Outcome	DVT negative, Comp	etent		
	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
nternal Iliac Vein				
Common Femoral Vein			Patent	Competent
Profunda Vein			Patent	Competent
Superficial Femoral Vein			Patent	Competent
Popliteal Vein			Patent	Competent
Posterior Tibial Vein			Patent	Competent
Anterior Tibial Vein			Patent	Competent
Peroneal Vein			Patent	Competent
Soleal Vein			Patent	
Gastrocnemius			Patent	
Superficial Veins			Detect	10
Saphenofemoral Junction			Patent	Competent
Saphenous Vein Above			Patent	Competent
Saphenous Vein Below			Patent	Competent
ein of Giacomini			Patent	Competent
Saphenopopiteal Junction			Not Identified	
S Saphenous Vein			Patent	Competent
Evidence of D.V.T.				
Above the knee			No	
Popliteal			No	
Below the knee			No	
Notes				
LEFT LOWER LIM	IB VENOUS DUPLE	XASSESSMENT		
on Valsalva manoe		mon femoral vein is phasio oximal vein patency. All vis s DVT.		
All measurements	are proximal to the n	nedial malleolus unless oth	nerwise stated.	
SFJ is patent and	competent. LSV is pa	atent and competent along	its length.	
SPJ not identified.	SSV is patent and co	ompetent and is continuou	s with a competent vein	of Giacomini.
Assessed by	Jimmy Chen			
Printed on 07/12/2		Che	cked by	

	Diamb4			
Deep Veins	Right	Commat	Left	
Common Iliac Vein	Patency	Competency	Patency	Competency
External Iliac Vein				
nternal Iliac Vein				
Common Femoral Vein			Widely Patent	Competent
Profunda Vein			Widely Patent	Competent
Superficial Femoral Vein			Widely Patent	Incompetent
Popliteal Vein			Recanalised	Old Thrombus
Posterior Tibial Vein			Patent	Incompetent
Anterior Tibial Vein			Patent	Competent
Peroneal Vein			Patent	Incompetent
Soleal Vein			Patent	
Gastrocnemius			Recanalised	Old Thrombus
Superficial Veins			Patent	Competent
Saphenofemoral Junction			Patent	Competent
Saphenous Vein Above			Patent	Competent
Saphenous Vein Below			Not Identified	Competent
/ein of Giacomini			Recanalised	Old Thrombus
Saphenopopiteal Junctio	'n		Patent	Incompetent
S Saphenous Vein			Taton	incompetent
Evidence of D.V.T.				
Above the knee			No	
Popliteal			Yes	Old
Below the knee			Yes	Old
Notes				
	MB VENOUS DUPLEX A	SSESSMENT		
on Valsalva mano Common femoral previous DVT. Inc recanalised, old th	euvre, suggesting proxing and profunda femoral vectompetent flow noted alour or moted in the popliteal, DVT detected. All other	mal vein patency. eins appear widely pater ng the length of the sup posterior tibial, peronea	with respiration and a not of and competent with no erficial femoral vein and e al, and gastrocnemius veil patent and competent with	evidence of evidence of ns, however no
All measurements	s are proximal to the med	dial malleolus unless oth	erwise stated.	
Assessed by	Jimmy Chen			

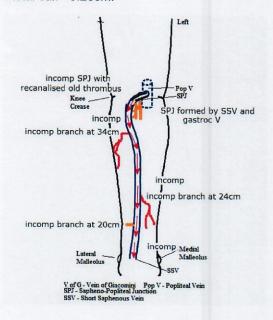
SFJ is patent and competent. LSV is patent and competent along its length with an incompetent perforator in the distal calf at 12cm.

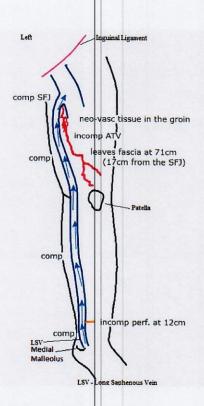
Neo-vascularised tissue noted in the groin with an incompetent ATV arising at the level of the SFJ trunk and appears small calibre proximally becoming larger in the prox-mid thigh. ATV leaves the fascia at 71cm (~17cm from the SFJ) and forms anterior thigh varicosities.

SSV forms a common trunk with a gastrocnemius vein to form an SPJ. SPJ appears slightly incompetent with evidence of recanalised old thrombus. SSV is patent and incompetent along its length, and tracks in a relatively linear fashion within a fascia in the calf. Incompetent branches in the prox and mid calf at 34cm and 24cm respectively. Incompetent perforator noted in the distal calf at 20cm.

Transverse (AP) dimensions of ATV: Proximal thigh- 0.21cm, Mid thigh - 0.4cm,

Transverse (AP) dimensions of SSV: Proximal calf- 0.48cm, Mid calf - 0.51cm, Distal calf - 0.26cm.





Assessed by Jimmy Chen Printed on 07/12/2018 at 10:52 am

Outcome	DVT negative, Incomp	etence		
	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
nternal Iliac Vein				
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
osterior Tibial Vein	Patent	Competent	Patent	Competent
Anterior Tibial Vein	Patent	Competent	Patent	Competent
Peroneal Vein	Patent	Competent	Patent	Competent
Soleal Vein	Patent		Patent	
Gastrocnemius	Patent		Patent	
Superficial Veins				
Saphenofemoral Junction	Patent	Incompetent	Patent	Incompetent
. Saphenous Vein Above	Patent	Incompetent	Patent	Isolated Incompetence
Saphenous Vein Below	Patent	Incompetent	Patent	Isolated Incompetence
ein of Giacomini	Patent	Competent	Patent	Competent
Saphenopopiteal Junction	Not Identified		Not Identified	
Saphenous Vein	Patent	Competent	Patent	Competent
vidence of D.V.T.				
Above the knee	No		No	
Popliteal	No		No	
Below the knee	No		No	
Notes				
	R LIMB VENOUS DUF	PLEX ASSESSMENT		
challenging scan d	ue to poor mobility.			
liac veins not viewe	d bilaterally. Flow in t	he common femoral veir	ns are phasic with respira	tion and a
normal response on	Valsalva manoeuvre,	suggesting proximal vei	n patency. All visualised	deep veins
appear widely pater	t and competent with	no evidence of previous	DVT.	
All measurements a	re proximal to the med	dial malleolus unless oth	erwise stated	
	,	The state of the s	oo olalou.	
RIGHT				
ורכ is patent and in prox thigh at 57cm (competent. LSV is pat	tent and incompetent pro	oximally before leaving the and tracks in a relatively	e fascia in the
g., at 07 oill (- Tom Hom grown,. Le	- romans moompetent	and tracks in a relatively	iiiieai iasiiiUII III
Assessed by Printed on 07/12/20	Jimmy Chen			

the medial thigh. LSV is slightly tortuous in the mid-distal thigh at 47cm.

Calf LSV is patent and incompetent. Incompetent branch leaves the mid calf at 19cm and continues to communicate with an incompetent perforator in the distal calf at 10cm.

Competent perforators noted in the mid and distal calf at 24cm and 16cm.

SPJ not identified. SSV is patent and competent and is continuous with a competent vein of Giacomini.

Transverse (AP) dimensions of LSV:
Proximal thigh- 0.6cm,
Mid thigh - 0.54cm,
Distal thigh - 0.4cm.
Proximal calf- 0.38cm,
Mid calf - 0.4cm,
Distal calf - 0.43cm.

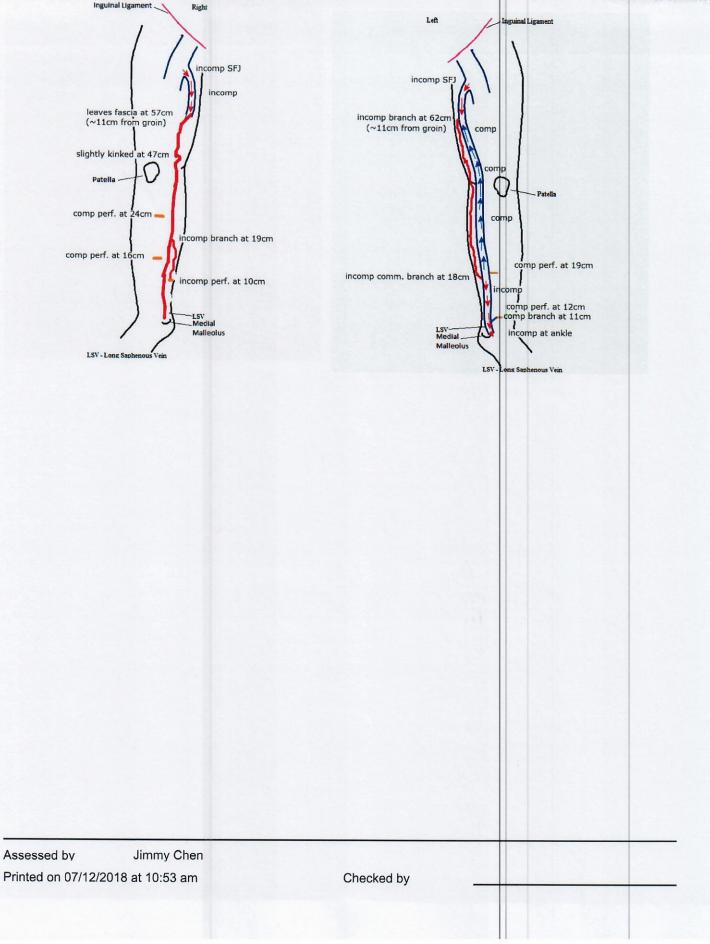
LEFT

SFJ is patent and incompetent. LSV is patent and incompetent proximally. Incompetent branch leaves in the prox thigh at 62cm (~11cm from groin). Distal to this, LSV becomes competent and remains so to the knee. Calf LSV is patent and competent. Competent perforator noted at 19cm. Incompetent branch communicates with the mid LSV at 18cm. Distal to this, LSV becomes incompetent. Competent perforator noted in the distal calf at 13cm and gives rise to a competent branch which communicates with the distal LSV at 11cm. LSV remains incompetent at the ankle.

SPJ not identified. SSV is patent and competent and is continuous with a competent vein of Giacomini.

Transverse (AP) dimensions of LSV:
Proximal thigh- 0.63cm,
Mid thigh - 0.28cm,
Distal thigh - 0.36cm.
Proximal calf- 0.17cm,
Mid calf - 0.41cm,
Distal calf - 0.44cm.

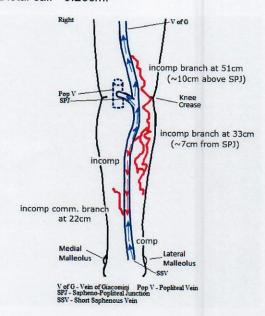
Assessed by	Jimmy Chen
Printed on 07/12/2018	at 10:53 am



Outcome	DVT negative, Incompe	tence			
	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	Patent				
Gastrocnemius	Patent				
Superficial Veins					
Saphenofemoral Junction	Patent	Competent			
L Saphenous Vein Above	Patent	Competent			
L Saphenous Vein Below	Patent	Competent			
Vein of Giacomini	Patent	Competent			
Saphenopopiteal Junction	Patent	Competent			
S Saphenous Vein	Patent	Isolated Incompetence			
Evidence of D.V.T.					
Above the knee	No				
Popliteal	No				
Below the knee	No				
Notes					
RIGHT LOWER LIM	IB VENOUS DUPLEX	ASSESSMENT - scann	ed in clinic		
on Valsalva manoeu	ed. Flow in the common ovre, suggesting proxime no evidence of previou	n femoral vein is phasio nal vein patency. All vis is DVT.	with respiration and a ualised deep veins app	normal response ear widely patent	
All measurements a	re proximal to the med	ial malleolus unless oth	erwise stated.		
SFJ is patent and co	ompetent. LSV is paten	t and competent along	its length.		
SPJ is patent and co	ompetent. Vein of Giac e knee at 51cm (~10cr	omini is patent and con m above the level of the	npetent with an incomp e SPJ), and form visible	etent branch noted posterior calf	
Assessed by	Jimmy Chen				
Printed on 07/12/20		Chec	cked by		

varicosities. LSV is patent and competent in the prox calf before an incompetent branch communicates in the prox calf at 33cm (~7cm from the level of the SPJ). LSV becomes incompetent distal to this. A further incompetent branch communicates with the LSV in the mid calf at 22cm. LSV is competent distal to this and remains so to the ankle.

Transverse (AP) dimensions of SSV: Proximal calf- 0.5cm, Mid calf - 0.47cm, Distal calf - 0.26cm.



Assessed by Jimmy Chen Printed on 07/12/2018 at 10:50 am

Outcome	DVT negative, Incomp	etence		
	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Patent	Competent	Patent	Competent
Profunda Vein	Patent	Competent	Patent	Competent
Superficial Femoral Vein	Patent	Competent	Patent	Competent
Popliteal Vein	Patent	Competent	Patent	Competent
Posterior Tibial Vein	Patent	Competent	Patent	Competent
Anterior Tibial Vein	Patent	Competent	Patent	Competent
Peroneal Vein	Patent	Competent	Patent	Competent
Soleal Vein	Patent		Patent	
Gastrocnemius	Patent		Patent	
Superficial Veins	Patent	Competent	Patent	Uncompatibility
Saphenofemoral Junction	Patent	Competent		Incompetent
Saphenous Vein Above	Patent	Competent	Patent	Isolated Incompetence
. Saphenous Vein Below	Patent		Patent	Competent
ein of Giacomini	Not Identified	Competent	Patent	Competent
Saphenopopiteal Junction	Patent	Competent	Not Identified	
S Saphenous Vein	ratent	Competent	Patent	Competent
vidence of D.V.T.				
bove the knee	No		No	
Popliteal	No		No	
Below the knee	No		No	
Notes				
	R LIMB VENOUS DUF	PLEX ASSESSMENT		
		erficial oedema and patie	ent habitus.	
normal response or	n Valsalva manoeuvre,	the common femoral veir suggesting proximal veir so evidence of previous I	n patency bilaterally. A	ration and a I visualised deep
All measurements a	are proximal to the med	dial malleolus unless oth	erwise stated.	
RIGHT SFJ is patent and c	ompetent. LSV is pate	nt and competent along	its length.	
Assessed by	Jimmy Chen			

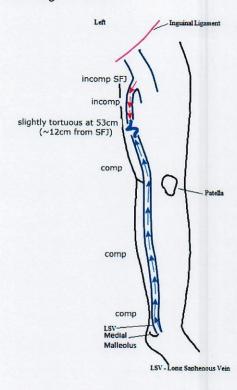
SPJ not identified. SSV is patent and competent and is continuous with a competent vein of Giacomini.

LEFT

SFJ is patent and incompetent. LSV is patent and incompetent before vessel becomes slightly tortuous in the prox thigh at 53cm (~12cm from SFJ), distal to this, LSV becomes competent and remains so to the ankle.

SPJ not identified. SSV is patent and competent and is continuous with a competent vein of Giacomini.

Transverse (AP) dimensions of LSV: Proximal thigh- 0.7cm, Mid thigh - 0.63cm, Distal thigh - 0.57cm.



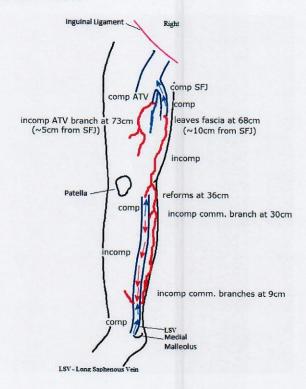
Assessed by Jimmy Chen Printed on 07/12/2018 at 10:51 am

Outcome	DVT negative, Incompe	tence		
	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	Patent			
Gastrocnemius	Patent			
Superficial Veins	Patent	Competent		
Saphenofemoral Junction		Competent		
L Saphenous Vein Above	Patent	Isolated Incompetence		
L Saphenous Vein Below	Patent	Isolated Incompetence		
Vein of Giacomini	Not Identified			
Saphenopopiteal Junction	Patent	Competent		
S Saphenous Vein	Patent	Competent		
Evidence of D.V.T.				
Above the knee	No			
Popliteal	No			
Below the knee	No			
Notes				
	IB VENOUS DUPLEX	ASSESSMENT		
on Valsalva manoeu	d. Flow in the commo ovre, suggesting proxing no evidence of previou	n femoral vein is phasio nal vein patency. All vis us DVT.	with respiration and a ualised deep veins app	normal response ear widely patent
All measurements a	re proximal to the med	ial malleolus unless oth	erwise stated.	
anterior thigh varico	ompetent proximally wi sities. Distal to this, AT	th an incompetent bran V remains competent in SV leaves the fascia at	n the thigh.	
Assessed by	Jimmy Chen			
Printed on 07/12/20		Chec	cked by	

incompetent in the thigh. LSV reforms in the prox calf at 36cm and becomes competent for a short section before an incompetent branch communicates in the prox calf at 30cm. LSV becomes incompetent distal to this. Incompetent branches communicate in the distal calf at 9cm, distal to this, LSV becomes competent and remains so to the ankle.

SPJ is patent and competent. SSV is patent and competent along its length.

Transverse (AP) dimensions of LSV: Proximal thigh- 0.34cm, Proximal calf- 0.35cm, Mid calf - 0.45cm, Distal calf - 0.4cm.



Assessed by Jimmy Chen Printed on 07/12/2018 at 10:47 am

Outcome I	DVT negative, Incompe	etence		
	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
nternal Iliac Vein	5			
Common Femoral Vein	Patent	Competent	Patent	Competent
Profunda Vein	Patent	Competent	Patent	Competent
Superficial Femoral Vein	Patent	Competent	Patent	Competent
opliteal Vein	Patent	Competent	Patent	Competent
Posterior Tibial Vein	Patent	Competent	Patent	Isolated Incompetence
Interior Tibial Vein	Patent	Competent	Patent	Competent
Peroneal Vein	Patent	Competent	Patent	Competent
Soleal Vein	Patent		Patent	
Gastrocnemius	Patent		Patent	
Superficial Veins	Not Identified			
Saphenofemoral Junction	Not Identified		Not Identified	
Saphenous Vein Above	Not Identified		Occlusive and non-occ	Mixed Thrombus
Saphenous Vein Below	Patent	Incompetent	Patent	Incompetent
ein of Giacomini	Patent	Competent	Not Identified	
aphenopopiteal Junction	Patent	Competent	Patent	Competent
Saphenous Vein	Patent	Incompetent	Patent	Competent
vidence of D.V.T.				
bove the knee	No		No	
opliteal	No		No	
Selow the knee	No		No	
lotes				
SILATERAL LOWER	LIMB VENOUS DUP	PLEX ASSESSMENT - sc	anned in clinic.	
liac veins not viewed	bilaterally. Flow in t	he common femoral vein	s are phasic with respirat	tion and a
normal response on \	/alsalva manoeuvre,	suggesting proximal veir	n patency bilaterally.	
all measurements are	e proximal to the med	lial malleolus unless othe	erwise stated.	
RIGHT				
	eins appear patent an	d competent with no evic	dence of previous DVT.	
	V not identified in the	thigh. LSV reforms at th	ne level of the knee at 46	cm.
SFJ not identified. LS SV is patent and inc	ompetent. Incompete	ent branches noted in the	prox can at 37cm and 3	zem, which form
SFJ not identified. LS LSV is patent and inc Assessed by	ompetent. Incompete	ent branches noted in the	prox can at 37cm and 3.	zem, which form
SV is patent and inc	Jimmy Chen		ked by	zem, which form

Varicose vein

Reason

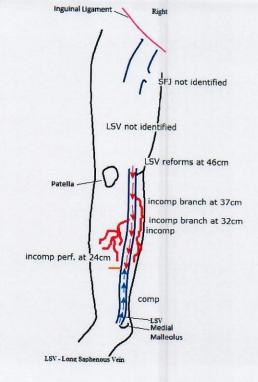
calf varicosities. Incompetent perforator noted in the mid calf at 24cm. Distal to this, LSV becomes competent and remains so to the ankle. SPJ is patent and competent. Vein of Giacomini is patent and competent. Prox-mid SSV is patent and incompetent. Incompetent branch communicates in the mid calf at 31cm, distal to this, S\$V becomes competent and remains so to the ankle. Transverse (AP) dimensions of LSV: Proximal calf- 0.6cm. Mid calf - 0.3cm. Distal calf - 0.3cm. Transverse (AP) dimensions of SSV: Proximal calf- 0.43cm, Mid calf - 0.28cm, Distal calf - 0.16cm. LEFT All visualised deep veins, proximal to and including the popliteal vein, appear patent and competent with no evidence of previous DVT. Isolated incompetence noted in 1x posterior tibial vein. All other deep calf veins appear patent and competent with no evidence of previous DVT. ?incompetent vein arises above the level of the SFJ ?pelvic vein. SFJ not identified. Neo-vascularised tissue noted in the groin. LSV not identified in the prox thigh. LSV reforms in the mid thigh at 63cm which is incompetent with evidence of non-occlusive thrombophlebitis. Incompetent branch leaves the mid thigh at ~58cm and forms visible thigh and knee varicosities. Distal to this, LSV is occluded for a short section before becoming patent and incompetent in the distal thigh at Difficulty assessing calf due to patient discomfort. However, where seen, LSV is patent and incompetent in the calf. Incompetent branches noted in the prox and mid calf at 37cm and 31cm which form calf varicosities. Distal to this, LSV remains incompetent to the ankle. SPJ is patent and competent. SSV is patent and competent along its length. Transverse (AP) dimensions of LSV: Mid thigh - 0.55cm Distal thigh - 0.89 Proximal calf- 0.62cm, Mid calf - 0.3cm, Distal calf - 0.39cm.

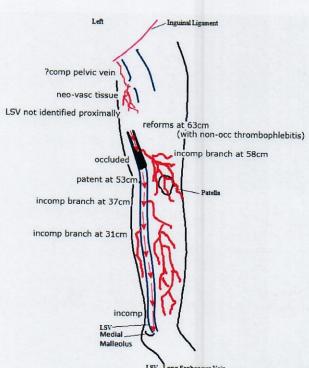
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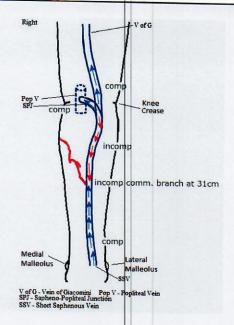
Assessed by

Printed on 07/12/2018 at 10:48 am

Jimmy Chen







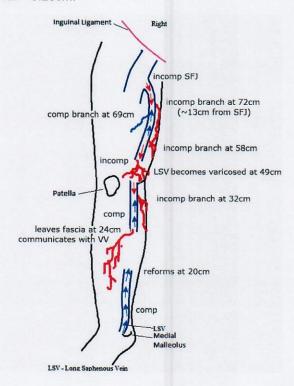
Assessed by Jimmy Chen Printed on 07/12/2018 at 10:48 am

Outcome	To regative, incompe	eterice		
	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Patent	Competent		
Profunda Vein	Patent	Competent		
Superficial Femoral Vein	Patent	Competent		
Popliteal Vein	Patent	Competent		
Posterior Tibial Vein	Patent	Competent		
Anterior Tibial Vein	Patent	Competent		
Peroneal Vein	Patent	Competent		
Soleal Vein	Patent			
Gastrocnemius	Patent			
Superficial Veins	Patent	lana mandant	_	
Saphenofemoral Junction		Incompetent		
Saphenous Vein Above	Patent	Isolated Incompetence		
_ Saphenous Vein Below	Patent	Isolated Incompetence		
Vein of Giacomini	Not Identified			
Saphenopopiteal Junction	Patent	Competent		
S Saphenous Vein	Patent	Competent		
Evidence of D.V.T.				
Above the knee	No			
Popliteal	No			
Below the knee	No			
Natas				
Notes				
RIGHT LOWER LIMB	VENOUS DUPLEX	ASSESSMENT		
the distal common fen suggesting proximal v	noral vein is phasic vein patency.	femoral vein not clearly vis with respiration and a norm and competent with no evide	nal response on Vals	alva manoeuvre ,
All measurements are	proximal to the med	dial malleolus unless other	wise stated.	
thigh at 72cm (~13cm	from the SFJ), and	tent, incompetent proximal forms visible medial thigh unch in the prox thigh at 69	varicosities. Distal to	the branch, LSV
Assessed by	Jimmy Chen			
Printed on 07/12/2018		Checke	ed by	
		SHOOK		

prox-mid thigh at 58cm and communicates with thigh varicosities. LSV becomes incompetent distal to this, and remains so to the distal thigh where the LSV becomes varicosed at 49cm. Incompetent branch in the prox calf at 32cm forming calf varicosities. Distal to this, LSV becomes small calibre and competent before leaving the fascia and communicating with varicosities at 24cm. LSV not identified distal to this, however reforms in the mid calf at 20cm and is competent to the ankle.

SPJ is patent and competent. SSV is patent and competent and is continuous with a competent vein of Giacomini.

Transverse (AP) dimensions of LSV:
Proximal thigh - 0.8cm,
Mid thigh - 0.35cm,
Distal thigh - 0.45cm.
Proximal calf- 0.41cm,
Mid calf - 0.29cm,
Distal calf - 0.25cm.



Assessed by Jimmy Chen

Printed on 07/12/2018 at 10:45 am Checked by

	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
nternal Iliac Vein				
Common Femoral Vein	Patent	Competent	Patent	Competent
Profunda Vein	Patent	Competent	Patent	Competent
Superficial Femoral Vein	Patent	Incompetent	Patent	Competent
Popliteal Vein	Patent	Incompetent	Patent	Competent
Posterior Tibial Vein	Patent	Competent	Patent	Competent
Anterior Tibial Vein	Patent	Competent	Patent	Competent
Peroneal Vein	Patent	Competent	Patent	Competent
Soleal Vein	Patent		Patent	
Gastrocnemius	Patent		Patent	
Superficial Veins	Patent	Compatent	Detect	0
Saphenofemoral Junction	Patent	Competent	Patent	Competent
Saphenous Vein Above	Patent	Competent	Patent	Isolated Incompetence
_ Saphenous Vein Below	Patent	Competent	Patent	Isolated Incompetence
Vein of Giacomini	Not Identified		Patent	Competent
Saphenopopiteal Junction	Not Identified		Not Identified	
S Saphenous Vein	Patent	Competent	Patent	Competent
Evidence of D.V.T.				
Above the knee	No		No	
Popliteal	No		No	
Below the knee	No		No	
Notes				
BILATERAL LOWER I	LIMB VENOUS DUI	PLEX ASSESSMENT		
on Valsalva manoeuvi Common femoral and DVT. The superficial f	re, suggesting proxi profunda femoris v emoral and poplitea	mal vein patency. eins appear patent and c Il vein appears incompet	with respiration and a no competent with no eviden ent, with no evidence of co evidence of previous D	nce of previous previous DVT.
All measurements are	proximal to the me	dial malleolus unless oth	erwise stated.	
SFJ is patent and con	npetent. LSV is pate	ent and competent along	its length. Competent br	anch noted in the
Assessed by	Jimmy Chen			

mid thigh at 56cm. Further competent branches noted in the prox-mid calf at 31cm and 14cm, respectively. Competent perforator in the mid calf at 13cm.

SPJ not identified. SSV reforms in the prox calf at 30cm and appears competent along its length.

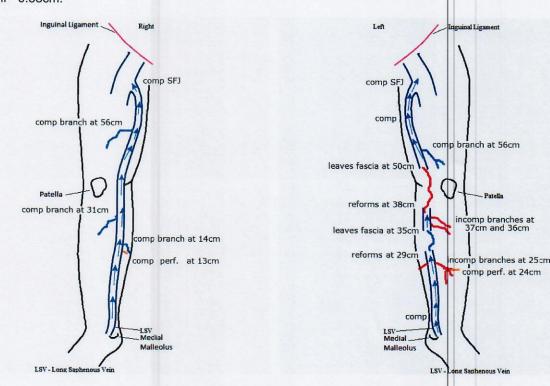
LEFT

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 patent and competent with no evidence of previous DVT.

SFJ is patent and competent. LSV is patent and competent in the prox-mid thigh. Competent branch noted in the mid thigh at 56cm, distal to this, LSV remains competent for a short section before leaving the fascia in the distal thigh at 50cm, and becoming incompetent to the knee. LSV reforms in the prox calf at 38cm and is competent. Incompetent branches in the prox calf at 37cm and 36cm, respectively. LSV leaves the fascia in the prox-mid calf at 35cm and remains competent, and reforms in the mid calf at 29cm. Competent branches leaves at the mid calf at 25cm and communicate with a competent perforator at 24cm, distal to the branches, LSV remains competent to the ankle.

SPJ not identified. SSV is patent and competent and is continuous with a competent vein of Giacomini.

Transverse (AP) dimensions of LSV: Proximal calf- 0.3cm, Mid calf - 0.29cm, Distal calf - 0.38cm.



Assessed by Jimmy Chen Printed on 07/12/2018 at 10:45 am

Outcome	DVT negative, Incompe	tence		
Deep Veins	Right Patency	Competency	Left Patency	Competency
Common Iliac Vein		Competency	Patericy	Competency
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Widely Patent	Competent		
Profunda Vein	Widely Patent	Competent		
Superficial Femoral Vein	Widely Patent	Incompetent		
Popliteal Vein	Widely Patent	Incompetent		
Posterior Tibial Vein	Widely Patent	Competent		
Anterior Tibial Vein	Widely Patent	Competent		
Peroneal Vein	Widely Patent	Incompetent		
Soleal Vein	Patent			
Gastrocnemius	Patent			
Casaconemias				
Superficial Veins	D			
Saphenofemoral Junction	Patent	Competent		
L Saphenous Vein Above	Patent	Isolated Incompetence		
L Saphenous Vein Below	Patent	Isolated Incompetence		
Vein of Giacomini	Patent	Competent		
Saphenopopiteal Junction	Not Identified			
S Saphenous Vein	Patent	Competent		
Evidence of D.V.T.				
Above the knee	No			
Popliteal	No			
Below the knee	No			
Notes				
	AD VENOUS BUDGEY	ACCECCMENT		
RIGHT LOWER LIN	IB VENOUS DUPLEX	ASSESSMENT		
on Valsalva manoeu appear widely pater superficial femoral,	uvre, suggesting proxing and competent with r	nal vein patency. Comn no evidence of previous eal veins. All other deep	with respiration and a mon femoral and profund the DVT. Incompetent flow calf veins appear wide	da femoris veins
All measurements a	re proximal to the med	ial malleolus unless oth	nerwise stated.	
SFJ is patent and co thigh. ATV leaves th	ompetent. ATV is pater se fascia in the mid thig	nt, competent and track h at 53cm. and become	s relatively linear within es incompetent, and for	a fascia in the prox ms thigh
Assessed by	Jimmy Chen			
Printed on 07/12/20		Chec	cked by	

varicosities.

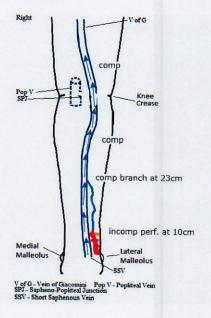
LSV is patent, competent and tracks relatively linear within a fascia in the prox-mid thigh perforator noted in the prox-mid thigh at 60cm. Incompetent branch leaves the mid thigh at 57cm, and communicates with thigh varicosities. Distal to this, LSV leaves the fascia at 56cm and becomes incompetent in the distal thigh. LSV reforms in the prox calf.

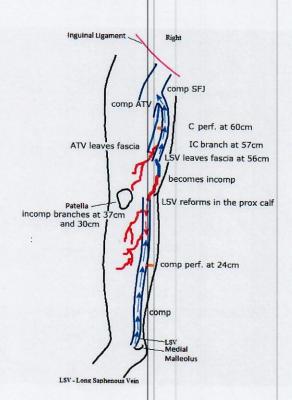
Incompetent branch leaves the prox calf at 37cm, distal to this, LSV remains incompetent before an further incompetent branch in the mid calf at 30cm. LSV becomes competent and remains so to the ankle. Competent perforator noted in the mid calf at 24cm.

Incompetent perforator noted in the distal calf and forms postero-lateral varicosities.

SPJ not identified. SSV is patent and competent along its length and is continuous with a competent vein of Giacomini. Competent branch noted in the mid calf at 23cm and communicates with distal calf varicosities.

Transverse (AP) dimensions of LSV: Proximal thigh- 0.54cm,
Mid thigh - 0.6cm,
Distal thigh - 0.72cm.
Proximal calf- 0.47cm,
Mid calf - 0.44cm,
Distal calf - 0.32cm.





Assessed by Jimmy Chen Printed on 07/12/2018 at 10:46 am

Outcome	Incompetence			
	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein			Patent	Competent
Profunda Vein			Patent	Competent
Superficial Femoral Vein			Patent	Competent
Popliteal Vein			Patent	Competent
Posterior Tibial Vein			Patent	Competent
Anterior Tibial Vein			Patent	Competent
Peroneal Vein			Patent	Competent
Soleal Vein			Patent	
Gastrocnemius			Patent	
Superficial Veins			Patent	Competent
Saphenofemoral Junctio			Not Identified	Competent
Saphenous Vein Above			Patent	Incompositors
Saphenous Vein Below	v -		Patent	Incompetent
Vein of Giacomini			Not Identified	Competent
Saphenopopiteal Junctio	on		Patent	Competent
S Saphenous Vein			Faterit	Competent
Evidence of D.V.T.				
Above the knee			No	
Popliteal			No	
Below the knee			No	
Notes				
	MB VENOUS DUPLEX	ASSESSMENT - PREVIO	OUS EVLA.	
on Valsalva mano	wed. Flow in the commeuvre, suggesting proxocolors	non femoral vein is phasic imal vein patency. All visu DVT.	with respiration and a no ualised deep veins appea	ormal response or patent and
All measurements	are proximal to the me	edial malleolus unless oth	erwise stated.	
LSV is patent and	competent. LSV not id incompetent in the cal calf at 19cm and incom	entified in the thigh. f. Incompetent branch not npetent perforator at 18cm	ed in the prox calf at 28c	m. Competent
Assessed by	Jimmy Chen			
Printed on 07/12/2		Chec	ked by	
		31100		

Varicose vein

Reason

SPJ not identified. SSV is patent and competent and is continuous with a competent vein of Giacomini. Transverse (AP) dimensions of LSV: Proximal calf- 0.42cm, Mid calf - 0.5cm, Distal calf - 0.4cm. Left Inguinal Ligament LSV not identified incomp incomp branch at 28cm comp branch at 19cm incomp perf. at 18cm incomp Assessed by Jimmy Chen Printed on 07/12/2018 at 10:42 am Checked by

Outcome [OVT negative, Superficial	thrombophlebitis, Incom	npetence	
Deep Veins	Right Patency	Competency	Left Patency	Competency
Common Iliac Vein				Competency
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Patent	Competent	Patent	Competent
Profunda Vein	Patent	Competent	Patent	Competent
Superficial Femoral Vein	Patent	Competent	Patent	Competent
Popliteal Vein	Patent	Competent	Patent	Competent
Posterior Tibial Vein	Patent	Competent	Patent	Competent
Anterior Tibial Vein	Patent	Competent	Patent	Competent
Peroneal Vein	Patent	Competent	Patent	Competent
Soleal Vein	Patent		Patent	
Gastrocnemius	Patent		Patent	
Gastrochemias				
Superficial Veins				
Saphenofemoral Junction	Patent	Competent	Patent	Incompetent
L Saphenous Vein Above	Patent	Competent	Patent	Isolated Incompetence
L Saphenous Vein Below	Patent	Competent	Patent	Competent
Vein of Giacomini	Patent	Competent	Patent	Competent
Saphenopopiteal Junction	Patent	Competent	Not Identified	
S Saphenous Vein	Areas of Thrombus	Old Thrombus	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 DUPL	EX ASSESSMENT		
Iliac veins not viewed normal response on \	bilaterally. Flow in the	e common femoral vei uggesting proximal ve	ns are phasic with respir in patency bilaterally. Al DVT bilaterally.	
All measurements are	e proximal to the media	al malleolus unless oth	nerwise stated.	
SPJ is patent and co		omini is patent and con	its length. npetent. Old, non-occlus patent and is competent	
Assessed by	Jimmy Chen			
Printed on 07/12/201	8 at 10:43 am	Chec	cked by	

Varicose vein

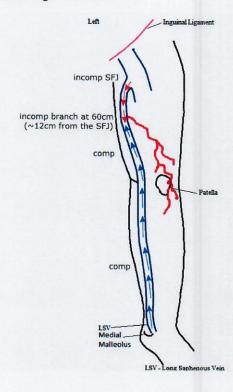
Reason

LEFT

SFJ is patent and incompetent. LSV is patent and incompetent in the proximally with an incompetent branch in the prox thigh at 60 (~12cm from the SFJ), and tracks distally to form thigh and knee varicosities. Distal to the branch, LSV becomes competent and remains so to the ankle.

SPJ not identified. SSV is patent and competent and is continuous with a competent vein of Giacomini.

Transverse (AP) dimensions of LSV: Proximal thigh- 0.53cm, Mid thigh - 0.41cm, Distal thigh - 0.31cm.



Assessed by Jimmy Chen

Printed on 07/12/2018 at 10:43 am Checked by

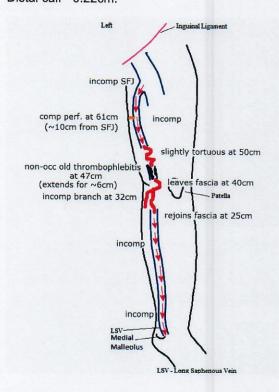
Outcome	Incompetence, Superfi	cial thrombophlebitis		
	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein			Widely Patent	Competent
Profunda Vein			Widely Patent	Competent
Superficial Femoral Vein			Widely 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			Patent	Incompetent
L Saphenous Vein Above			Patent	Incompetent
L Saphenous Vein Below			Patent	Incompetent
Vein of Giacomini			Widely Patent	Competent
Saphenopopiteal Junction			Not Identified	
S Saphenous Vein			Patent	Isolated Incompetence
Evidence of D.V.T.				
Above the knee				
Popliteal				
Below the knee				
Notes				
LEFT LOWER LIME	VENOUS DUPLEX	ASSESSMENT		
on Valsalva manoeu		mal vein patency. All visi	with respiration and a nor ualised deep veins appear	
All measurements a	re proximal to the me	dial malleolus unless oth	erwise stated.	
in the prox thigh at 6 Non-occlusive old s	S1cm (~10cm from SF uperficial thrombophle	J). LSV becomes slightly bitis identified in the mid	the prox-mid thigh. Compe tortuous in the mid thigh distal thigh at 47cm and e the distal thigh at 40cm.	at 50cm.
Assessed by	Jimmy Chen			
Printed on 07/12/20	18 at 10:40 am	Chec	eked by	

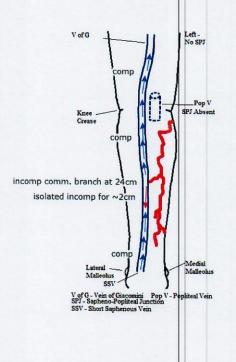
SSV. Distal to this, LSV remains incompetent and rejoins the fascia in the prox-mid calf at 25cm and is incompetent to the ankle.

SPJ not identified. The prox SSV is patent and competent and is continuous with a competent vein of Giacomini. Incompetent branch communicates in the mid SSV at 24cm, distal to this, SSV becomes incompetent for a short section (~2cm) before becoming competent to the ankle.

Transverse (AP) dimensions of LSV:
Proximal thigh- 1.1cm,
Mid thigh - 0.8cm,
Distal thigh - 0.72cm.
Proximal calf- 0.64cm,
Mid calf - 0.56cm,
Distal calf - 0.39cm.

Transverse (AP) dimensions of SSV: Proximal calf- 0.27cm, Mid calf - 0.53cm, Distal calf - 0.22cm.





Assessed by Jimmy Chen Printed on 07/12/2018 at 10:40 am

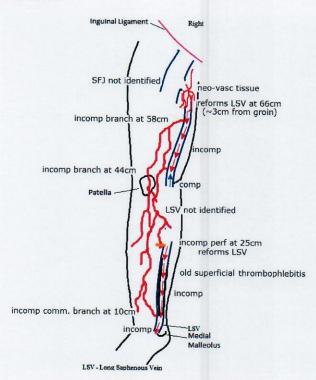
Common Iliac Vein External Iliac Vein Internal Iliac Vein Common Femoral Vein Profunda Vein Superficial Femoral Vein Popiliteal Vein Widely Patent Widely Patent Competent Widely Patent Incompetent Popiliteal Vein Widely Patent Widely Patent Competent Posterior Tibial Vein Widely Patent Widely Patent Competent Posterior Tibial Vein Widely Patent Competent Competent Competent Patent Deroneal Vein Patent Patent Soleal Vein Patent Saphenosemius Patent Isolated Incompetence Saphenose Vein Above Patent Incompetent Incompetent Patent Competent Competent Patent Competent Competent Deroneal Vein Above Patent Competent Competent Deroneal Vein Above Patent Competent Competent Competent Deroneal Vein Competent Competent Competent Deroneal Vein Competent Competent Competent Deroneal Vein Competent Competent Deroneal Vein C	- Cutcome				
Common Illac Vein External Illac Vein Internal Illac Vein Common Femoral Vein Producida Vein Producida Vein Producida Vein Producida Vein Populacida Vein Popu		Right		Left	
External Iliac Vein Internal Iliac Vein Common Femoral Vein Widely Patent Competent	Deep Veins	Patency	Competency	Patency	Competency
Internal Iliac Vein Common Femoral Vein Common Femoral Vein Widely Patent Competent	Common Iliac Vein				
Common Femoral Vein Widely Patent Competent Widely Patent Competent Widely Patent Competent Widely Patent Incompetent Widely Patent Incompetent Widely Patent Incompetent Widely Patent Competent Widely Patent Incompetent Widely Patent Competent Patent Saphenous Vein Nove Patent Incompetent Patent Competent	External Iliac Vein				
Profunds Vein Widely Patent Competent Superficial Pemoral Vein Widely Patent Incompetent Widely Patent Incompetent Populated Vein Widely Patent Competent Patent Tibial Vein Widely Patent Competent Patent Disal Vein Widely Patent Competent Patent Soleal Vein Patent Patent Soleal Vein Soleal Vein Rove Patent Incompetence Patent Incompetent Patent Patent Competent Patent Compe	Internal Iliac Vein				
Superficial Femoral Vein Widely Patent Competent Poptieal Vein Widely Patent Competent Poptieal Vein Widely Patent Competent Percent Widely Patent Competent Patent Saphenous Vein Wein Patent Saphenous Vein Above Patent Incompetent Patent Competent Pat	Common Femoral Vein	Widely Patent	Competent	Me Committee	
Poptitical Vain Posterior Tibial Vein Peroneal Vein Peroneal Vein Patent Competent Patent Patent Patent Patent Competent Patent Patent Patent Patent Competent Patent	Profunda Vein	Widely Patent	Competent		
Occeptent Tibial Vein Widely Patent Competent Peroneal Vein Widely Patent Competent Soleal Vein Patent Competent Soleal Vein Patent Competent Soleal Vein Patent Competent Saphenous Vein Above Patent Incompetence Saphenous Vein Above Patent Incompetent Saphenous Vein Above Patent Competent Saphenous Vein Above Patent Incompetent Saphenous Vein Above Patent Competent Saphenous Vein Patent Competent Saphenopopiteal Junction Patent Competent Saphenopopiteal Vein Patent Competent Saphenopopiteal Vein Patent Competent Saphenopopiteal Vein Patent Competent Saphenopopiteal Vein Vein Vein Vein Vein Vein Vein Vein	Superficial Femoral Vein	Widely Patent	Competent		
Widely Patent Competent Pa	Popliteal Vein	Widely Patent	Incompetent		
Peroneal Vein Widely Patent Competent Patent Saphenoremoral Junction Saphenoremoral Junction Not Identified Saphenoremoral Junction Patent Isolated Incompetence Saphenoremoral Junction Patent Incompetent Saphenoremoral Junction Patent Incompetent Patent Competent Saphenopopiteal Junction Soletow the knee No Notes RIGHT LOWER LIMB VENOUS DUPLEX ASSESSMENT - PREVIOUS FOAM SCLERO* HERAPY 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, proximal to the popiliteal vein, appear widely patent and competent with no evidence of previous DVT. The popiliteal vein is noompetent, however no evidence of previous DVT. detected. All deep calf veins appear widely patent and competent with no evidence of previous DVT. All measurements are proximal to the medial malleolus unless otherwise stated. SFJ not identified. Neo-vascularised tissue noted in the groin which appears to reform the LSV in the prox high at 66cm (~3cm from groin), and appears patent and incompetent tracking in a relatively linear fashion Assessed by Jimmy Chen	Posterior Tibial Vein	Widely Patent	Competent		
Soleal Vein Soleal Vein Sastrocnemius Patent Patent Saphenofemoral Junction Saphenofemoral Junction Saphenofemoral Junction Saphenose Vein Above Patent Incompetent Vein of Glacomini Patent Competent Saphenopopiteal Junction Patent Competent Competent Soldenopopiteal Junction Saphenopopiteal Junction Saphenopopiteal Junction Patent Competent No Saphenopopiteal Junction Patent Competent No No Saphenopopiteal Junction Patent Competent No No Notes RIGHT LOWER LIMB VENOUS DUPLEX ASSESSMENT - PREVIOUS FOAM SCLERO* THERAPY Islac 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, proximal to the popiliteal vein, appear widely patent and competent with no evidence of previous DVT. The popiliteal vein is phasic with respiration and a normal response on Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins, proximal to the popiliteal vein, appear widely patent and competent with no evidence of previous DVT. The popiliteal vein is phasic vein appear widely patent and competent with no evidence of previous DVT. All measurements are proximal to the medial malleolus unless otherwise stated. SFJ not identified. Neo-vascularised tissue noted in the groin which appears to reform the LSV in the prox high at 66cm (~3cm from groin), and appears patent and incompetent tracking in a relatively linear fashion	Anterior Tibial Vein	Widely Patent	Competent		
Sastrocnemius Patent Sastrocnemius Patent Saphenoral Junction Saphenoral Junction Saphenoral Junction Patent Incompetent Incompetent Patent Incompetent Patent Competent Patent Competent Patent Competent Patent Competent Patent Competent Saphenopopiteal Junction Saphenopopiteal Junction Saphenopopiteal Junction Saphenopopiteal Junction Saphenopopiteal Junction Saphenopopiteal Junction Patent Competent Competent Patent Patent Competent Patent Competent Patent Competent Patent Patent Competent Patent Patent Competent Patent Patent Competent No No No Patent Competent No No No Patent Patent Competent No No No No No No No No No N	Peroneal Vein	Widely Patent	Competent		
Superficial Veins Saphenous Vein Above Patent Isolated Incompetence Saphenous Vein Above Patent Isolated Incompetence Saphenous Vein Below Patent Icompetent Saphenous Vein Below Patent Competent Saphenous Vein Below Patent Competent Saphenous Vein Patent Competent Saphenous Vein Patent Competent Saphenous Vein Patent Competent Saphenous Vein Patent Competent Sevidence of D.V.T. Saphenous Vein No Saphenous Vein No Saphenous Vein Patent Competent Sevidence of D.V.T. Saphenous Vein No Saphenous Vein No Saphenous Vein Patent Competent Saphenous Vein Patent Saphenous Vein	Soleal Vein	Patent			
Saphenous Vein Above Patent Incompetent Saphenous Vein Above Patent Incompetent Saphenous Vein Below Patent Competent Saphenous Vein Patent Competent Solve Vein Vein Vein Vein Vein Vein Vein Vei	Gastrocnemius	Patent			
Assessed by Patent Isolated Incompetence Isolated Incompetence Isolated Incompetent Isolated Incompetent	Superficial Veins				
Saphenous Vein Below Patent Incompetent Petent Competent Patent Competent Political No Political No	Saphenofemoral Junction	Not Identified			
Patent Competent Saphenopopiteal Junction Patent Competent Saphenopopiteal Junction Patent Competent Saphenopopiteal Junction Patent Competent Sevidence of D.V.T. Shove the knee No	Saphenous Vein Above	Patent	Isolated Incompetence		
Patent Competent Saphenopopiteal Junction Saphenopopiteal Junction Saphenopopiteal Junction Patent Competent No No No No No No No No No N	Saphenous Vein Below	Patent	Incompetent		
Patent Competent Com	Vein of Giacomini	Patent	Competent		
Evidence of D.V.T. Above the knee No Notes RIGHT LOWER LIMB VENOUS DUPLEX ASSESSMENT - PREVIOUS FOAM SCLEROTHERAPY 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, proximal to the popliteal vein, appear widely patent and competent with no evidence of previous DVT. The popliteal vein is incompetent, however no evidence of previous DVT detected. All deep calf veins appear widely patent and competent with no evidence of previous DVT. All measurements are proximal to the medial malleolus unless otherwise stated. SFJ not identified. Neo-vascularised tissue noted in the groin which appears to reform the LSV in the prox high at 66cm (~3cm from groin), and appears patent and incompetent tracking in a relatively linear fashion.	Saphenopopiteal Junction	Patent	Competent		
No Notes RIGHT LOWER LIMB VENOUS DUPLEX ASSESSMENT - PREVIOUS FOAM SCLEROTHERAPY liac 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, proximal to the populiteal vein, appear widely patent and competent with no evidence of previous DVT. The popliteal vein is incompetent, however no evidence of previous DVT detected. All deep calf veins appear widely patent and competent with no evidence of previous DVT. All measurements are proximal to the medial malleolus unless otherwise stated. SFJ not identified. Neo-vascularised tissue noted in the groin which appears to reform the LSV in the prox high at 66cm (~3cm from groin), and appears patent and incompetent tracking in a relatively linear fashion.	S Saphenous Vein	Patent	Competent		
Notes RIGHT LOWER LIMB VENOUS DUPLEX ASSESSMENT - PREVIOUS FOAM SCLEROTHERAPY liac 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, proximal to the popliteal vein, appear widely patent and competent with no evidence of previous DVT. The popliteal vein is incompetent, however no evidence of previous DVT detected. All deep calf veins appear widely patent and competent with no evidence of previous DVT. All measurements are proximal to the medial malleolus unless otherwise stated. SFJ not identified. Neo-vascularised tissue noted in the groin which appears to reform the LSV in the prox high at 66cm (~3cm from groin), and appears patent and incompetent tracking in a relatively linear fashion assessed by Jimmy Chen	Evidence of D.V.T.				
Notes RIGHT LOWER LIMB VENOUS DUPLEX ASSESSMENT - PREVIOUS FOAM SCLERO THERAPY liac 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, proximal to the popliteal vein, appear widely patent and competent with no evidence of previous DVT. The popliteal vein is incompetent, however no evidence of previous DVT detected. All deep calf veins appear widely patent and competent with no evidence of previous DVT. All measurements are proximal to the medial malleolus unless otherwise stated. SFJ not identified. Neo-vascularised tissue noted in the groin which appears to reform the LSV in the prox high at 66cm (~3cm from groin), and appears patent and incompetent tracking in a relatively linear fashion assessed by Jimmy Chen	Above the knee	No			
Notes RIGHT LOWER LIMB VENOUS DUPLEX ASSESSMENT - PREVIOUS FOAM SCLEROTHERAPY liac 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, proximal to the popliteal vein, appear widely patent and competent with no evidence of previous DVT. The popliteal vein is incompetent, however no evidence of previous DVT detected. All deep calf veins appear widely patent and competent with no evidence of previous DVT. All measurements are proximal to the medial malleolus unless otherwise stated. SFJ not identified. Neo-vascularised tissue noted in the groin which appears to reform the LSV in the prox high at 66cm (~3cm from groin), and appears patent and incompetent tracking in a relatively linear fashion assessed by Jimmy Chen	Popliteal	No			
RIGHT LOWER LIMB VENOUS DUPLEX ASSESSMENT - PREVIOUS FOAM SCLERO THERAPY liac 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, proximal to the popliteal vein, appear widely patent and competent with no evidence of previous DVT. The popliteal vein is incompetent, however no evidence of previous DVT detected. All deep calf veins appear widely patent and competent with no evidence of previous DVT. All measurements are proximal to the medial malleolus unless otherwise stated. SFJ not identified. Neo-vascularised tissue noted in the groin which appears to reform the LSV in the prox high at 66cm (~3cm from groin), and appears patent and incompetent tracking in a relatively linear fashion. Assessed by Jimmy Chen	Below the knee	No			
liac 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, proximal to the popliteal vein, appear widely patent and competent with no evidence of previous DVT. The popliteal vein is incompetent, however no evidence of previous DVT detected. All deep calf veins appear widely patent and competent with no evidence of previous DVT. All measurements are proximal to the medial malleolus unless otherwise stated. SFJ not identified. Neo-vascularised tissue noted in the groin which appears to reform the LSV in the prox high at 66cm (~3cm from groin), and appears patent and incompetent tracking in a relatively linear fashion assessed by Jimmy Chen	Notes				
on Valsalva manoeuvre, suggesting proximal vein patency. All visualised deep veins, proximal to the popliteal vein, appear widely patent and competent with no evidence of previous DVT. The popliteal vein is incompetent, however no evidence of previous DVT detected. All deep calf veins appear widely patent and competent with no evidence of previous DVT. All measurements are proximal to the medial malleolus unless otherwise stated. SFJ not identified. Neo-vascularised tissue noted in the groin which appears to reform the LSV in the prox high at 66cm (~3cm from groin), and appears patent and incompetent tracking in a relatively linear fashion. Assessed by Jimmy Chen	RIGHT LOWER LIMB	VENOUS DUPLEX	ASSESSMENT - PREV	IOUS FOAM SCLERO	THERAPY
SFJ not identified. Neo-vascularised tissue noted in the groin which appears to reform the LSV in the prox high at 66cm (~3cm from groin), and appears patent and incompetent tracking in a relatively linear fashion Assessed by Jimmy Chen	on Valsalva manoeuv oopliteal vein, appear ncompetent, howeve	re, suggesting proxir widely patent and co r no evidence of prev	nal vein patency. All visu empetent with no eviden rious DVT detected. All	ualised deep veins, pro ce of previous DVT. Th	kimal to the e popliteal vein is
high at 66cm (~3cm from groin), and appears patent and incompetent tracking in a relatively linear fashion Assessed by Jimmy Chen	All measurements are	proximal to the med	ial malleolus unless oth	erwise stated.	
	SFJ not identified. Ne high at 66cm (~3cm f	o-vascularised tissue from groin), and appe	e noted in the groin whice ears patent and incompe	h appears to reform the	LSV in the prox vely linear fashion
	Assessed by	Jimmy Chen			
			Chec	ked by	

V - Foam sclerotherapy, Varicose vein

within the fascia in the prox-mid thigh. Incompetent branch in the prox thigh at 58cm, which tracks distally in the thigh. Distal to the branch, LSV remains incompetent. Incompetent branch noted in the distal thigh at 44cm, distal to this, LSV becomes competent and small calibre to the knee. LSV not identified at the level of the knee. Incompetent perforator reforms the LSV in the mid calf at 25cm and is incompetent with evidence of old superficial thrombophlebitis. Incompetent branch communicates at the distal calf at 10cm, LSV remains incompetent to the ankle.

Transverse (AP) dimensions of LSV:
Proximal thigh- 0.27cm,
Mid thigh - 0.27cm,
Distal thigh - 0.18cm.
Proximal calf- NI
Mid calf - 0.34cm,
Distal calf - 0.33cm.

SPJ is patent and competent. SSV is patent and competent and is continuous with a competent vein of Giacomini.



Assessed by Jimmy Chen Printed on 07/12/2018 at 10:41 am

Deep Veins	Right Patency	Competency	Left Patency	Competency
Common Iliac Vein				
xternal Iliac Vein				
ternal Iliac Vein				
ommon Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
ofunda Vein	Widely Patent	Competent	Widely Patent	Competent
perficial Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
pliteal Vein	Widely Patent	Slight Incompetence	Widely Patent	Competent
sterior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
terior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
roneal Vein	Widely Patent	Competent	Widely Patent	Competent
oleal Vein	Patent		Patent	
astrocnemius	Patent		Patent	
uperficial Veins				
aphenofemoral Junction	Patent	Incompetent	Patent	Incompetent
Saphenous Vein Above	Patent	Isolated Incompetence	Patent	Incompetent
Saphenous Vein Below	Patent	Incompetent	Patent	Isolated Incompetence
in of Giacomini	Patent	Competent	Patent	Competent
aphenopopiteal Junction	Not Identified		Not Identified	
Saphenous Vein	Patent	Competent	Patent	Competent
ridence of D.V.T.				
ove the knee	No		No	
pliteal	No		No	
elow the knee	No		No	
otes				
ILATERAL LOWER	LIMB VENOUS DU	PLEX ASSESSMENT		
		the common femoral veins a , suggesting proximal vein p		tion and a
Il measurements are	proximal to the me	dial malleolus unless otherw	vise stated.	
vidence of previous		popliteal vein appear widely	patent and competen	it with no

SFJ is patent and incompetent. LSV is patent and incompetent proximally. Incompetent branch noted in the prox thigh at 67cm (~6cm from groin) and becomes tortuous and form large thigh and knee varicosities. Distal to this, LSV is competent and becomes incompetent in the mid-distal thigh at 45cm. Incompetent branch noted in the distal thigh at 44cm and communicate with thigh varicosities. Distal to the branch LSV remains incompetent to the knee.

Incompetent branch leaves at the level of the knee and in the prox calf at 35cm and 28cm, respectively. Distal to thigh, LSV is incompetent to the ankle. Competent perforators noted in the mid calf at 23cm and 18cm. Incompetent perforator noted in the distal calf at 10cm giving rise to an incompetent branch that communicates with the LSV at the ankle.

SPJ not identified. SSV is patent and competent and is continuous with a competent vein of Giacomini.

Transverse (AP) dimensions of LSV:
Proximal thigh- 1.38cm,
Mid thigh - 0.5cm,
Distal thigh - 0.78cm.
Proximal calf- 0.7cm,
Mid calf - 0.72cm,
Distal calf - 0.94cm.

LEFT

All visualised deep veins appear widely patent and competent with no evidence of previous DVT.

?competent branch arises above the level of the SFJ ?pelvic origin.

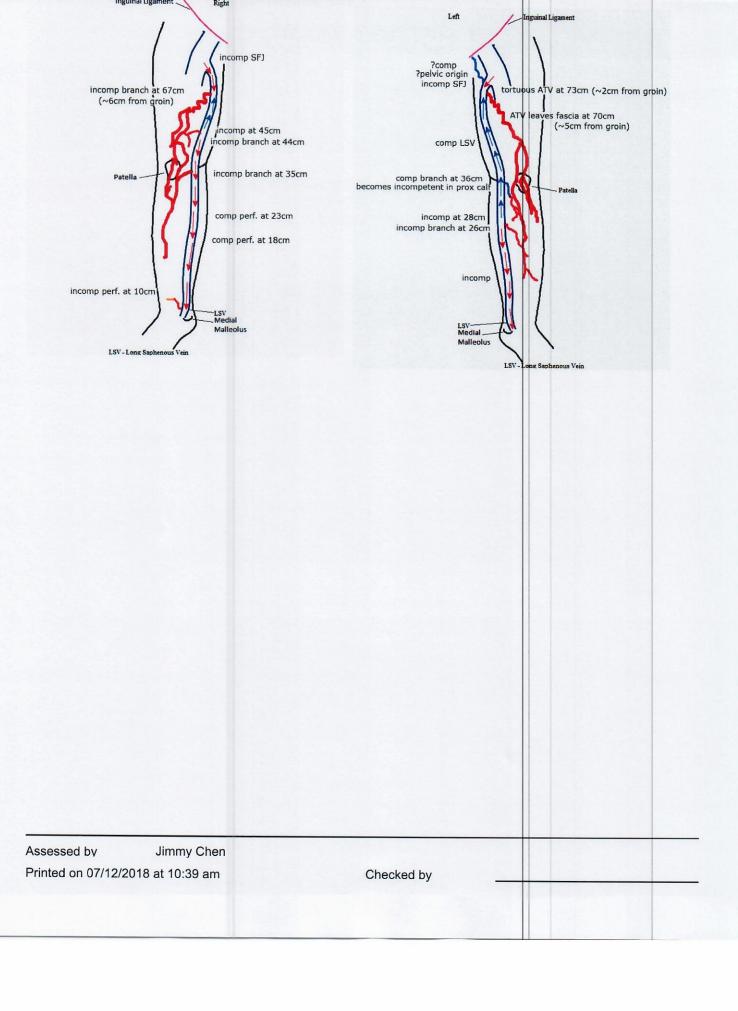
SFJ is patent and incompetent. Anterior thigh vein (ATV) is patent, incompetent and becomes tortuous at 73cm (~2cm from groin). ATV leaves the fascia at 70cm and forms large anterior thigh varicosities. LSV is patent and competent in the thigh. Small competent branch leaves at the level of the knee and becomes incompetent and varicosed in the mid calf.

Distal to this, LSV remains competent before becoming incompetent at the mid calf at 28cm, with an incompetent branch at 26cm. LSV remains incompetent to the ankle.

SPJ not identified. SSV is patent and competent and is continuous with a competent vein of Giacomini.

Transverse (AP) dimensions of LSV: Proximal thigh- 0.47cm,
Mid thigh - 0.37cm,
Distal thigh - 0.38cm.
Proximal calf- 0.313cm,
Mid calf - 0.43cm,
Distal calf - 0.37cm.

Assessed by	Jimmy Chen		
Printed on 07/12/2018	at 10:39 am	Checked by	



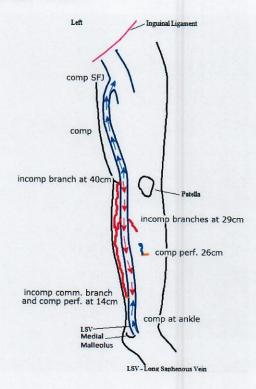
	D' I			
Doon Value	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein	Widely Detect	la		
Common Femoral Vein	Widely Patent	Competent	Widely Patent	Competent
Profunda Vein	Widely Patent	Competent	Widely Patent	Competent
Superficial 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	Patent		Patent	
Gastrocnemius	Patent		Patent	
Superficial Veins				
Saphenofemoral Junction	Patent	Competent	Patent	Competent
L Saphenous Vein Above	Patent	Competent	Patent	Competent
L Saphenous Vein Below	Patent	Competent	Patent	Isolated Incompetence
Vein of Giacomini	Patent	Competent	Not Identified	
Saphenopopiteal Junction	Patent	Competent	Patent	Competent
S Saphenous Vein	Patent	Competent	Patent	Competent
Evidence of D.V.T.	No		No	
Above the knee	No		No	
Popliteal	No		No	
Below the knee	,,,		NO	
Notes				
BILATERAL LOWER I	IMB VENOUS DUP	LEX ASSESSMENT		
normal response on V	alsalva manoeuvre,	ne common femoral veir suggesting proximal vei with no evidence of pre	ns are phasic with respira n patency bilaterally. All v vious DVT bilaterally.	tion and a risualised deep
All measurements are	proximal to the med	lial malleolus unless othe	erwise stated.	
RIGHT SFJ is patent and com SPJ is patent and com Giacomini.	npetent. LSV is pater npetent. SSV is pater	nt and competent along int and competent and is	ts length. continuous with a compe	etent vein of
Assessed by	Jimmy Chen			
Printed on 07/12/2018		Chec	ked by	

LEFT

SFJ is patent and competent. LSV is patent and competent in the thigh. Incompetent medial branch leaves at the level of the knee at 40cm. Distal to this, calf LSV becomes incompetent. Incompetent branches leave in the prox-mid calf at 29cm. Incompetent branch communicates in the distal calf with an perforator at 14cm. Distal to this, LSV becomes competent and remains so to the ankle. Competent perforator noted in the mid calf at 26cm.

SPJ is patent and competent. SSV is patent and competent along its length.

Transverse (AP) dimensions of LSV: Proximal calf- 0.33cm, Mid calf - 0.2cm, Distal calf - 0.32cm.



Assessed by Jimmy Chen Printed on 07/12/2018 at 10:39 am

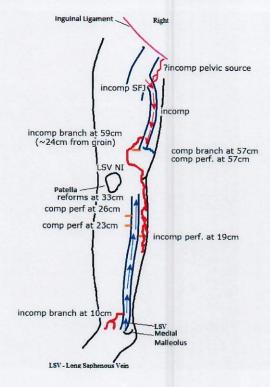
Outcome L	ov i negative, incompe	etence		
	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Widely Patent	Competent		
Profunda Vein	Widely Patent	Competent		
Superficial Femoral Vein	Widely Patent	Competent		
Popliteal Vein	Widely Patent	Competent		
Posterior Tibial Vein	Widely Patent	Competent		
Anterior Tibial Vein	Widely Patent	Competent		
Peroneal Vein	Widely Patent	Isolated Incompetence		
Soleal Vein	Widely Patent			
Gastrocnemius	Widely Patent			
Superficial Veins	Widely Patent	Incompetent		
Saphenofemoral Junction	Widely Patent	Incompetent		
L Saphenous Vein Above	Widely Patent	Competent		
L Saphenous Vein Below	Widely Patent	Competent		
Vein of Giacomini	Not Identified	Competent		
Saphenopopiteal Junction	Widely Patent	Competent		
S Saphenous Vein	Widely Faterit	Competent		
Evidence of D.V.T.				
Above the knee	No			
Popliteal	No			
Below the knee	No			
Notes				
	VENOUS DUPLEX	ASSESSMENT - scanne	ed in clinic	
on Valsalva manoeuvi including the popliteal	re, suggesting proxi vein, appear widely 1x peroneal vein. Al	on femoral vein is phasic mal vein patency. All visu patent and competent w I other deep calf veins ap	alised deep veins, pro- ith no evidence of prev	kimal to and ious DVT. Isolated
All measurements are	proximal to the med	dial malleolus unless othe	erwise stated.	
		of the SFJ ?pelvic source tent, incompetent and tra		r fashion with a
Assessed by	Jimmy Chen			
Printed on 07/12/2018	at 10:36 am	Check	ked by	

fascia in the prox-mid thigh. Incompetent branch leaves the mid thigh at 59cm (~24cm from the groin), and forms distal thigh and calf varicosities. Distal to this branch, LSV becomes competent before a competent branch leaves the mid thigh at 57cm, LSV immediately communicates with a competent perforator at this level and is not identified distal to this.

LSV reforms in the prox calf at 33cm and is competent. Competent perforators noted in the prox-mid calf at 26cm and 23cm. Further medial calf varicosities arise from an incompetent perforator in the mid calf at 19cm. LSV remains competent to the ankle with an incompetent branch at the distal calf at 10cm.

SPJ not identified. SSV is patent and competent and is continuous with a competent vein of Giacomini.

Transverse (AP) dimensions of LSV: Proximal thigh - 0.86cm, Mid-thigh - 0.26cm, Distal thigh NI Transverse (AP) dimensions of LSV: Proximal calf - 0.15cm, Mid - calf - 0.28cm, Distal calf - 0.28 cm.



Assessed by Jimmy Chen Printed on 07/12/2018 at 10:36 am

Outcome	DVT negative, Incomp	etence		
	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
nternal Iliac Vein				
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	Incompetent
opliteal Vein	Widely Patent	Competent	Widely Patent	Incompetent
osterior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
Interior Tibial Vein	Widely Patent	Competent	Widely Patent	Competent
Peroneal Vein	Widely Patent	Competent	Widely Patent	Competent
Soleal Vein	Widely Patent		Widely Patent	
Sastrocnemius	Widely Patent		Widely Patent	Competent
uperficial Veins	Patent	Competent	Detent	
aphenofemoral Junction	Not Identified	Competent	Patent	
Saphenous Vein Above	Patent		See notes	
Saphenous Vein Below	Patent	Competent	Patent	Isolated Incompetence
ein of Giacomini	Patent	Competent	Patent	Competent
Saphenopopiteal Junction	D			
Saphenous Vein	Patent	Competent	Patent	Competent
vidence of D.V.T.				
bove the knee	No		No	
opliteal	No		No	
elow the knee	No		No	
lotos				
Notes				
SILATERAL LOWER	LIMB VENOUS DUP	PLEX ASSESSMENT - S	canned in clinic	
All measurements ar	e proximal to the med	dial malleolus unless oth	erwise stated.	
RIGHT	. Flancia de a como			
on Valsalva manoeuv	re suggesting proxi	on temoral veins is phasi mal vein natency hilatera	c with respiration and a nally. All visualised deep ve	ormal response
	it with no evidence of		illy. All visualised deep ve	enis appear widery
OF the meters to				
or J is patent and coi	mpetent. LSV not ide	ntified in the thigh. ATV	is patent and incompeten	t in the prox-mid
calibre and competer	nt. ATV becomes inco	ompetent below the knee	cia in the mid thigh and be and forms anterior calf	varicosities I SV
		The state of the s	and forms differior call	anoosities, Lov
assessed by	Jimmy Chen			
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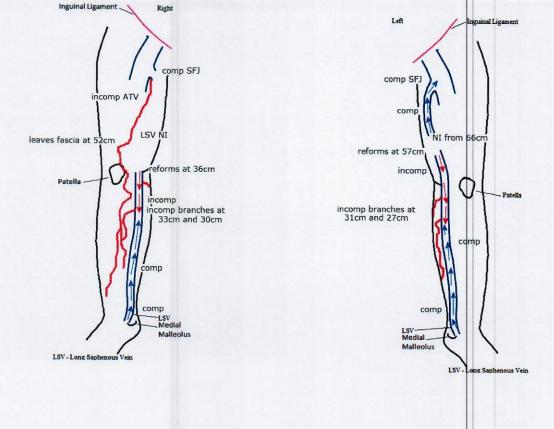
reforms at the level of the knee at 36cm and is incompetent. Incompetent branches in the prox calf at 33cm and 30cm respectively. Distal to this, LSV becomes competent and of small calibre to the ankle. SPJ not identified. SSV is competent and is continuous with a competent vein of Giacomini. Transverse (AP) dimensions of ATV: Proximal thigh- 0.3cm, Mid thigh - 0.29cm. Transverse (AP) dimensions of LSV: Proximal calf- 0.59cm, Mid calf - 0.21cm, Distal calf - 0.12cm. LEFT Iliac veins not viewed. Flow in the common femoral veins is phasic with respiration and a normal response on Valsalva manoeuvre, suggesting proximal vein patency bilaterally. The common femoral and profunda femoris veins appear widely patent and competent with no evidence of previous DVT. The Superficial femoral and popliteal veins appear patent and incompetent with no evidence of previous DVT identified . All deep calf veins appear widely patent and competent with no evidence of previous DVT. SFJ is patent and competent. LSV is patent and competent in the prox thigh. LSV not identified from 66cm and reforms in the mid thigh at 57cm, and appear incompetent to the knee. LSV is incompetent in the prox calf with incompetent branches at 31cm and 27cm, respectively. Distal to this, LSV becomes competent and of small calibre to the ankle. SPJ not identified. SSV is competent and is continuous with a competent vein of Giacomini. Transverse (AP) dimensions of LSV: Proximal thigh- 0.28cm, Mid thigh - NI Distal thigh - 0.48-0.58cm. Proximal calf- 0.52cm, Mid calf - 0.11cm. Distal calf - 0.12cm.

Checked by

Assessed by

Printed on 07/12/2018 at 10:38 am

Jimmy Chen



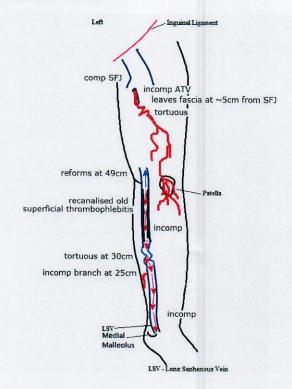
Assessed by Jimmy Chen Printed on 07/12/2018 at 10:38 am

Outcome	DVT negative, Incomp	petence		
	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			Patent	
Gastrocnemius			Patent	
Superficial Veins				
Saphenofemoral Junction	1		Patent	
L Saphenous Vein Above			Not Identified	
_ Saphenous Vein Below			See notes	
Vein of Giacomini			Patent	Competent
Saphenopopiteal Junction	n		Not Identified	
S Saphenous Vein			Patent	Competent
Evidence of D.V.T.				
Above the knee			No	
Popliteal			No	
Below the knee			No	
Notes				
LEFT LOWER LIM	MB VENOUS DUPLEX	ASSESSMENT - Scanne	d in clinic.	
on Valsalva mano		kimal vein patency. All vis	with respiration and a no ualised deep veins appea	
All measurements	are proximal to the m	edial malleolus unless oth	erwise stated.	
from the SFJ and LSV reforms in the	is tortuous. ATV contir e distal thigh at 49cm a	nues to form varicosities in and appears competent for	of the SFJ and leaves the the thigh and at the knew or a short section before b unalised superficial thromb	e. ecoming
Assessed by	Jimmy Chen			

becomes slightly tortuous in the prox-mid calf at 30cm, with an incompetent branch in the mid calf at 25cm. Distal to this, LSV remains incompetent to the ankle.

SPJ not identified. SSV is patent and competent and is continuous with a competent vein of Giacomini.

Transverse (AP) dimensions of LSV: Proximal calf- 0.58cm, Mid calf - 0.49cm, Distal calf - 0.36cm.



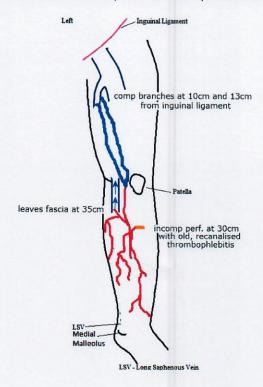
Assessed by Jimmy Chen Printed on 07/12/2018 at 10:34 am

Outcome	DVT positive - chronic	c, Occlusion, Superficial thro	mbophlebitis	
	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
nternal Iliac Vein			Patent	Competent
Common Femoral Vein			Patent	Competent
Profunda Vein			Patent	Competent
superficial Femoral Vein			Recanalised	Old Thrombus
Popliteal Vein				
Posterior Tibial Vein			Areas of Thrombus	Old Thrombus
Anterior Tibial Vein			Patent	Competent
Peroneal Vein			Patent	Isolated Incompetence
Soleal Vein				
Gastrocnemius				
Superficial Veins				
aphenofemoral Junction	n		Patent	Competent
Saphenous Vein Above			See notes	
Saphenous Vein Below	,		See notes	
ein of Giacomini			Patent	Competent
Saphenopopiteal Junctio	on		Not Identified	
Saphenous Vein			Patent	Competent
vidence of D.V.T.				
above the knee			No	
Popliteal			Yes	Old
Below the knee			Yes	Old
Notes				
EFT LOWER LIN	MB VENOUS DUPLEX	ASSESSMENT		
on Valsalva mano popliteal vein, app dentified in the pr ?chronically occlu of old non-occlusi	euvre, suggesting provoear patent and compe roximal popliteal vein a ided. Isolated, irregular ve thrombus. Isolated	ximal vein patency. All vis tent with no evidence of p nd is incompetent. Mid-di and incompetent flow no	with respiration and a normulation with respiration and a normulation of the vertical province of the vertical population of the vertical population was not intended in the posterior tibial vertical peroneal veins. All ot DVT.	al to the sed thrombus dentified ins suggestive
All measurements	s are proximal to the m	edial malleolus unless oth	nerwise stated.	
			The second secon	
Assessed by	Jimmy Chen			

SFJ is patent and competent. LSV is patent proximally with a competent branch leaving at ~10cm from the inguinal ligament. A further competent branch leaves at ~13cm from the inguinal ligament, distal to this, LSV was not identified in the thigh.

Calf LSV is competent proximally and leaves the fascia in the prox calf at 35cm and communicates with calf varicosities. Incompetent perforator identified in the prox calf at 30cm with evidence of recanalised old thrombophlebitis, and gives rise to anterior calf varicosities.

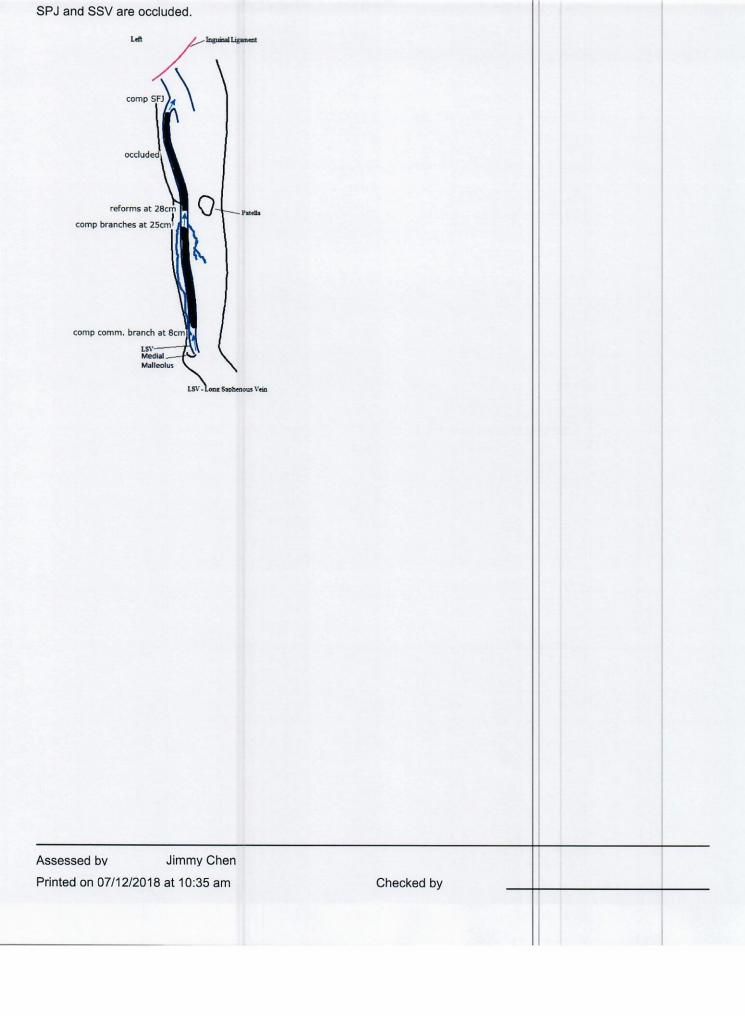
SPJ not identified. SSV is patent and competent and is continuous with a competent vein of Giacomini.



Assessed by Jimmy Chen Printed on 07/12/2018 at 10:34 am

Outcome	DVT negative, Partial	recanalised EVLT		
	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein			Patent	Competent
Profunda Vein			Patent	Competent
Superficial Femoral Vein			Patent	Competent
Popliteal Vein			Patent	Competent
Posterior Tibial Vein			Patent	Competent
Anterior Tibial Vein			Patent	Competent
Peroneal Vein			Patent	Competent
Soleal Vein			Patent	
Gastrocnemius			Patent	
Superficial Veins				
Saphenofemoral Junction			Patent	Competent
L Saphenous Vein Above			Occluded	Mixed Thrombus
L Saphenous Vein Below			Partially occluded	
Vein of Giacomini			Not Identified	
Saphenopopiteal Junction			Occluded	
S Saphenous Vein			Occluded	
Evidence of D.V.T.				
Above the knee			No	
Popliteal			No	
Below the knee			No	
Notes				
LEFT LOWER LIMI	B VENOUS DUPLEX	ASSESSMENT - POST L	SV AND SSV EVLA	
on Valsalva manoe		imal vein patency. All visi	with respiration and a noualised deep veins appear	
All measurements a	are proximal to the me	edial malleolus unless oth	erwise stated.	
branches identified	in the prox calf at 25c		eforms in prox calf at 28cm occluded before a competential	
Assessed by	Jimmy Chen			
Printed on 07/12/20	018 at 10:35 am	Chec	ked by	

Ulceration, Varicose vein post-op



Outcome	DVT negative, incompetence			
	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein	Patent	Competent		
Profunda Vein	Patent	Competent		
Superficial Femoral Vein	Patent	Competent		
Popliteal Vein	Patent	Competent		
Posterior Tibial Vein	Patent	Competent		
Anterior Tibial Vein	Patent	Competent		
Peroneal Vein	Patent	Competent		
Soleal Vein				
Gastrocnemius				
Superficial Veins	Detect	lla		
Saphenofemoral Junction	Patent	Competent		
L Saphenous Vein Above	Patent	Competent		
L Saphenous Vein Below	Patent	Isolated Incompetence		
Vein of Giacomini	Patent	Competent		
Saphenopopiteal Junction	Not Identified			
S Saphenous Vein	Patent	Competent		
Evidence of D.V.T.				
Above the knee	No			
Popliteal	No			
Below the knee	No			
Notes				
	NENOUS DUDIES	ACCECOMENT O		
RIGHT LOWER LIME	S VENOUS DUPLEX	(ASSESSMENT - Scann	ed in clinic.	
Iliac veins not viewed	d. Flow in the comm	on femoral vein is phasic	with respiration and a	normal response
on Valsalva manoeuv	re, suggesting proxi	mal vein patency. All visu		
competent with no ev	vidence of previous I	OVT.		
All measurements ar	e proximal to the me	dial malleolus unless oth	erwise stated.	
due to superficial oed	dema. LSV is patent	ent and competent in the and competent in the pro ves the mid calf at 26cm	x calf. LSV becomes i	ncompetent in the
Assessed by	Jimmy Chen			
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	- at 10.00 all	Offec		

SPJ not identified. SSV is patent and competent and is continuous with a competent vein of Giacomini.+ Transverse (AP) dimensions of LSV: Proximal calf- 0.71cm, Mid calf - 0.48cm, Distal calf - 0.53cm. Inguinal Ligament comp SFJ comp incomp at 27cm superficial oedema incomp branch at 26cm incomp Malleolus LSV - Long Saph Assessed by Jimmy Chen Printed on 07/12/2018 at 10:09 am Checked by

Right Deep Veins Patency Competency Patency Compete	Outcome [OVT negative			
External Iliac Vein External Iliac Vein Internal Iliac Vein Patent Common Femoral Vein Patent Competent Profunda Vein Patent Competent See notes Patent Competent See notes Patent Competent Patent	Deep Veins		Competency		Competency
Internal Iliac Vein Common Femoral Vein Patent Common Femoral Vein Profunda Vein Postent Postent Competent Patent Comp	Common Iliac Vein		Competency	Fatericy	Competency
Common Femoral Vein Patent Competent Competent Patent Competent Competent Patent Competent Com	External Iliac Vein				
Common Femoral Vein Patent Competent See notes Patent Competent Competent Patent Competent Patent Competent Patent Competent Patent Competent Compet	Internal Iliac Vein				
Patent Competent Patent	Common Femoral Vein	Patent	Competent	Patent	Competent
Patent Competent Posterior Tibial Vein Patent Competent Patent	Profunda Vein	Patent	Competent	Patent	Competent
Poplitical Vein Patent Competent Patent Compe	Superficial Femoral Vein	Patent	Competent	Patent	Competent
Patent Competent Patent See notes Patent Competent Patent		Patent	Competent	Patent	Competent
Peroneal Vein Soleal Vein Patent Competent Patent No No No No No No No No No N		Patent	Competent	See notes	
Soleal Vein Gastrocnemius Superficial Veins Saphenofemoral Junction L Saphenous Vein Above L Saphenous Vein Above Patent Incompetent Incompetent Patent Competent Patent Compe	Anterior Tibial Vein	Patent	Competent	Patent	Competent
Superficial Veins Saphenofemoral Junction L Saphenous Vein Above L Saphenous Vein Below Vein of Giacomini Saphenopoliteal Junction Patent Competent Incompetent Incompetent Incompetent Patent Competent Patent C		Patent	Competent	See notes	
Superficial Veins Saphenofemoral Junction L Saphenous Vein Above L Saphenous Vein Above L Saphenous Vein Below Vein of Giacomini Saphenopopiteal Junction S Saphenopopiteal Junction S Saphenopopiteal Junction S Saphenous Vein Patent Competent P		Patent			
Saphenofemoral Junction L Saphenous Vein Above L Saphenous Vein Above L Saphenous Vein Below Vein of Giacomini Saphenopopiteal Junction Patent Competent Patent No		Patent			
L Saphenous Vein Above L Saphenous Vein Below Vein of Giacomini Saphenopopiteal Junction S Saphenous Vein S	Superficial Veins				
L Saphenous Vein Below Vein of Giacomini Saphenopopiteal Junction S Saphenous Vein Patent Competent Patent Incompetent No	Saphenofemoral Junction	Patent	Incompetent	Patent	Competent
Vein of Giacomini Saphenopopiteal Junction S Saphenous Vein S Saphenous Vein Patent Patent Competent Patent Patent Competent Patent Competent Patent Patent Competent Patent Patent Competent Patent Patent Competent Patent Competent Patent Patent Competent Patent Competent Patent No	L Saphenous Vein Above	Patent	Incompetent	Patent	Competent
Patent Competent Patent Incompetent No No No No No No No No No N	L Saphenous Vein Below	Patent	Incompetent	Patent	Competent
Saphenous Vein Patent Competent Patent Patent Incompetent Patent Incompetent Patent Incompetent Patent Incompetent Patent Incompetent	Vein of Giacomini	Patent	Competent	Patent	Competent
Evidence of D.V.T. Above the knee No	Saphenopopiteal Junction	Patent	Competent	Patent	Competent
Above the knee No	S Saphenous Vein	Patent	Competent	Patent	Incompetent
Popliteal Below the knee No	Evidence of D.V.T.				
Notes BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT - Scanned in clinic. *limited scan due to patient habitus, poor mobility, patient discomfort and overlying calcified arteries. RIGHT 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 patent and competent with no evidence of previous DVT. All measurements are proximal to the medial malleolus unless otherwise stated.	Above the knee	No		No	
Notes BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT - Scanned in clinic. *limited scan due to patient habitus, poor mobility, patient discomfort and overlying calcified arteries. RIGHT 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 patent and competent with no evidence of previous DVT. All measurements are proximal to the medial malleolus unless otherwise stated.	Popliteal	No		No	
BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT - Scanned in clinic. *limited scan due to patient habitus, poor mobility, patient discomfort and overlying calcified arteries. RIGHT 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 patent and competent with no evidence of previous DVT. All measurements are proximal to the medial malleolus unless otherwise stated.		No		No	
BILATERAL LOWER LIMB VENOUS DUPLEX ASSESSMENT - Scanned in clinic. *limited scan due to patient habitus, poor mobility, patient discomfort and overlying calcified arteries. RIGHT 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 patent and competent with no evidence of previous DVT. All measurements are proximal to the medial malleolus unless otherwise stated.	Notes				
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	lliac veins not viewed on Valsalva manoeuv	re, suggesting proxi	mal vein patency. All visu	with respiration and a nualised deep veins appe	ormal response ar patent and
SF.I is natent and incompetent. Difficulty assessed I SV in the thigh due to poor access and poor nations	All measurements are	proximal to the med	dial malleolus unless oth	erwise stated.	
mobility and discomfort. Where seen, LSV is patent and incompetent in the thigh. Incompetent branch	SFJ is patent and inco	ompetent. Difficulty a rt. Where seen, LSV	assessed LSV in the thig ' is patent and incompete	h due to poor access ar ent in the thigh. Incompe	nd poor patient etent branch
Assessed by Jimmy Chen	Assessed by	Jimmy Chen			
Printed on 07/12/2018 at 10:10 am Checked by	Printed on 07/12/2018	3 at 10:10 am	Chec	ked by	

Ulceration

leaves the prox calf at 31cm and forms calf varcosities. Distal to this, LSV becomes competent and remains so to the ankle.

SPJ is patent and competent. SSV is patent and competent and is continuous with a competent vein of Giacomini.

Transverse (AP) dimensions of LSV: Proximal thigh - 0.82cm, Mid- thigh - 0.63cm, Distal thigh - 0.73cm. Transverse (AP) dimensions of LSV: Proximal calf - 0.61cm, Mid - calf - 0.35cm, Distal calf - 0.27cm.

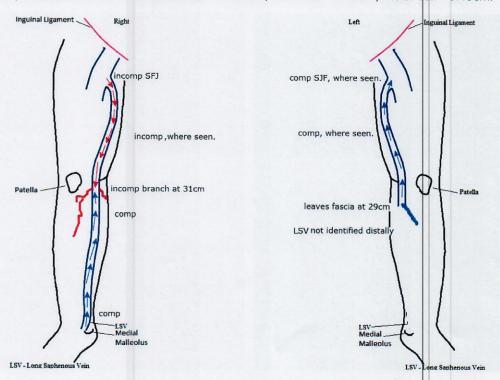
LEFT

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, proximal to and including the popliteal vein, appear patent and competent with no evidence of previous DVT. Anterior tibial veins appear patent and competent. Unable to assess the complete length of the posterior tibial and peroneal veins due to superficial oedema and calcified crural vessels - unable to exclude acute or chronic DVT from these images.

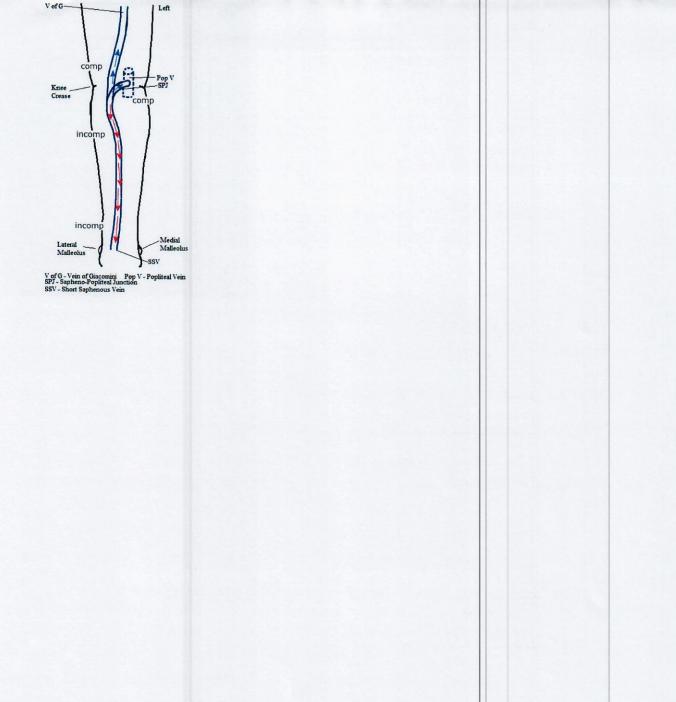
Where seen, SFJ is patent and competent. LSV is patent and competent in the thigh. LSV leaves the fascia in the prox calf at 29cm is not identified distal to this due to superficial oedema.

SPJ is patent and competent where seen. SSV is patent and incompetent along its length. Vein of Giacomini is patent and competent.

Transverse (AP) dimensions of SSV: Proximal calf - 0.58cm, Mid - calf - 0.43cm, Distal calf - 0.49cm.



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Outcome	Incompetence			
	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
Internal Iliac Vein				
Common Femoral Vein			Recanalised	Old Thrombus
Profunda Vein			Patent	Competent
Superficial Femoral Vein	1		Patent	Competent
Popliteal Vein			Patent	Competent
Posterior Tibial Vein			Patent	Competent
Anterior Tibial Vein			Patent	Competent
Peroneal Vein			Patent	Competent
Soleal Vein			Patent	
Gastrocnemius			Patent	
Superficial Veins				
Saphenofemoral Junctio	on		Patent	
Saphenous Vein Above	е		Not Identified	
L Saphenous Vein Below	N		Patent	Incompetent
Vein of Giacomini			Patent	Competent
Saphenopopiteal Junction	on		Patent	Competent
S Saphenous Vein			Patent	Competent
Evidence of D.V.T.				
Above the knee			Yes	Old
Popliteal			No	
Below the knee			No	
Notes				
lliac veins not vie on Valsalva mano common femoral	euvre, suggesting pro	non femoral vein is phasic v ximal vein patency. Old, re ence of acute DVT detecte	canalised thrombus iden	tified in the
SFJ is patent. LS	V not identified in the t	high ?due to previous vv s	urgery.	
the groin. LSV is		e knee crease ?via small to r in the calf with a compete alf appear competent.		
Assessed by	Jimmy Chen			
Printed on 07/12/	2018 at 10:16 am	Chec	ked by	

Proximal calf- 0.33cm,		
Mid calf - 0.35cm, Distal calf - 0.41cm.		
SPJ is patent and competent. SSV is competent and is continuous with a competent vein	of Giacomini.	
Left Inguinal Ligament		
LSV reforms prox. calf C branch ~18cm Lsv-lone Sacherona Vein		
Assessed by Jimmy Chen		11-
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Transverse (AP) dimensions of LSV in the calf:

	Right		Left	
Deep Veins	Patency	Competency	Patency	Competency
Common Iliac Vein				
External Iliac Vein				
nternal Iliac Vein				
Common Femoral Vein	Patent	Competent	Patent	Competent
Profunda Vein	Patent	Competent	Patent	Competent
Superficial Femoral Vein	Patent	Competent	Patent	Competent
Popliteal Vein	Patent	Competent	Patent	Competent
Posterior Tibial Vein	Patent	Competent	See notes	
Anterior Tibial Vein	Patent	Competent	Patent	Competent
Peroneal Vein	Patent	Competent	See notes	
Soleal Vein	Patent			
Gastrocnemius	Patent			
Superficial Veins	Patent	Incompetent	Patent	Competent
Saphenofemoral Junction	Patent	Incompetent		
. Saphenous Vein Above			Patent	Competent
Saphenous Vein Below	Patent	Incompetent	Patent	Competent
/ein of Giacomini	Patent	Competent	Patent	Competent
Saphenopopiteal Junction	Patent	Competent	Patent	Competent
S Saphenous Vein	Patent	Competent	Patent	Incompetent
Evidence of D.V.T.				
Above the knee	No		No	
Popliteal	No		No	
Below the knee	No		No	
Notes				
	LIMB VENOUS DI	IDLEY ACCECOMENT O		
		IPLEX ASSESSMENT - S mobility, patient discomf		ed arteries
	, pool	, pallotti diosotti	and or onlying datom	
RIGHT	El			
		non femoral vein is phasic imal vein patency. All vis		
competent with no evi			dansed deep veins app	our paterit and
All measurements are	proximal to the me	edial malleolus unless oth	erwise stated.	
SFJ is patent and inco	ompetent. Difficulty	assessed LSV in the thig	ih due to poor access a	nd poor patient
		V is patent and incompet	The second secon	The state of the s
Assessed by	Jimmy Chen			
Printed on 07/12/2018	3 at 10:30 am	Chec	cked by	

Ulceration

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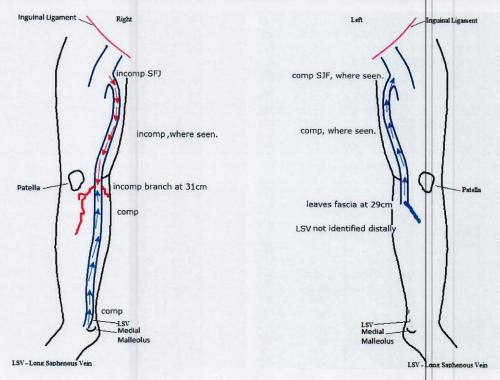
LEFT

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, proximal to and including the popliteal vein, appear patent and competent with no evidence of previous DVT. Anterior tibial veins appear patent and competent. Unable to assess the complete length of the posterior tibial and peroneal veins due to superficial oedema and calcified crural vessels - unable to exclude acute or chronic DVT from these images.

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