

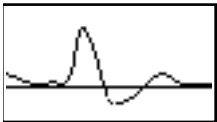


Reason Claudication
Outcome Aneurysm, Stenosis moderate, Stenosis severe, Poor images

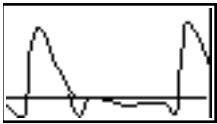
Right

150

1.00



Good



Good



Good



Good



Good

145

0.97

Brachial

Common Femoral

High Thigh

Low Thigh

Popliteal

High Calf

Peroneal

Anterior Tibial

Posterior Tibial

130

0.87

Dorsalis Pedis

Toe Pressure

Foot Flex

110

0.73

Post Exercise

Foot Flex

130

0.87

Notes

RIGHT LOWER LIMB ARTERIAL DUPLEX ASSESSMENT

Abdominal aorta -patent with good triphasic waveforms and PSV 100cm/s. The abdominal aorta appears aneurysmal (maximum AP = 3.0cm). Patient is under surveillance for the aneurysm.

CIA - Patent with good biphasic waveform and PSV 144cm/s.

EIA - Poor images noted due to depth. Moderate/ severe stenosis in the distal EIA with turbulent flow and velocity change from 144 - 271cm/s noted.

Assessed by Ranit Shail, MCVS

Printed on 25/07/2024 at 10:54 am

Checked by



T Spachos

Reference

Accession 04759200

Patient **Rita Salmon**
D.O.B. **25/05/1941**

NHS No **442 240 6809**
Patient Ref **526749**

CFA - Patent with turbulent biphasic waveform noted and PSV 219cm/s suggestive of significant stenosis proximally.

PFA - Moderate stenosis noted in the PFA origin with turbulent flow and velocity change from 110 - 61cm/s noted.

SFA -

Prox: Mild diffuse disease noted with good biphasic waveform and PSV 110cm/s.

Mid: Patent with good biphasic waveform and PSV 142cm/s.

Distal: Poor images noted due to depth. Severe stenosis noted in the distal SFA with good biphasic waveform and velocity change from 92 - 198cm/s.

POPA - Patent with good biphasic waveform and PSV 85cm/s. TPT is patent; origins of 2 vessel run-off noted.

ATA - Severe stenosis noted in the proximal ATA with turbulent flow and velocity change from 61 - 22cm/s noted. Patent along the rest of the vessel with good biphasic waveform and PSV 47cm/s.

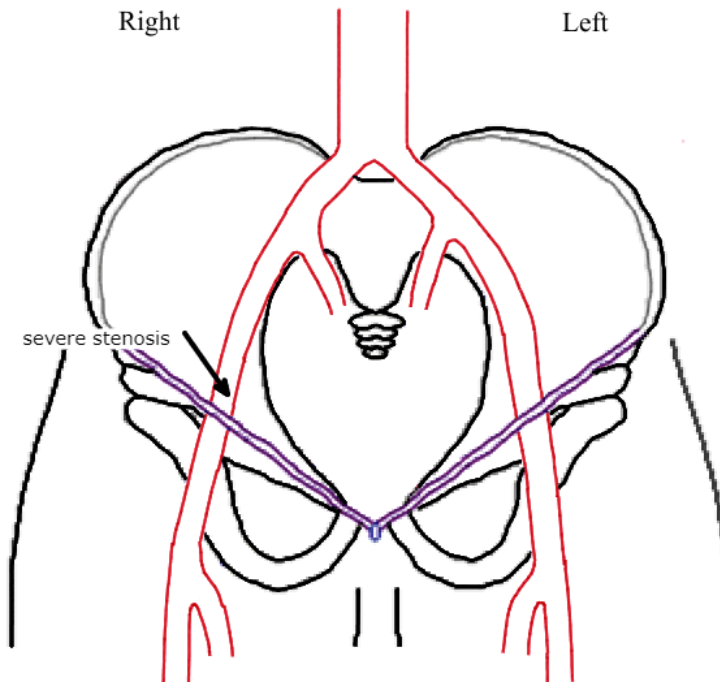
PTA - Patent along the length with good biphasic waveform and PSV 50cm/s.

PERA - Patent along the length with good biphasic waveform and PSV 39cm/s.

Right resting ABPI is within normal limits, with significant reduction in systolic ankle Doppler pressure observed following a one minute exercise challenge.

Left resting ABPI is within normal limits, with no significant reduction in systolic ankle Doppler pressure observed following a one minute exercise challenge.

CONCLUSION: Evidence of significant arterial disease identified in the right lower limb from this assessment.



Assessed by **Ranit Shail, MCVS**

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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.



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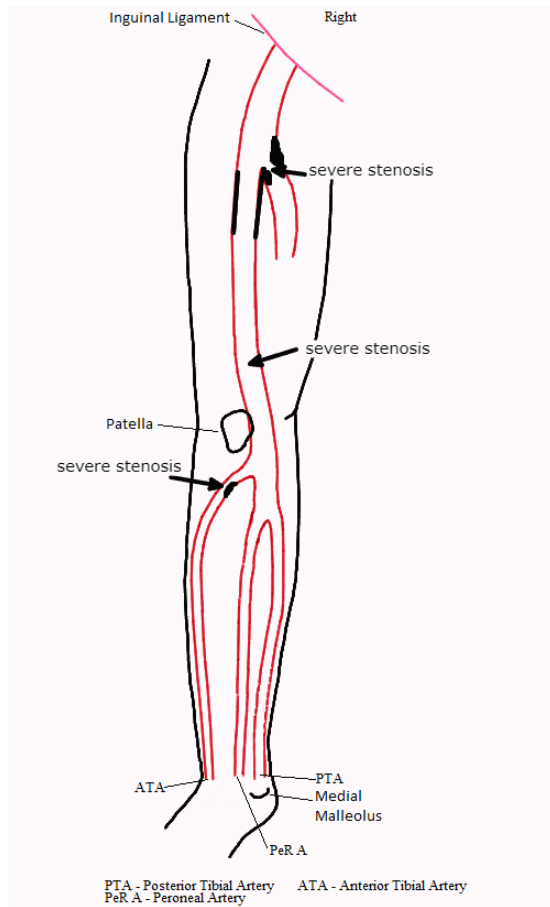
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