carotid artery (PSV 47 cms/sec, EDV 17 cms/sec) and external carotid artery (PSV 90 cm/sec) with no significant flow disturbance.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: No evidence of any significant extra-cranial carotid disease.

Left Side: No evidence of any significant extra-cranial carotid disease.

NASCET method used for velocity criteria.

Event Number : E-26165900

Courier :

Examination Date : **04-Sep-2023**

Ref. Source : Amer Esam, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER R

Examinations : **US Doppler carotid artery Both**

US Doppler carotid artery Both [RDE26635004] :

Right Side:

Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery. Normal Doppler signals in the common carotid artery (PSV 61 cm/sec, EDV 13 cm/sec) and external carotid artery (PSV 107 cm/sec) with no significant flow disturbance.

Velocities in the internal carotid artery is enhanced (PSV 156 cms/sec, EDV 28 cms/sec), VR 2.5 which is in keeping with 50-69% stenosis, length of the disease measures ~ 2.0 cm of the proximal ICA.

Patent vertebral artery with antegrade flow.

Left Side:

Irregular, heterogeneous plaque seen in carotid bulb and proximal internal carotid artery which is suboptimally assessed due to acoustic shadowing.

Normal Doppler signals in the common carotid artery (PSV 69 cm/sec, EDV 11 cm/sec) and external carotid artery (PSV 76 cm/sec) with no significant flow disturbance.

Velocities in the internal carotid artery is enhanced (PSV 177 cms/sec, EDV 34 cms/sec), VR 2.6 which is in keeping with 50-69% stenosis, length of the disease measures ~ 2.0 cm of the proximal ICA.

Patent vertebral artery with antegrade flow.

Summary / Diagnosis:

Right Side: There is 50-69% stenosis of the proximal ICA.

Left Side: There is also 50-69% stenosis or more of the proximal ICA.

***** URGENT *****

The above report contains URGENT clinical findings which are either unexpected based on the clinical information provided on the request or which have not already been documented based on the available radiological history. This report must be urgently highlighted to a SENIOR CLINICIAN for appropriate further management.

Event Number : E-26086135

Courier :

Examination Date : **06-Jun-2023**

Ref. Source : NGEH JKT, COLCHESTER GENERAL HOSPITAL, COLCHESTER GENERAL HOSPITAL, TURNER R

Examinations : **US Doppler carotid artery Both**