

Reason TIA clinic
Outcome Stenosis moderate, Obscured, Calcified

| Right | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|---------------------|-----------|----------------------|---------------|
| Common | | | 1.03 | 0.21 | < 30% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | < 50% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| Internal | | | 1.63 | 0.35 | 50% - 59% |
| Plaque | Dense Mixed | | | | |
| Disease length from BIF | | | | | |
| | | Pk ICA/Pk CCA = 1.6 | | Pk ICA/End CCA = 7.8 | |
| External | | | 2.37 | | < 25% |
| Plaque | Normal | | | | |
| Disease length from BIF | | | | | |
| Vertebral | Open Orthograde | | | | |
| Subclavian | No Turbulence | Good Signal | Triphasic | | Widely Patent |

| Left | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|----------------------------|---------------------|-----------|-----------|---------------|
| Common | | | 1.22 | | < 30% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | < 50% |
| Plaque | Dense Mixed Soft Calcified | | | | |
| Disease length from BIF | | | | | |
| Internal | | | 1.11 | | < 50% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| | | Pk ICA/Pk CCA = 0.9 | | | |
| External | | | 1.25 | | < 30% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Vertebral | Open Orthograde | | | | |
| Subclavian | No Turbulence | Good Signal | Triphasic | | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

*Irregular heart rate

RIGHT

Mixed, dense and calcified plaque identified in the right internal carotid artery, forming a 50-59% stenosis based on velocities obtained. Disease length ~1.9cm. Distal ICA appears patent.

LEFT

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:05 am

Checked by _____

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.

Mixed, dense and calcified plaque and echolucent material ?soft plaque identified in the right carotid bifurcation, forming a less than 50% stenosis. The left internal carotid artery was obscured by calcification causing acoustic shadowing for ~0.3cm. Velocities obtained distal to obscured region indicate a less than 50% stenosis, however, unable to rule out more significant stenosis within obscured region.

Suggest vascular surgical opinion, if appropriate.
Suggest alternative imaging, if felt appropriate.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:05 am

Checked by _____

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Reason Stroke
Outcome Stenosis moderate

| Right | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|---|-----------------|---------------|-----------|-----------|---------------|
| Common | | | 1.00 | | < 30% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | < 30% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Internal | | | 0.99 | | < 40% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| P _k ICA/P _k CCA = 1.0 | | | | | |
| External | | | 1.75 | | < 30% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Vertebral | Open Orthograde | | | | |
| Subclavian | No Turbulence | Good Signal | Triphasic | | Widely Patent |

| Left | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|---|-----------------|---------------|-----------------------------------|-----------|---------------|
| Common | | | 0.80 | 0.12 | < 30% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | 50% - 59% |
| Plaque | Mixed Soft | | | | |
| Disease length from BIF | | | | | |
| Internal | | | 1.33 | 0.23 | 50% - 59% |
| Plaque | Mixed Soft | | | | |
| Disease length from BIF | | | | | |
| P _k ICA/P _k CCA = 1.7 | | | P _k ICA/End CCA = 11.1 | | |
| External | | | 0.95 | | < 30% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Vertebral | Open Orthograde | | | | |
| Subclavian | No Turbulence | Good Signal | Triphasic | | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

RIGHT

Mixed plaque identified in the right internal carotid artery, forming a less than 40% stenosis.

LEFT

Mixed plaque and echolucent material ?soft plaque identified in the left carotid bifurcation and internal carotid artery, forming a 50-59% stenosis. Disease length ~1.9cm. Distal ICA appears patent.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 11:10 am

Checked by _____

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.

Suggest vascular surgical opinion.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 11:10 am

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Reason Stroke
Outcome Stenosis severe, Occlusion

| Right | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|------------|-----------------|-------------|-----------|---------------|
| Common | | | | | |
| Plaque | Mixed | | 0.51 | | < 30% |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | |
| Plaque | Mixed Soft | | | | < 50% |
| Disease length from BIF | | | | | |
| Internal | | | | | |
| Plaque | Mixed Soft | | 6.23 | 2.24 | 90% - 95% |
| Disease length from BIF | | | | | |
| Pk ICA/Pk CCA = 12.2 | | | | | |
| External | | | | | |
| Plaque | Mixed | | 1.19 | | < 30% |
| Disease length from BIF | | | | | |
| Vertebral | | Open Orthograde | | | |
| Subclavian | | No Turbulence | Good Signal | Biphasic | Widely Patent |

| Left | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|------------|----------------|----------------------|-----------|---------------|
| Common | | | | | |
| Plaque | Mixed | | 0.94 | 0.15 | < 30% |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | |
| Plaque | Mixed Soft | | | | < 50% |
| Disease length from BIF | | | | | |
| Internal | | | | | |
| Plaque | Mixed Soft | | | | = 100% |
| Disease length from BIF | | | | | |
| Pk ICA/Pk CCA = 0.0 | | | Pk ICA/End CCA = 0.0 | | |
| External | | | | | |
| Plaque | Mixed | | 1.82 | | < 30% |
| Disease length from BIF | | | | | |
| Vertebral | | Not Identified | | | |
| Subclavian | | No Turbulence | Good Signal | Biphasic | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

RIGHT

Mixed plaque and echolucent material ?soft plaque identified in the right internal carotid artery, forming a 90-95% stenosis based on velocities obtained. Disease length ~2.6cm including bifurcation. Distal ICA appears patent.

LEFT

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:10 am

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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.

Re: 2024

The left internal carotid artery appears occluded with echolucent material ?soft plaque ?thrombus, with no flow identified with colour, spectral or Power Doppler.

SUGGEST VASCULAR SURGICAL OPINION

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:10 am

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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 TIA clinic
Outcome Occlusion, disease - mild

| Right | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-------------|-----------------|-------------|-----------|---------------|
| Common | | | | | |
| Plaque | Mixed | | 0.93 | | < 30% |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | |
| Plaque | Dense Mixed | | | | < 30% |
| Disease length from BIF | | | | | |
| Internal | | | | | |
| Plaque | Mixed | | 0.95 | | < 30% |
| Disease length from BIF | | | | | |
| External | | | | | |
| Plaque | Mixed | | 1.20 | | < 30% |
| Disease length from BIF | | | | | |
| Vertebral | | Open Orthograde | | | |
| Subclavian | | No Turbulence | Good Signal | Triphasic | Widely Patent |

| Left | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|----------------------------|-----------------|-------------|-----------|---------------|
| Common | | | | | |
| Plaque | Mixed | | 0.63 | | < 30% |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | |
| Plaque | Dense Mixed | | | | < 50% |
| Disease length from BIF | | | | | |
| Internal | | | | | |
| Plaque | Dense Mixed Soft Calcified | | | | = 100% |
| Disease length from BIF | | | | | |
| External | | | | | |
| Plaque | Mixed | | 1.02 | | < 30% |
| Disease length from BIF | | | | | |
| Vertebral | | Open Orthograde | | | |
| Subclavian | | No Turbulence | Good Signal | Biphasic | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

RIGHT

Mixed plaque identified in the right internal carotid artery, forming a less than 30% stenosis.

LEFT

The left internal carotid artery appears patent for ~0.9cm, becoming occluded thereafter with mixed, dense and calcified plaque and echolucent material ?soft plaque ?thrombus. No flow identified with colour, spectral

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:16 am

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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.

or Power Doppler.

Suggest vascular surgical opinion, if appropriate.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:16 am

Checked by _____

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 | Stroke |
| Outcome | Stenosis severe, Obscured, Calcified |

| Right | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|-----------------|-------------|-----------|---------------|
| Common | | | | | |
| Plaque | Mixed | | 0.95 | 0.28 | < 30% |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | |
| Plaque | Dense Mixed Calcified | | | | 40% - 49% |
| Disease length from BIF | | | | | |
| Internal | | | | | |
| Plaque | Dense Mixed Calcified | | 1.34 | 0.34 | < 50% |
| Disease length from BIF | | | | | |
| External | | | | | |
| Plaque | Dense Mixed Calcified | | 1.40 | | < 50% |
| Disease length from BIF | | | | | |
| Vertebral | | Open Orthograde | | | |
| Subclavian | | Mild Turbulence | Good Signal | Triphasic | Widely Patent |

| Left | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|------------------------|-------------|-----------|---------------|
| Common | | | | | |
| Plaque | Mixed | | 0.78 | 0.18 | < 50% |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | |
| Plaque | Dense Mixed Calcified | | | | < 0% |
| Disease length from BIF | | 0.30cm but is obscured | | | |
| Internal | | | | | |
| Plaque | Dense Mixed Calcified | | 3.44 | 0.85 | 70% - 79% |
| Disease length from BIF | | | | | |
| External | | | | | |
| Plaque | Dense Mixed Calcified | | 1.76 | | 50% - 59% |
| Disease length from BIF | | | | | |
| Vertebral | | Open Orthograde | | | |
| Subclavian | | Mild Turbulence | Good Signal | Triphasic | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

RIGHT

Raised velocities identified in the right internal carotid artery, suggesting a 50-59% stenosis, however disease appears to form a less than 50% stenosis based on greyscale and colourflow imaging, with mixed, dense and calcified plaque where seen. ?elevated velocities due to significant contralateral disease.

LEFT

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:18 am

Checked by

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.

Poor views of the left carotid arteries due to calcification causing acoustic shadowing. Unable to accurately grade the carotid bifurcation due to shadowing. The left proximal internal carotid artery was obscured for ~0.3cm. Velocities identified just distal to the obscured region indicate at least a 70-79% stenosis, unable to rule out a more significant stenosis within obscured region. Disease length ~ 1.7cm. Distal ICA appears patent and is tortuous.

Suggest urgent vascular surgical opinion.

Suggest alternative imaging.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:18 am

Checked by _____

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 Pre-op
Outcome Stenosis moderate, Calcified

| Right | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|---------------------|-----------|-----------|---------------|
| Common | | | | | |
| Plaque | Mixed | | 0.91 | | < 30% |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | 50% - 59% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| Internal | | | 0.79 | | < 50% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| | | Pk ICA/Pk CCA = 0.9 | | | |
| External | | | 1.01 | | < 50% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| Vertebral | Open Orthograde | | | | |
| Subclavian | No Turbulence | Good Signal | Biphasic | | Widely Patent |

| Left | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|---------------------|-----------|-----------|---------------|
| Common | | | | | |
| Plaque | Mixed | | 0.72 | | < 30% |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | < 50% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| Internal | | | 0.54 | | < 50% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| | | Pk ICA/Pk CCA = 0.8 | | | |
| External | | | 1.28 | | < 50% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| Vertebral | Open Orthograde | | | | |
| Subclavian | No Turbulence | Good Signal | Biphasic | | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

*Pre-op Tx

RIGHT

Mixed, dense and calcified plaque identified in the right carotid bifurcation, forming a 50-59% stenosis based on greyscale and colourflow imaging. Disease length ~0.85cm. Mixed, dense and calcified plaque identified in the right internal carotid artery, forming a less than 50% stenosis. No raised velocities obtained. Distal ICA appears patent.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:19 am

Checked by

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.

LEFT

Mixed, dense and calcified plaque identified in the left internal carotid artery, forming a less than 50% stenosis.

Suggest vascular surgical opinion, if appropriate.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:19 am

Checked by _____

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 Routine
Outcome Stenosis mild, Calcified, Intimal hyperplasia

| Right | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|---------------------|---------------------|-------------|-----------|---------------|
| Common | | | | | |
| Plaque | Dense Mixed | | 0.80 | | < 30% |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | |
| Plaque | Intimal Hyperplasia | | | | < 30% |
| Disease length from BIF | | | | | |
| Internal | | | | | |
| Plaque | Intimal Hyperplasia | | 1.13 | | < 40% |
| Disease length from BIF | | | | | |
| | | Pk ICA/Pk CCA = 1.4 | | | |
| External | | | | | |
| Plaque | Intimal Hyperplasia | | 1.15 | | < 30% |
| Disease length from BIF | | | | | |
| Vertebral | | Open Orthograde | | | |
| Subclavian | | No Turbulence | Good Signal | Triphasic | Widely Patent |

| Left | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|---------------------|-------------|-----------|---------------|
| Common | | | | | |
| Plaque | Dense Mixed | | 0.66 | | < 30% |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | |
| Plaque | Dense Mixed Calcified | | | | 40% - 49% |
| Disease length from BIF | | | | | |
| Internal | | | | | |
| Plaque | Dense Mixed Calcified | | 1.24 | | 40% - 49% |
| Disease length from BIF | | | | | |
| | | Pk ICA/Pk CCA = 1.9 | | | |
| External | | | | | |
| Plaque | Dense Mixed Calcified | | 1.11 | | < 30% |
| Disease length from BIF | | | | | |
| Vertebral | | Open Orthograde | | | |
| Subclavian | | No Turbulence | Good Signal | Triphasic | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

*Previous right CEA

RIGHT

Intimal hyperplasia identified in the right internal carotid artery, forming a less than 40% reduction in luminal diameter.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:44 am

Checked by

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.

LEFT

Mixed, dense and calcified plaque identified in the left carotid bifurcation and internal carotid artery, forming a 40-49% stenosis.

Assessed by

Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:44 am

Checked by _____

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 TIA clinic
Outcome Calcified, disease - mild

| Right | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|---------------|---------------------|-----------|---------------|
| Common | | | | | |
| Plaque | Mixed | | 0.61 | | < 30% |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | |
| Plaque | Dense Mixed Calcified | | | | < 30% |
| Disease length from BIF | | | | | |
| Internal | | | | | |
| Plaque | Dense Mixed Calcified | | 0.61 | | < 30% |
| Disease length from BIF | | | | | |
| | | | Pk ICA/Pk CCA = 1.0 | | |
| External | | | | | |
| Plaque | Mixed | | 0.75 | | < 30% |
| Disease length from BIF | | | | | |
| Vertebral | Open Orthograde | | | | |
| Subclavian | No Turbulence | Good Signal | Triphasic | | Widely Patent |

| Left | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|---------------|---------------------|-----------|---------------|
| Common | | | | | |
| Plaque | Mixed | | 0.80 | | < 30% |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | |
| Plaque | Dense Mixed Calcified | | | | < 30% |
| Disease length from BIF | | | | | |
| Internal | | | | | |
| Plaque | Dense Mixed Calcified | | 0.67 | | < 30% |
| Disease length from BIF | | | | | |
| | | | Pk ICA/Pk CCA = 0.8 | | |
| External | | | | | |
| Plaque | Mixed | | 0.87 | | < 30% |
| Disease length from BIF | | | | | |
| Vertebral | Open Orthograde | | | | |
| Subclavian | No Turbulence | Good Signal | Triphasic | | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

Mixed, dense and calcified plaque identified in the right and left internal carotid arteries, forming a less than 30% stenosis bilaterally.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:11 am

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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 Stroke

Outcome Stenosis moderate, Obscured, Calcified, Irregular heart rate

| Right | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|----------------------------|------------------|------------------|-----------------|
| Common | | | | | |
| Plaque | Mixed | | 0.89 | | < 30% |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | < 40% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| Internal | | | 1.14 | | < 40% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| | | Pk ICA/Pk CCA = 1.3 | | | |
| External | | | 0.96 | | < 30% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Vertebral | | Open Orthograde | | | |
| Subclavian | | Mild Turbulence | Good Signal | Triphasic | Widely Patent |

| Left | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|----------------------------|------------------|------------------------------|-----------------|
| Common | | | 0.74 | 0.15 | < 30% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | < 50% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| Internal | | | 1.56 | 0.70 | 60% - 69% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | 1.80cm but is obscured | | | |
| | | Pk ICA/Pk CCA = 2.1 | | Pk ICA/End CCA = 10.4 | |
| External | | | 1.93 | | < 0% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Vertebral | | Open Orthograde | | | |
| Subclavian | | Mild Turbulence | Good Signal | Triphasic | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

*irregular heart rate

RIGHT

Mixed, dense and calcified plaque identified in the right internal carotid artery, forming a less than 40% stenosis.

LEFT

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 11:02 am

Checked by

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.

D.O.B.

The left internal carotid artery was obscured by calcification causing acoustic shadowing for ~1.8cm. Velocities obtained distal to the obscured region indicate a 60-69% stenosis, however unable to rule out a more significant stenosis within the obscured region. Disease length ~2.0cm including bifurcation. Distal ICA was poorly visualised due to poor tissue resolution and shadowing, appears patent however unable to accurately grade disease.

Suggest alternative imaging.

Suggest vascular surgical opinion.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 11:02 am

Checked by _____

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 TIA clinic
Outcome Not viewed, Calcified, disease - mild

| Right | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|---------------|---------------------|-----------|---------------|
| Common | | | 0.99 | | < 40% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | < 50% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| Internal | | | 1.08 | | < 50% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | Pk ICA/Pk CCA = 1.1 | | |
| External | | | 0.71 | | < 50% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| Vertebral | Not Identified | | | | |
| Subclavian | No Turbulence | | Good Signal | Triphasic | Widely Patent |

| Left | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|---------------|---------------------|-----------|---------------|
| Common | | | 0.89 | | < 40% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | < 50% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| Internal | | | 0.92 | | < 50% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | Pk ICA/Pk CCA = 1.0 | | |
| External | | | 0.72 | | < 50% |
| Plaque | Dense Mixed Calcified | | | | |
| Disease length from BIF | | | | | |
| Vertebral | Open Orthograde | | | | |
| Subclavian | No Turbulence | | Good Signal | Biphasic | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

Mixed, dense and calcified plaque identified in the right and left internal carotid arteries, forming a less than 50% stenosis bilaterally.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:56 am

Checked by _____

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 Pre-op CABG, Pre-op TAVI

Outcome Calcified, disease - mild

| Right | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|---------------------|-----------|---------------|
| Common | | 0.48 | | < 30% |
| Plaque | Mixed | | | |
| Disease length from BIF | | | | |
| Bifurcation | | | | < 40% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | | | |
| Internal | | 0.51 | | < 40% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | Pk ICA/Pk CCA = 1.1 | | |
| External | | 0.48 | | < 40% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | | | |
| Vertebral | Open Orthograde | | | |
| Subclavian | No Turbulence | Good Signal | Biphasic | Widely Patent |

| Left | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|---------------------|-----------|---------------|
| Common | | 0.67 | | < 30% |
| Plaque | Mixed | | | |
| Disease length from BIF | | | | |
| Bifurcation | | | | < 50% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | | | |
| Internal | | 0.58 | | < 50% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | Pk ICA/Pk CCA = 0.9 | | |
| External | | 0.69 | | < 50% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | | | |
| Vertebral | Open Orthograde | | | |
| Subclavian | No Turbulence | Good Signal | Biphasic | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

Mixed, dense and calcified plaque identified in the right and left internal carotid arteries, forming a less than 40% and a less than 50% stenosis respectively.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:13 am

Checked by

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 Stroke
Outcome Stenosis moderate, Irregular heart rate

| Right | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|--------------------|---------------------|-----------|----------------------|---------------|
| Common | | | 0.72 | 0.10 | < 30% |
| Plaque | Dense Mixed | | | | |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | < 40% |
| Plaque | Dense Mixed | | | | |
| Disease length from BIF | | | | | |
| Internal | | | 0.62 | 0.15 | < 30% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | Pk ICA/Pk CCA = 0.9 | | Pk ICA/End CCA = 6.2 | |
| External | | | 0.90 | | < 30% |
| Plaque | Intimal Thickening | | | | |
| Disease length from BIF | | | | | |
| Vertebral | Open Orthograde | | | | |
| Subclavian | No Turbulence | Good Signal | Triphasic | | Widely Patent |

| Left | | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|--------------------|---------------------|-----------|-----------------------|---------------|
| Common | | | 0.76 | 0.11 | < 30% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Bifurcation | | | | | < 30% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | | | | |
| Internal | | | 1.28 | 0.19 | 50% - 59% |
| Plaque | Mixed | | | | |
| Disease length from BIF | | Pk ICA/Pk CCA = 1.7 | | Pk ICA/End CCA = 11.6 | |
| External | | | 0.94 | | < 30% |
| Plaque | Intimal Thickening | | | | |
| Disease length from BIF | | | | | |
| Vertebral | Open Orthograde | | | | |
| Subclavian | No Turbulence | Good Signal | Triphasic | | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

*Irregular heart rate

RIGHT

Mixed plaques identified in the internal carotid artery, forming a less than 30% stenosis

LEFT

Mixed plaques identified in the internal carotid artery, forming a 50-59% stenosis. Total disease length is

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 11:00 am

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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 TIA clinic
Outcome Widely patent, Intimal thickening

| Right | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|---------------------|-------------|-----------|---------------|
| Common | | 0.94 | | < 30% |
| Plaque | Intimal Thickening | | | |
| Disease length from BIF | | | | |
| Bifurcation | | | | < 30% |
| Plaque | Intimal Thickening | | | |
| Disease length from BIF | | | | |
| Internal | | 0.81 | | < 25% |
| Plaque | Normal | | | |
| Disease length from BIF | | | | |
| | Pk ICA/Pk CCA = 0.9 | | | |
| External | | 0.80 | | < 25% |
| Plaque | Normal | | | |
| Disease length from BIF | | | | |
| Vertebral | Open Orthograde | | | |
| Subclavian | Mild Turbulence | Good Signal | Triphasic | Widely Patent |

| Left | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|---------------------|-------------|-----------|---------------|
| Common | | 0.93 | | < 30% |
| Plaque | Intimal Thickening | | | |
| Disease length from BIF | | | | |
| Bifurcation | | | | < 30% |
| Plaque | Intimal Thickening | | | |
| Disease length from BIF | | | | |
| Internal | | 0.94 | | < 25% |
| Plaque | Normal | | | |
| Disease length from BIF | | | | |
| | Pk ICA/Pk CCA = 1.0 | | | |
| External | | 1.85 | | < 25% |
| Plaque | Normal | | | |
| Disease length from BIF | | | | |
| Vertebral | Open Orthograde | | | |
| Subclavian | Mild Turbulence | Good Signal | Triphasic | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

The right and left internal carotid arteries appear widely patent. No evidence of any plaque morphology, intimal dissection or other abnormality identified.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:11 am

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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 TIA clinic
Outcome Stenosis mild, Calcified, Poor images

| Right | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|---------------------|-----------|---------------|
| Common | | 0.86 | | < 30% |
| Plaque | Mixed | | | |
| Disease length from BIF | | | | |
| Bifurcation | | | | < 40% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | | | |
| Internal | | 0.40 | | < 40% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | Pk ICA/Pk CCA = 0.5 | | |
| External | | 0.45 | | < 40% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | | | |
| Vertebral | Open Orthograde | | | |
| Subclavian | No Turbulence | Good Signal | Biphasic | Widely Patent |

| Left | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
|-------------------------|-----------------------|---------------------|-----------|---------------|
| Common | | 0.48 | | < 40% |
| Plaque | Mixed | | | |
| Disease length from BIF | | | | |
| Bifurcation | | | | 50% - 59% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | | | |
| Internal | | 0.76 | | < 50% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | Pk ICA/Pk CCA = 1.6 | | |
| External | | 0.68 | | < 40% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | | | |
| Vertebral | Open Orthograde | | | |
| Subclavian | No Turbulence | Good Signal | Biphasic | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

RIGHT

Mixed, dense and calcified plaque identified in the right internal carotid artery, forming a less than 40% stenosis.

LEFT

The left carotid bifurcation was partially obscured by acoustic shadowing from calcification for ~0.5cm.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:08 am

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| | | | | |
|-------------------------|--|---------------------|-----------------------|-----------------|
| Reason | Routine | | | |
| Outcome | Stenosis severe, Occlusion, Obscured, Calcified, Poor images | | | |
| Right | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
| Common | | 0.76 | 0.26 | < 40% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | | | |
| Bifurcation | | | | 70% - 79% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | | | |
| Internal | | 3.58 | 1.67 | 80% - 89% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | Pk ICA/Pk CCA = 4.7 | Pk ICA/End CCA = 13.8 | |
| External | | 1.94 | | 80% - 89% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | | | |
| Vertebral | Not Identified | | | |
| Subclavian | No Turbulence | Good Signal | Biphasic | Widely Patent |

| | | | | |
|-------------------------|-----------------------|---------------------|------------------|-----------------|
| Left | Diameter (cm) | PSV (m/s) | EDV (m/s) | Stenosis |
| Common | | 1.27 | | < 30% |
| Plaque | Mixed | | | |
| Disease length from BIF | | | | |
| Bifurcation | | | | 60% - 69% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | | | |
| Internal | | | | = 100% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | Pk ICA/Pk CCA = 0.0 | | |
| External | | 2.50 | | < 50% |
| Plaque | Dense Mixed Calcified | | | |
| Disease length from BIF | | | | |
| Vertebral | Not Identified | | | |
| Subclavian | No Turbulence | Good Signal | Biphasic | Widely Patent |

Stenosis based on NASCET methods.

Disease within large diameter carotid bulb is measured using direct diameter methods as recommended in Oates et al (2009).

Notes

CAROTID DUPLEX ASSESSMENT

*Patient scanned in wheelchair and extensive calcification - poor images obtained throughout

RIGHT

Poor images obtained due to extensive calcification in the right carotid system. Mixed, dense and calcified plaque identified in the right carotid bifurcation forming a 70-79% stenosis. The origin of the right internal carotid artery was obscured by calcification causing acoustic shadowing for ~0.5cm. Velocities obtained distal to the obscured region indicate at least an 80-89% stenosis, however unable to rule out a more

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:07 am

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significant stenosis from these images. Disease length ~1.95cm. Distal ICA appears patent.

LEFT

Mixed, dense and calcified plaque identified in the left carotid bifurcation, forming a 60-69% stenosis. The left ICA appears occluded with no flow detected with spectral, colourflow imaging or Power Doppler.

Suggest alternative imaging.

Assessed by Charlotte Roberts, MCVS

Printed on 11/07/2024 at 10:07 am

Checked by _____

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.