



Reason Claudication
Outcome Stenosis severe, Occlusion, Not viewed, Obscured

Right	Left
<div>1701.00</div> <div></div> <div>Good</div>	Brachial
<div></div> <div>Reduced</div>	Common Femoral
	High Thigh
	Low Thigh
	Popiteal
<div></div> <div>Reduced</div>	High Calf
	Peroneal
<div></div> <div>Reduced</div>	Anterior Tibial
<div></div> <div>Reduced600.35</div>	Posterior Tibial800.47
	Dorsalis Pedis
	Toe Pressure
	Post Exercise

Notes

RIGHT LOWER LIMB ARTERIAL DUPLEX ASSESSMENT
Abdominal aorta -patent with good triphasic waveforms and PSV 119cm/s. The abdominal aorta appears normal calibre (maximum AP = 1.8cm), with no evidence of focal dilatation or aneurysm identified.

RIGHT:
CIA - Poor images noted in the CIA due to depth and bowel gas. Where visualised turbulent flow and velocity change from 123 - 315cm/s noted - suggestive of severe stenosis.

Assessed by Ranit Shail, MCVS
Printed on 25/07/2024 at 11:41 am
Checked by



Iraj Zeynali

Reference

Accession 047554476

Patient Steven Layton

NHS No 446 482 2037

D.O.B. 16/02/1957

Patient Ref 708016

EIA - Patent with good biphasic waveform and PSV 96cm/s.

CFA - Mild dense diffuse disease noted with good triphasic waveform and PSV 122cm/s.

PFA - Mild diffuse disease noted with good biphasic waveform and PSV 105cm/s.

SFA -

Prox: Mild diffuse disease noted with good mono/triphasic waveform and PSV 67cm/s. Severe stenosis noted at ~67cm from MM with turbulent flow and velocity change from 47 - 157cm/s noted. Disease length is ~2.1cm.

Mid: Calcified disease with obscure region noted. Severe stenosis (?acute) noted at ~60cm from MM with turbulent flow and velocity change from 58 - 579cm/s. The vessel appears occluded (?acute) from ~60cm from MM to ~55cm from MM.

Distal: Mixed echogenic disease (?acute) noted with reduced monophasic waveform and PSV 28cm/s.

POPA - Mixed echogenic disease (?acute) noted with reduced monophasic waveform and PSV 76cm/s.

TPT is patent; origins of 2 vessel run-off noted.

ATA - Patent along the length of the vessel with reduced monophasic waveform and PSV 30cm/s.

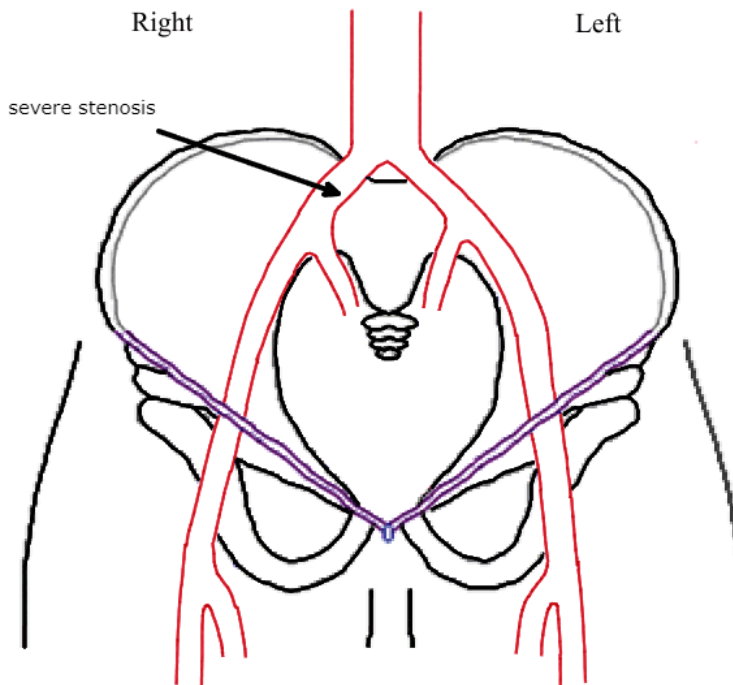
PTA - Proximal and mid PTA not visualised ?patency ?occlusion. Distal PTA is patent with reduced monophasic waveform and PSV 14cm/s.

PERA - Not visualised ?patency ?occlusion

Bilateral resting ABPIs are significantly reduced.

CONCLUSION: Evidence of significant arterial disease identified in the right lower limb from this assessment. Pressures also suggestive for significant left lower limb disease.

SUGGEST VASCULAR REVIEW



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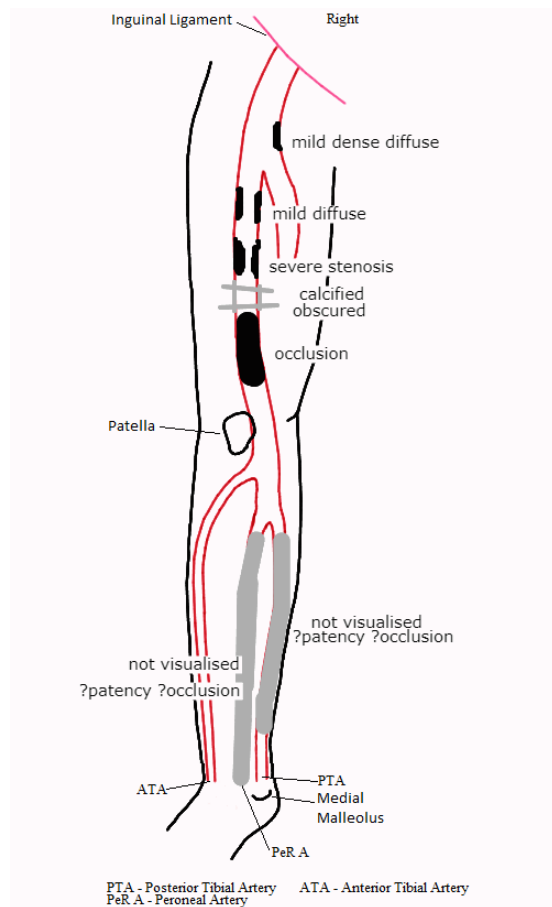
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