



Veritas Healthcare Solutions
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Lower Extremity Arterial Duplex Examination

Patient Name: Joe Patient Date: 08/06/2015
Sonographer: Christina Marcott, RDCS Date of Birth: 08/06/1919 Age: 96
Referring Physician: Frank Doctor Gender: Male

Arterial duplex examination performed using 2-D imaging, color flow and spectral Doppler assessment.

INDICATION: PAD, bilateral lower extremity claudication

FINDINGS:

Right:

Common femoral artery has a PSV 200 cm/sec with a monophasic waveform.
Proximal superficial femoral artery PSV 125 cm/sec with a monophasic waveform.
Mid superficial femoral artery PSV 320 cm/sec with a monophasic waveform.
Distal superficial femoral artery PSV 115 cm/sec with a monophasic waveform.
Popliteal artery PSV 80 cm/sec with a monophasic waveform.
Posterior tibial artery PSV 50 cm/sec with a monophasic waveform.
Dorsalis pedis artery is not well visualized.

Left:

Common femoral artery has a PSV 230 cm/sec with a monophasic waveform.
Proximal superficial femoral artery PSV 190 cm/sec with a monophasic waveform.
Mid superficial femoral artery PSV 20 cm/sec with a monophasic waveform.
Distal superficial femoral artery PSV 80 cm/sec with a monophasic waveform.
Popliteal artery PSV 50 cm/sec with a monophasic waveform.
Posterior tibial artery PSV 50 cm/sec with a monophasic waveform.
Dorsalis pedis artery is not well visualized.

IMPRESSION:

1. The vessels on the right show evidence of atherosclerosis. Waveforms were monophasic throughout the entire leg indicating probable high grade inflow and outflow disease with moderate to severe stenosis.

Joe Patient

2. The vessels on the left show evidence of atherosclerosis. Waveforms were monophasic throughout the entire leg indicating probable high grade inflow and outflow disease with moderate to severe stenosis and occlusion of the mid femoral artery.

Louis Doctor, M.D. F.A.C.C.