

Incompetent anterior thigh vein arising from the SFJ, is linear to the mid thigh (58cm) where it becomes superficial and tortuous, tracking on the anterior aspect of the thigh and knee.

Transverse (AP) dimensions
Proximal thigh - 0.99cm,
Mid thigh - 0.58cm,

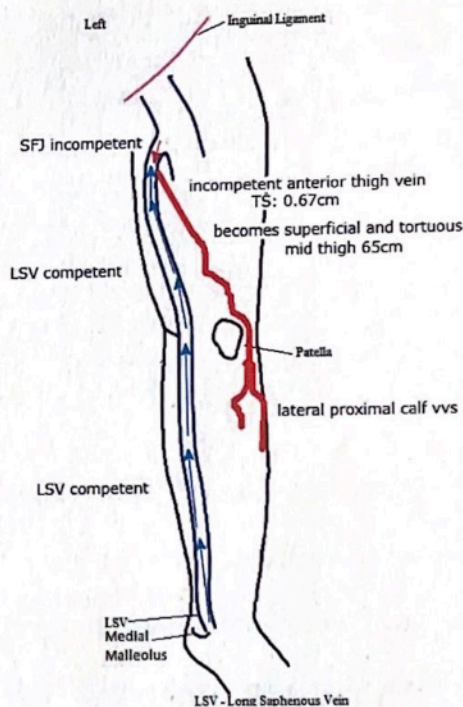
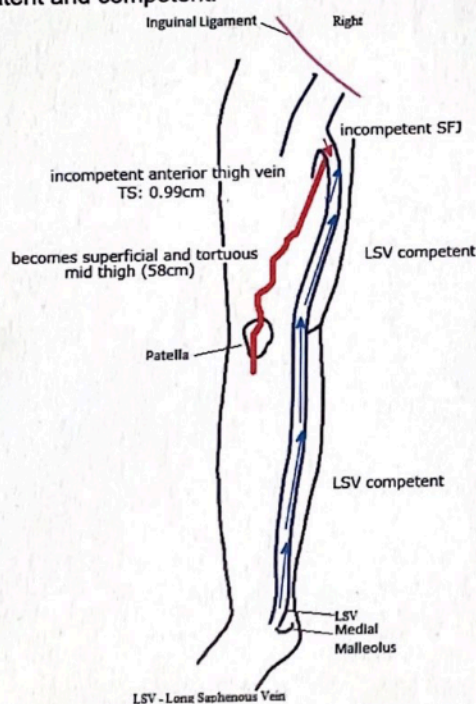
Sapheno-popliteal junction (SPJ) is widely patent and competent. Short Saphenous vein (SSV) is widely patent and competent.

LEFT

Sapheno-femoral junction (SFJ) is widely patent and incompetent. Long Saphenous vein (LSV) is widely patent, competent and linear in the thigh and calf.
Incompetent anterior thigh vein arising from the SFJ, is linear to the mid thigh (65cm) where it becomes superficial and tortuous, tracking on the anterior thigh and laterally over the knee, forming varicosities in the proximal lateral calf.

Transverse (AP) dimensions
Proximal thigh - 1.44cm,
Mid thigh - 0.67cm,

Sapheno-popliteal junction (SPJ) is widely patent and competent. Short Saphenous vein (SSV) is widely patent and competent.



Assessed by Charlotte Roberts, MCVS

Printed on 10/07/2024 at 12:54 pm

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Please note, this is a technical report to be interpreted by a medical professional. If you are a patient reading the report and require further help, please discuss the report with the person who referred you for the examination.

Reason Varicose vein
Outcome DVT negative, Incompetence - superficial

	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein			Widely Patent	Competent
Profunda Vein			Widely Patent	Competent
Superficial Femoral Vein			Widely Patent	Competent
Popliteal Vein			Widely Patent	Competent
Posterior Tibial Vein			Widely Patent	Competent
Anterior Tibial Vein			Widely Patent	Competent
Peroneal Vein			Widely Patent	Competent
Soleal Vein			Widely Patent	
Gastrocnemius			Widely Patent	
Superficial Veins				
Saphenofemoral Junction			Widely Patent	Incompetent
L Saphenous Vein Above			Widely Patent	Isolated Incompetence
L Saphenous Vein Below			Widely Patent	Competent
Vein of Giacomini			Not Identified	
Saphenopopliteal Junction			Widely Patent	Competent
S Saphenous Vein			Widely Patent	Competent
Evidence of D.V.T.				
Above the knee			No	
Popliteal			No	
Below the knee			No	

Notes

LEFT LOWER LIMB VENOUS DUPLEX ASSESSMENT

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and a normal response on Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear widely 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 widely patent and incompetent. Long Saphenous vein (LSV) is widely patent, incompetent and linear in the thigh. Incompetent branch noted in the mid thigh (64cm) forming anterior thigh and shin varicosities. A further incompetent branch noted in the mid thigh (59cm) forms

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medial thigh and calf varicosities. The LSV appears widely patent and competent distal to this branch to the ankle.

Transverse (AP) dimensions of LSV:

Proximal thigh - 0.64cm,

Mid thigh - 0.62cm,

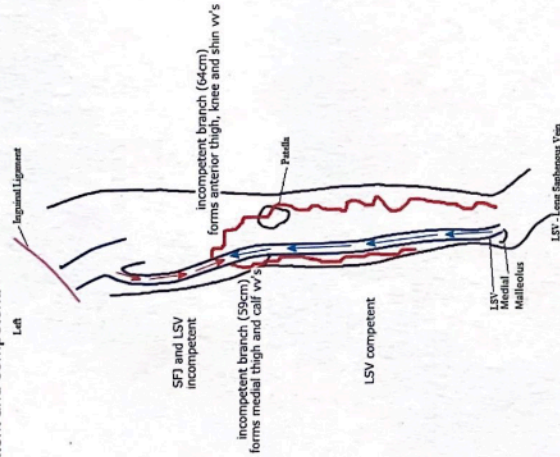
Distal thigh - 0.58cm,

Proximal calf - 0.23cm,

Mid calf - 0.30cm,

Distal calf - 0.22cm.

Sapheno-popliteal junction (SPJ) is widely patent and competent. Short Saphenous vein (SSV) is widely patent and competent.



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Varicose vein post-op, Varicose vein

DVT negative, Oedema, Poor images, Venous scarring, Incompetence - superficial

Outcome

	Right		Left	
	Patency	Competency	Patency	Competency
Deep Veins				
Common Iliac Vein	Widely Patent	Competent	Widely Patent	Competent
External Iliac Vein	Widely Patent	Competent	Widely Patent	Competent
Internal Iliac Vein	Widely Patent	Competent	Widely Patent	Competent
Common Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Profunda Vein	Widely Patent	Competent	Widely Patent	Competent
Superficial Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Popliteal Vein	Patent		Patent	
Posterior Tibial Vein	Patent		Patent	
Anterior Tibial Vein	Patent		Patent	
Peroneal Vein	Patent		Patent	
Soleal Vein	Patent		Patent	
Gastrocnemius	Patent		Patent	
Superficial Veins				
Saphenofemoral Junction	Widely Patent	Incompetent	Widely Patent	Incompetent
L Saphenous Vein Above	Widely Patent	Incompetent	Areas of Thrombus	Venous scarring
L Saphenous Vein Below	See notes		Widely Patent	Incompetent
Vein of Glacromini	Not Identified		Not Identified	
Saphenopopliteal Junction	Widely Patent	Competent	Widely Patent	Competent
S Saphenous Vein	Widely Patent	Competent	Widely Patent	Competent
Evidence of D.V.T.				
Above the knee	No		No	
Popliteal	No		No	
Below the knee	No		No	

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

Iliac veins not viewed bilaterally. Flow in the common femoral vein is phasic with respiration and a normal response on Valsalva manoeuvre, suggesting proximal vein patency bilaterally. All visualised deep veins proximal to and including the popliteal vein appear widely patent and competent with no evidence of previous DVT bilaterally. Calf veins were difficult to visualise due to depth, oedema and swelling but appear patent at this time bilaterally.

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

RIGHT

Assessed by

Charlotte Roberts, MCVS

Printed on 10/07/2024 at 12:49 pm

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Please note, this is a technical report to be interpreted by a medical professional. If you are a patient reading the report and require further help, please discuss the report with the person who referred you for the examination.

Sapheno-femoral junction (SFJ) is widely patent and incompetent. Long Saphenous vein (LSV) is widely patent, incompetent and linear in the proximal thigh for ~13cm. The LSV then leaves the fascia and becomes tortuous in the proximal thigh (67cm) with multiple small incompetent branches forming medial mid thigh varicosities. The LSV returns to the fascia in the distal thigh (53cm) and is incompetent and tortuous with venous scarring (?due to previous treatment) with multiple small incompetent varicose branches forming distal medial thigh and medial calf varicosities. The LSV was not identified in the proximal calf (?due to previous treatment). The LSV was then identified in the mid calf (20cm) with areas of venous scarring however appears to remain competent to the ankle.

Transverse (AP) dimensions of LSV:

Proximal thigh - 0.59cm,
Mid thigh - 0.55cm,
Distal thigh - 0.53cm.
Proximal calf - not identified,
Mid calf - 0.48cm,
Distal calf - 0.57cm.

Sapheno-popliteal junction (SPJ) is widely patent and competent. Short Saphenous vein (SSV) is widely patent and competent.

LEFT

Sapheno-femoral junction (SFJ) is widely patent and incompetent. There are two LSV branches arising from the SFJ, one is linear and competent and one is incompetent and linear in the proximal thigh for ~19cm (65cm) where it leaves the fascia and is tortuous tracking along the medial thigh, with areas of venous scarring identified. The LSV branches join at the knee crease, where the LSV remains incompetent and tortuous to the mid calf (20cm), where it returns to the fascia. An incompetent branch leaves the LSV in the distal calf (17cm) forming medial and anterior calf varicosities. The LSV is then competent to the ankle.

Transverse (AP) dimensions of LSV:

Proximal thigh - 0.95cm,
Mid thigh - 0.98cm,
Distal thigh - 0.74cm.
Proximal calf - 0.90,
Mid calf - 0.77cm,
Distal calf - 0.42cm.

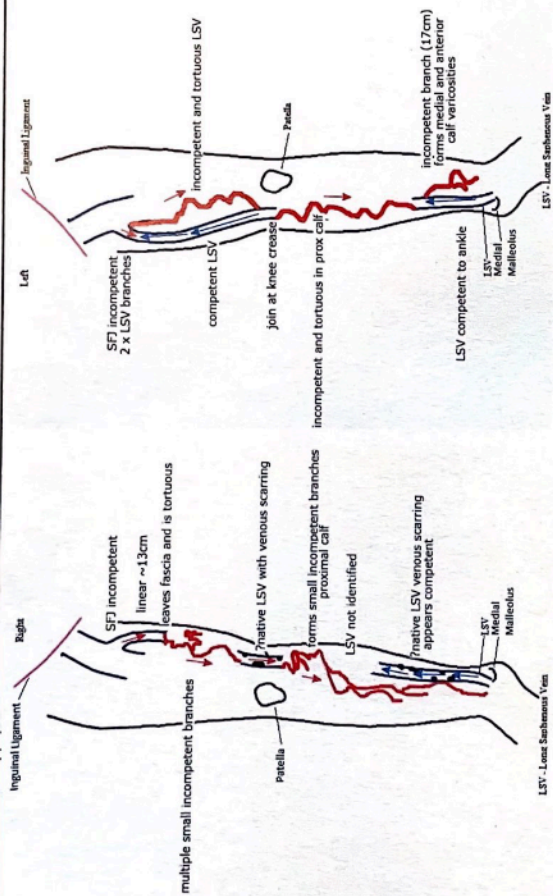
Sapheno-popliteal junction (SPJ) is widely patent and competent. Short Saphenous vein (SSV) is widely patent and competent.

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Reason
Outcome

Varicose vein
DVT negative, Widely patent, Incompetence - superficial

	Right		Left	
	Patency	Competency	Patency	Competency
Deep Veins				
Common Iliac Vein	Widely Patent	Competent	Widely Patent	Competent
External Iliac Vein	Widely Patent	Competent	Widely Patent	Competent
Internal Iliac Vein	Widely Patent	Competent	Widely Patent	Competent
Common Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Profunda Vein	Widely Patent	Competent	Widely Patent	Competent
Superficial Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Popliteal Vein	Widely Patent	Competent	Widely Patent	Competent
Posterior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
Anterior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
Peroneal Vein	Widely Patent	Competent	Widely Patent	Competent
Soleal Vein	Widely Patent	Competent	Widely Patent	Competent
Gastrocnemius	Widely Patent	Competent	Widely Patent	Competent

Superficial Veins				
Saphenofemoral Junction	Widely Patent	Competent	Widely Patent	Incompetent
L Saphenous Vein Above	Widely Patent	Isolated Incompetence	Widely Patent	Incompetent
L Saphenous Vein Below	Widely Patent	Competent	Widely Patent	Isolated Incompetence
Vein of Giacomini	Not Identified		Not Identified	
Saphenopopliteal Junction	Widely Patent	Incompetent	Widely Patent	Competent
S Saphenous Vein	Widely Patent	Incompetent	Widely Patent	Competent

Evidence of D.V.T.

Above the knee

Popliteal

Below the knee

No
No
No

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

Iliac veins not viewed bilaterally. Flow in the common femoral vein is phasic with respiration and a normal response on Valsalva manoeuvre, suggesting proximal vein patency bilaterally. All visualised deep veins appear widely patent and competent with no evidence of previous DVT bilaterally.

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

RIGHT

Sapheno-femoral junction (SFJ) is widely patent and competent. Long Saphenous vein (LSV) is widely patent, competent and linear in the proximal to mid thigh. Small incompetent branch identified in the mid

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Charlotte Roberts, MCVS

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thigh (58cm) and tracks distally and peters out in the proximal calf. The LSV is incompetent distal to this branch to the distal thigh (45cm) to a competent perforator. The LSV is then competent to the ankle.

Transverse (AP) dimensions of LSV:

Proximal thigh - 0.26cm,
Mid thigh - 0.23cm,
Distal thigh - 0.27cm,
Proximal calf - 0.20cm,
Mid calf - 0.22cm,
Distal calf - 0.26cm.

Sapheno-popliteal junction (SPJ) is widely patent and incompetent. Short Saphenous vein (SSV) is widely patent and incompetent.

Transverse (AP) dimensions of SSV:

Proximal calf - 0.69cm,
Mid calf - 0.63cm,
Distal calf - 0.57cm.

LEFT

Sapheno-femoral junction (SFJ) is widely patent and incompetent. Long Saphenous vein (LSV) is widely patent, incompetent and linear in the thigh. A small, incompetent branch leaves the LSV at the very proximal thigh, just distal to the groin crease (73cm), and tracks medially along the thigh forming distal posterior thigh and proximal posterior and medial calf varicosities. Incompetent branch noted in the proximal calf (32cm) forming medial proximal calf varicosities. The LSV appears competent distal to this branch to the ankle.

Transverse (AP) dimensions of LSV:

Proximal thigh - 0.37cm,
Mid thigh - 0.34cm,
Distal thigh - 0.41cm,
Proximal calf - 0.22cm,
Mid calf - 0.08cm,
Distal calf - 0.20cm.

Sapheno-popliteal junction (SPJ) is widely patent and competent. Short Saphenous vein (SSV) is widely patent and competent.

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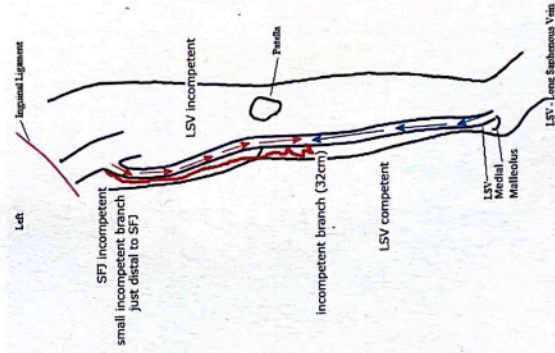
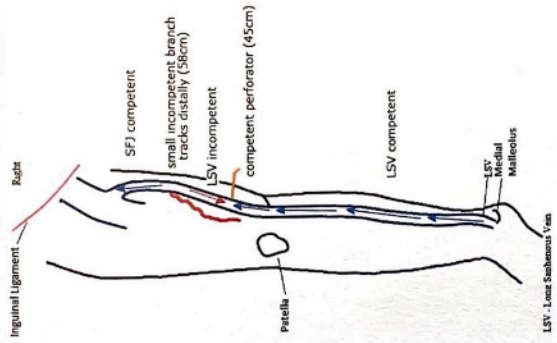
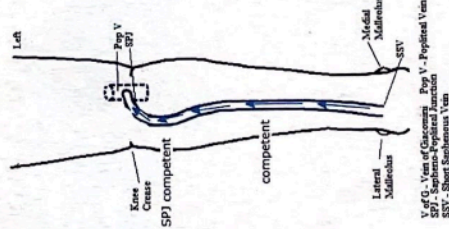
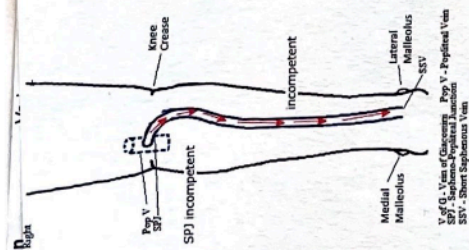
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Reason



Assessed by Charlotte Roberts, MCVS

Printed on 10/07/2024 at 12:50 pm

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Reason Varicose vein

Outcome DVT negative, Superficial thrombophlebitis, Incompetence - superficial

	Right		Left	
	Patency	Competency	Patency	Competency
Deep Veins				
Common Iliac Vein			Widely Patent	Competent
External Iliac Vein			Widely Patent	Competent
Internal Iliac Vein			Widely Patent	Competent
Common Femoral Vein			Widely Patent	Competent
Profunda Vein			Widely Patent	Competent
Superficial Femoral Vein			Widely Patent	Competent
Popliteal Vein			Widely Patent	Competent
Posterior Tibial Vein			Widely Patent	Competent
Anterior Tibial Vein			Widely Patent	Competent
Peroneal Vein			Widely Patent	Competent
Soleal Vein			Widely Patent	Competent
Gastrocnemius			Widely Patent	Competent

Superficial Veins				
Saphenofemoral Junction			Widely Patent	Incompetent
L Saphenous Vein Above			Widely Patent	Incompetent
L Saphenous Vein Below			Widely Patent	Isolated Incompetence
Vein of Giacomini			Not Identified	
Saphenopopliteal Junction			Widely Patent	Competent
S Saphenous Vein			Widely Patent	Competent

Evidence of D.V.T.

Above the knee

Popliteal

Below the knee

No
No
No

Notes

LEFT LOWER LIMB VENOUS DUPLEX ASSESSMENT

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and a normal response on Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear widely 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 widely patent and incompetent. Long Saphenous vein (LSV) is widely patent, incompetent and linear in the proximal to mid thigh. Fresh/mixed occlusive and non-occlusive superficial thrombophlebitis identified in the distal thigh and proximal calf LSV and associated varicosities in

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the proximal-mid medial calf.
 Incompetent branch arising from the LSV noted in the proximal calf (32cm), forming the medial calf varicosities, with fresh/mixed occlusive and non-occlusive superficial thrombophlebitis, tracking posteriorly and communicating with the mid SSV (18cm). The LSV remains incompetent to the mid calf. Incompetent branch arising from the LSV noted at the mid calf (15cm) forming medial and anterior calf varicosities. The LSV is then competent to the ankle.

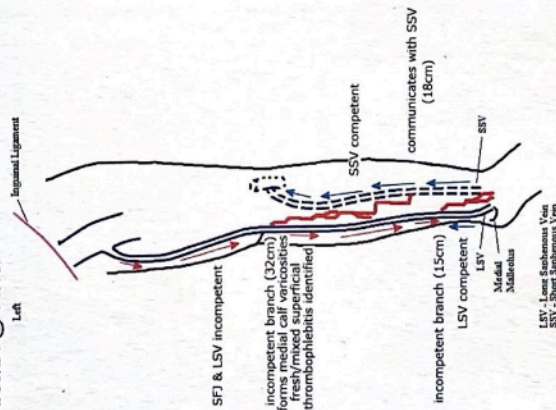
Transverse (AP) dimensions of LSV:

Proximal thigh - 0.62cm,
 Mid thigh - 0.53cm,
 Distal thigh - 0.64cm.
 Proximal calf - 0.53cm,
 Mid calf - 0.28cm,
 Distal calf - 0.37cm.

Sapheno-popliteal junction (SPJ) is widely patent and competent. Short Saphenous vein (SSV) is widely patent and competent.

Additional notes:

Fresh/mixed occlusive and non-occlusive superficial thrombophlebitis identified in the LSV from this distal thigh to the proximal calf, and associated varicose branches in the medial proximal-mid calf, and is in close proximity to a perforator in the calf, at risk of propagation into the deep system. Patient referred to SDEC 14/05/24 @ 14:10.



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Reason Varicose vein
Outcome Widely patent , Incompetence - deep, Incompetence - superficial

	Right		Left	
	Patency	Competency	Patency	Competency
Deep Veins				
Common Iliac Vein	Widely Patent	Incompetent	Widely Patent	Slight Incompetence
External Iliac Vein	Widely Patent	Competent	Widely Patent	Competent
Internal Iliac Vein	Widely Patent	Competent	Widely Patent	Competent
Common Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Profunda Vein	Widely Patent	Competent	Widely Patent	Competent
Superficial Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Popliteal Vein	Widely Patent	Competent	Widely Patent	Competent
Posterior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
Anterior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
Peroneal Vein	Widely Patent	Competent	Widely Patent	Competent
Soleal Vein	Widely Patent		Widely Patent	Competent
Gastrocnemius	Widely Patent		Widely Patent	

Superficial Veins				
Saphenofemoral Junction	Widely Patent	Incompetent	Widely Patent	Incompetent
L Saphenous Vein Above	Widely Patent	Isolated Incompetence	Widely Patent	Incompetent
L Saphenous Vein Below	Widely Patent	Isolated Incompetence	Widely Patent	Isolated Incompetence
Vein of Glascorn	Not Identified		Not Identified	
Saphenopopliteal Junction	Widely Patent	Competent	Widely Patent	Competent
S Saphenous Vein	Widely Patent	Competent	Widely Patent	Competent

Evidence of D.V.T.

Above the knee

Popliteal

Below the knee

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

Iliac veins not viewed bilaterally. Flow in the common femoral vein is phasic with respiration and a normal response on Valsalva manoeuvre, suggesting proximal vein patency bilaterally. The right common femoral vein is widely patent and incompetent. The left common femoral vein is widely patent and slightly incompetent. All visualised deep veins appear widely patent and competent with no evidence of previous DVT bilaterally.

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

RIGHT

Assessed by Charlotte Roberts, MCVS

Printed on 10/07/2024 at 1:02 pm

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Sapheno-femoral junction (SFJ) is widely patent and incompetent. Long Saphenous vein (LSV) is widely patent, incompetent and linear to the mid thigh for a length ~16cm. Incompetent, tortuous branch noted in the mid thigh (53cm), the LSV is then competent. The incompetent branch tracks medially along the thigh, rejoining the LSV at the knee crease (31cm). The LSV is then incompetent from the knee crease to the mid calf. Incompetent branches noted at 23cm, 20cm, and 17cm, forming medial calf varicosities. The LSV appears competent distally.

Incompetent perforator to medial calf varicosities noted at 10cm.

Transverse (AP) dimensions of LSV:

Proximal thigh - 0.94cm,

Mid thigh - 0.60cm,

Distal thigh - 0.31cm.

Proximal calf - 0.73cm,

Mid calf - 0.36cm,

Distal calf - 0.34cm.

Sapheno-popliteal junction (SPJ) is widely patent and competent. Short Saphenous vein (SSV) is widely patent and competent.

LEFT

Sapheno-femoral junction (SFJ) is widely patent and incompetent. Long Saphenous vein (LSV) is widely patent, incompetent and linear along the length of the thigh. An incompetent branch noted in the mid thigh (47cm). The LSV is incompetent to the mid calf (21cm). Incompetent branches noted at 32cm and 21cm, forming medial calf varicosities. The LSV appears competent distally.

Incompetent perforator to medial calf varicosities noted at 16cm.

Transverse (AP) dimensions of LSV:

Proximal thigh - 1.08cm,

Mid thigh - 0.70cm,

Distal thigh - focal dilation 1.52cm, 0.73cm.

Proximal calf - 0.60cm,

Mid calf - 0.27cm,

Distal calf - 0.29cm.

Sapheno-popliteal junction (SPJ) is widely patent and competent. Short Saphenous vein (SSV) is widely patent and competent.

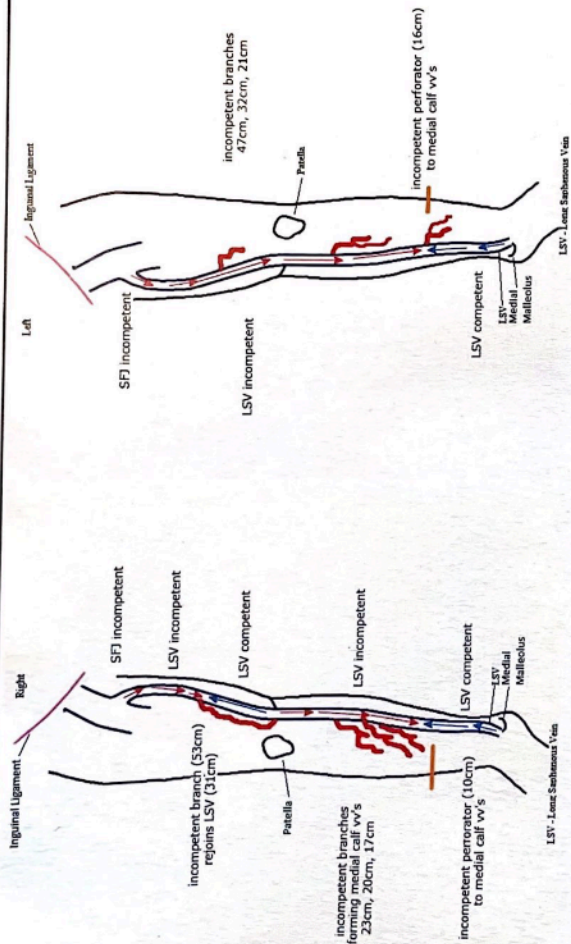
Patient pointed me to an area on the left proximal lateral calf, small ?incompetent veins noted, unable to trace due to small calibre of vessels.

Assessed by Charlotte Roberts, MCVS

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Reason	Varicose vein
Outcome	Widely patent , Incompetence - superficial
Deep Veins	Right
Common Iliac Vein	Patency
External Iliac Vein	Competency
Internal Iliac Vein	Patency
Common Femoral Vein	Competency
Profunda Vein	Patency
Superficial Femoral Vein	Competency
Popliteal Vein	Patency
Posterior Tibial Vein	Competency
Anterior Tibial Vein	Patency
Peroneal Vein	Competency
Soleal Vein	Patency
Gastrocnemius	Competency
Superficial Veins	Left
Saphenofemoral Junction	Patency
L Saphenous Vein Above	Competency
L Saphenous Vein Below	Patency
Vein of Giacomini	Competency
Saphenopopliteal Junction	Patency
S Saphenous Vein	Competency
Evidence of D.V.T.	Right
Above the knee	Patency
Popliteal	Competency
Below the knee	Patency

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

Iliac veins not viewed bilaterally. Flow in the common femoral vein is phasic with respiration and a normal response on Valsalva manoeuvre, suggesting proximal vein patency bilaterally. All visualised deep veins appear widely patent and competent with no evidence of previous DVT bilaterally.

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

RIGHT

Sapheno-femoral junction (SFJ) is widely patent and competent. Long Saphenous vein (LSV) was noted to be widely patent and linear in the thigh, and becomes incompetent at the groin ?due to communication with

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small incompetent branches noted in groin. Incompetent branch noted just above knee crease (40cm), forming medial calf varicosities. LSV then appears competent to the mid calf (32cm). Incompetent branches noted in the mid calf (32cm and 19cm) forming medial calf varicosities. The LSV then appears competent to the ankle.

Transverse (AP) dimensions of LSV:

Proximal thigh - 0.54cm,
Mid thigh - 0.54cm,
Distal thigh - 0.56cm,
Proximal calf - 0.39cm,
Mid calf - 0.48cm,
Distal calf - 0.32cm.

Sapheno-popliteal junction (SPJ) is widely patent and competent. Short Saphenous vein (SSV) is widely patent and competent.

LEFT

Sapheno-femoral junction (SFJ) is widely patent and competent. Long Saphenous vein (LSV) was noted to be widely patent and linear in the thigh, becoming incompetent ~3cm distal to the junction (due to incompetent valve site). The LSV becomes superficial to the fascia and tortuous in the proximal-mid calf, returning the fascia in the mid calf and remains incompetent to the ankle. Incompetent branch noted in the proximal and mid calf (28cm and 19cm), forming medial calf varicosities.

Transverse (AP) dimensions of LSV:

Proximal thigh - 0.53cm,
Mid thigh - 0.45cm,
Distal thigh - 0.46cm,
Proximal calf - 0.57cm,
Mid calf - 0.36cm,
Distal calf - 0.45cm.

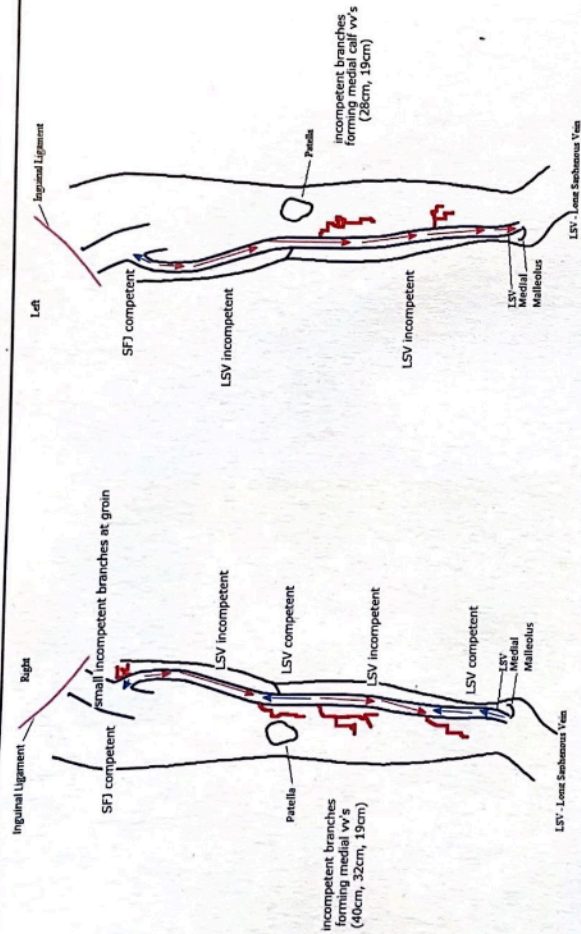
Sapheno-popliteal junction (SPJ) is widely patent and competent. Short Saphenous vein (SSV) is widely patent and competent.

Assessed by Charlotte Roberts, MCVS

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Reason Varicose vein
Outcome DVT negative, Incompetence - deep, Incompetence - superficial

Right		Left	
Deep Veins	Patency	Competency	Competency
Common Iliac Vein	Widely Patent	Incompetent	
External Iliac Vein	Widely Patent	Competent	
Internal Iliac Vein	Widely Patent	Competent	
Common Femoral Vein	Widely Patent	Competent	
Profunda Vein	Widely Patent	Competent	
Superficial Femoral Vein	Widely Patent	Competent	
Popliteal Vein	Widely Patent	Competent	
Posterior Tibial Vein	Widely Patent	Competent	
Anterior Tibial Vein	Widely Patent	Competent	
Peroneal Vein	Widely Patent	Competent	
Soleal Vein	Widely Patent	Competent	
Gastrocnemius	Widely Patent		
Superficial Veins			
Saphenofemoral Junction	Widely Patent	Incompetent	
L Saphenous Vein Above	Widely Patent	Incompetent	
L Saphenous Vein Below	Widely Patent	Isolated Incompetence	
Vein of Giacomini	Not Identified		
Saphenopopliteal Junction	Widely Patent	Competent	
S Saphenous Vein	Widely Patent	Competent	
Evidence of D.V.T.			
Above the knee	No		
Popliteal	No		
Below the knee	No		

Notes

RIGHT LOWER LIMB VENOUS DUPLEX ASSESSMENT

Iliac veins not viewed. Flow in the common femoral vein is phasic with respiration and a normal response on Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins appear widely 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 widely patent and incompetent. Long Saphenous vein (LSV) is widely patent, incompetent and slightly tortuous in the proximal - mid thigh, but appears suitable for an endovenous approach. Incompetent branch identified in the mid thigh (63cm) forms anterior thigh, knee and shin

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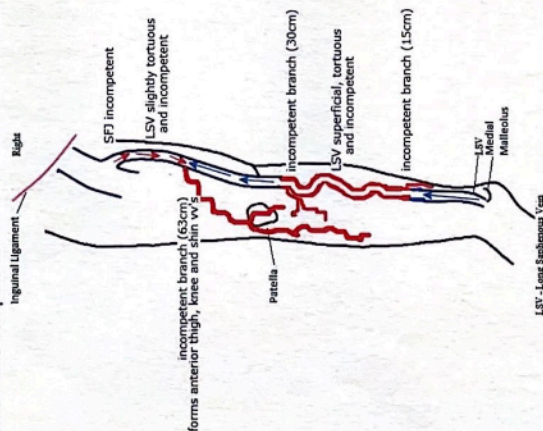
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varicosities. The LSV is then competent to the proximal calf. Incompetent branch noted in the proximal calf (30cm), forming anterior calf varicosities. The LSV is then superficial and tortuous to the distal calf. Incompetent branch noted in the distal calf (15cm), forming medial distal calf varicosities. Distally the LSV is competent to the ankle.

Transverse (AP) dimensions of LSV:

Proximal thigh - 1.16cm,
Mid thigh - 0.85cm, 0.30cm
Distal thigh - 0.30cm.
Proximal calf - 0.53cm,
Mid calf - 0.41cm,
Distal calf - 0.29cm.

Sapheno-popliteal junction (SPJ) is widely patent and competent. Short Saphenous vein (SSV) is widely patent and competent.



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Reason Varicose vein post-op
Outcome DVT negative, Incompetence - superficial

	Right		Left	
	Patency	Competency	Patency	Competency
Deep Veins				
Common Iliac Vein	Widely Patent	Competent	Widely Patent	Competent
External Iliac Vein	Widely Patent	Competent	Widely Patent	Competent
Internal Iliac Vein	Widely Patent	Competent	Widely Patent	Competent
Common Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Profunda Vein	Widely Patent	Competent	Widely Patent	Competent
Superficial Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Popliteal Vein	Widely Patent	Competent	Widely Patent	Competent
Posterior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
Anterior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
Peroneal Vein	Widely Patent	Competent	Widely Patent	Competent
Soleal Vein	Widely Patent		Widely Patent	
Gastrocnemius	Widely Patent		Widely Patent	

Superficial Veins				
Saphenofemoral Junction	Widely Patent	Incompetent	Widely Patent	Competent
L Saphenous Vein Above	Widely Patent	Isolated Incompetence	Not Identified	
L Saphenous Vein Below	Widely Patent	Isolated Incompetence	Widely Patent	Competent
Vein of Giacomini	Widely Patent	Competent	Widely Patent	Competent
Saphenopopliteal Junction	Widely Patent	Competent	Not Identified	
S Saphenous Vein	Widely Patent	Isolated Incompetence	Widely Patent	Competent

Evidence of D.V.T.	No	No
Above the knee	No	No
Popliteal	No	No
Below the knee	No	No

Notes
BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT
*Previous RFA and stripping bilaterally

Iliac veins not viewed bilaterally. Flow in the common femoral vein is phasic with respiration and a normal response on Valsalva manoeuvre, suggesting proximal vein patency bilaterally. All visualised deep veins appear widely patent and competent with no evidence of previous DVT bilaterally.

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

RIGHT
Sapheno-femoral junction (SFJ) is widely patent and incompetent. Long Saphenous vein (LSV) is widely

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patent, incompetent and linear in the proximal to mid thigh. Incompetent branch identified in the mid thigh (65cm) forming medial thigh varicosities. LSV not identified in the mid-distal thigh ? due to previous RFA. ?Native LSV identified in the distal thigh and is incompetent. Multiple small calibre, incompetent branches identified in the proximal calf forming medial calf varicosities. Incompetent branch identified in the mid calf (21cm), forming medial calf varicosities. The LSV is then competent to the ankle.

Transverse (AP) dimensions of LSV:

Proximal thigh - 0.45cm,

Mid-distal thigh - not identified

Proximal calf - 0.31cm,

Mid calf - 0.15cm,

Distal calf - 0.11cm.

Sapheno-popliteal junction (SPJ) is widely patent and competent. Short Saphenous vein (SSV) is widely patent and competent and is continuous with a competent vein of Giacomini. Small calibre, incompetent branches identified in the mid calf (23cm). The SSV is then incompetent to the ankle.

Transverse (AP) dimensions of SSV:

Proximal calf - 0.28cm,

Mid calf - 0.23cm,

Distal calf - 0.31cm.

Incompetent and highly tortuous branch identified from right groin crease, unable to clearly identify source, ?from incompetent junction ?pelvic source, which tracks on the inside of the very proximal thigh posteriorly, to form lateral thigh and calf varicosities.

LEFT

Sapheno-femoral junction (SFJ) is widely patent and competent. Long Saphenous vein (LSV) was not identified in the proximal-distal thigh ? due to previous RFA treatment. Native LSV identified in the distal thigh and appears competent to the ankle.

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

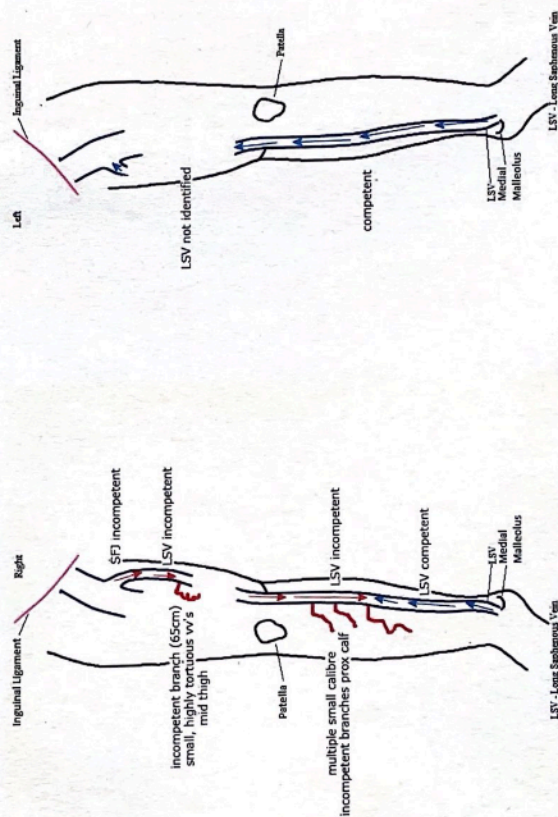
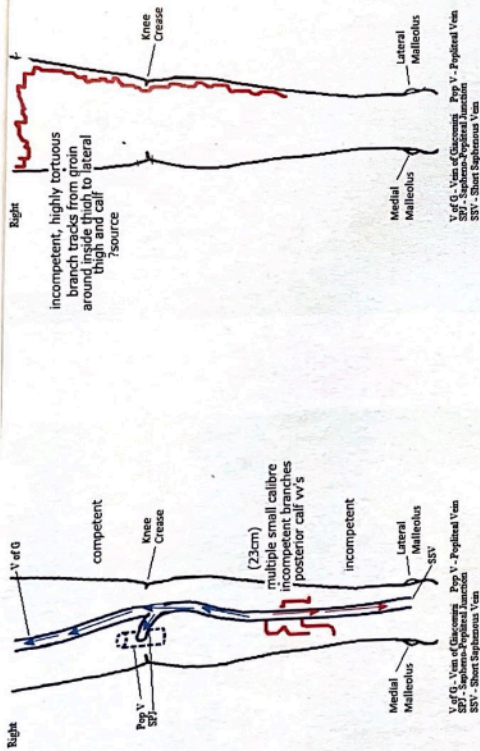
Areas of small calibre, highly tortuous veins noted in the proximal anterior thigh and at the distal lateral thigh ?source.

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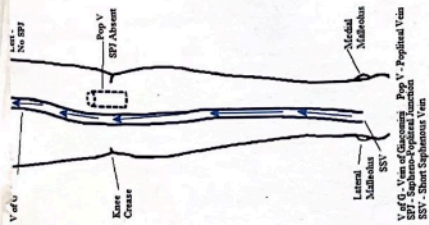


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Reason Varicose vein

Outcome Chronic Superficial thrombophlebitis, Venous scarring, Incompetence - superficial

Right		Left	
Deep Veins	Patency	Competency	Competency
Common Iliac Vein			
External Iliac Vein			
Internal Iliac Vein			
Common Femoral Vein	Widely Patent	Competent	Competent
Profunda Vein	Widely Patent	Competent	Competent
Superficial Femoral Vein	Widely Patent	Competent	Competent
Popliteal Vein	Widely Patent	Competent	Competent
Posterior Tibial Vein	Patent		
Anterior Tibial Vein	Patent		
Peroneal Vein	Patent		
Soleal Vein	Not Identified		Not Identified
Gastrocnemius	Patent		Patent

Superficial Veins			
Saphenofemoral Junction	Widely Patent	Competent	Competent
L Saphenous Vein Above	Widely Patent	Isolated Incompetence	Competent
L Saphenous Vein Below	Widely Patent	Isolated Incompetence	Isolated Incompetence
Vein of Giacomini	Widely Patent	Competent	Not Identified
Saphenopopliteal Junction	Widely Patent	Competent	Widely Patent
S Saphenous Vein	Areas of Thrombus	Old Thrombus	Widely Patent

Evidence of D.V.T.

Above the knee

Popliteal

Below the knee

No
No
No

Notes

BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT

Iliac veins not viewed bilaterally. Flow in the common femoral vein is phasic with respiration and a normal response on Valsalva manoeuvre, suggesting proximal vein patency bilaterally. All visualised deep veins proximal to and including the popliteal vein appear widely patent and competent with no evidence of previous DVT bilaterally. Calf veins were difficult to visualise due to swelling, depth and oedema but appear patent bilaterally.

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

RIGHT

Assessed by

Charlotte Roberts, MCVS

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