



Reason Claudication  
Outcome Stenosis severe

## Right

160

1.00

## Brachial

## Common Femoral

Slightly Reduced

## High Thigh

## Low Thigh

## Popliteal

Reduced

## High Calf

## Peroneal

Reduced

## Anterior Tibial

Reduced

## Posterior Tibial

Reduced

90

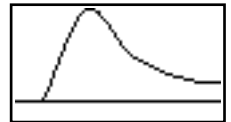
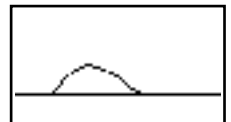
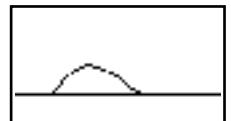
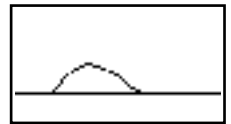
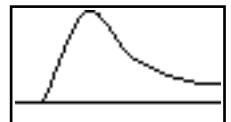
0.56

## Dorsalis Pedis

## Toe Pressure

## Post Exercise

## Left



## Notes

## LEFT LOWER LIMB ARTERIAL DUPLEX ASSESSMENT

Abdominal aorta -patent with good triphasic waveforms and PSV 61cm/s. The abdominal aorta appears normal calibre (maximum AP = 1.8cm), with no evidence of focal dilatation or aneurysm identified.

CIA - Poor images noted due to bowel gas and calcified walls. Severe stenosis noted in the proximal CIA with turbulent flow and velocity change from 398 - 127cm/s.

EIA - Patent with slightly reduced monophasic waveform and PSV 70cm/s.

Assessed by Ranit Shail, MCVS

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Checked by

CFA - Mild diffuse disease with slightly reduced monophasic waveform and PSV 100cm/s.  
PFA - Mild diffuse disease with slightly reduced monophasic waveform and PSV 65cm/s.  
SFA - Patent along the length of the vessel with slightly reduced and reduced monophasic waveforms and PSV 100 - 65 - 73cm/s.  
POPA - Patent with reduced monophasic waveform and PSV 43cm/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 29cm/s.  
PTA - Patent along the length of the vessel with reduced monophasic waveform and PSV 58cm/s.  
PERA - Patent along the length of the vessel with reduced monophasic waveform and PSV 30cm/s.

Bilateral resting ABPIs are significantly reduced.

**CONCLUSION:** Evidence of significant arterial disease identified in the right and left lower limbs from this assessment.

