

**Carotid Duplex**Examined **16/01/2019 10:05**

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Reference

Alison HuftonAccession **CR-19-0002833****Patient** **Edward Evans**
D.O.B. **10/05/1948****NHS No** **452 169 1889**
Patient Ref **5046031****Reason** Stroke
Outcome Stenosis moderate

Right	Diameter (cm)	PSV (m/s)	EDV (m/s)	Stenosis
Common Plaque Intimal Thickening Disease length from BIF		0.70	0.09	< 30%
Bifurcation Plaque Intimal Thickening Disease length from BIF				< 30%
Internal Plaque Mixed Disease length from BIF		0.93		< 40%
		Pk ICA/Pk CCA = 1.3	Pk ICA/End CCA = 10.3	
External Plaque Intimal Thickening Disease length from BIF		0.92		< 30%
Vertebral Open Orthograde				
Subclavian No Turbulence		Good signal	Triphasic	Widely Patent

Left	Diameter (cm)	PSV (m/s)	EDV (m/s)	Stenosis
Common Plaque Intimal Thickening Disease length from BIF		0.84	0.16	< 30%
Bifurcation Plaque Mixed Disease length from BIF				50% - 59%
Internal Plaque Mixed Soft Disease length from BIF		1.84	0.59	60% - 69%
		Pk ICA/Pk CCA = 2.2	Pk ICA/End CCA = 11.5	
External Plaque Intimal Thickening Disease length from BIF		0.94		< 30%
Vertebral Open Orthograde				
Subclavian No Turbulence		Good signal	Triphasic	Widely Patent

Stenosis based on NASCET velocity criteria.

Joint recommendations for reporting carotid ultrasound investigations in the United Kingdom'. Oates et al. Eur J Vasc Endovasc Surg. 2009 Mar;37(3):251-61

Notes**CAROTID DUPLEX**

*Intermittent irregular heart rate noted .

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

Low echoic mixed plaques identified in the left carotid bifurcation forming a 50-59% stenosis based on grey scale imaging. Low echoic plaques ?thrombus identified in the left internal carotid artery forming a 60-69% stenosis based on velocities, however appears as a 70-79% stenosis based on grey scale imaging.

Assessed by **Sharifa Kiyegga**

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Checked by _____

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Disease length measures 2.3cm including the bifurcation. Distal ICA is patent at this time.

Antegrade flow noted in the right and left vertebral arteries.

SUGGEST URGENT VASCULAR SURGICAL OPINION IF APPROPRIATE.