

MRN: 321589	Study Time: 06:25 PM
DOB: 1962-12-23	Age: 56
Gender: M	Reading Group: sample single doc group
Race: Asian	Reading User: Greg MD House
HR: 72	Referring Group: Anytown Family Practice
Height: 70 in	Ordering Phys: Gregory House, MD
BP: 130/70 mmHg	Sonographer: John^Sample
BMI: 22.96	Weight: 160 lbs
	BSA: 1.9 m ²
	Equipment: Mindray M7

Study Quality: Excellent	Indications: Bilateral limb pain after <1 mile of exercise
Diagnosis Code: (I70.213) Atherosclerosis of native arteries of extremities with intermittent claudication, bilateral legs	Risk Factors: Family History
	Procedure Code: 93925 Duplex scan of lower extremity arteries or arterial bypass graft; Complete bilateral study 93922 Upr/l xtremity art 2 levels (ABI/WBI)

After informed consent, an Arterial Duplex Lower Extremity ultrasound using 2D-M-mode and Doppler was performed.

Right

	Waveform	Ratio	PSV (cm/s)
EIA	Ante;High;Multi		112
CFA	Ante;High;Multi	0.84	94
PFA	Ante;High;Multi	1.43	134
SFA Prox	Ante;Inter;Mono	0.8	75
SFA Mid	Ante;Inter;Mono	1.03	77
SFA Dis	Ante;Inter;Mono	0.86	66
POP Prox	Ante;Inter;Mono	0.67	44
POP Mid	Ante;Inter;Mono	1.23	54
POP Dis	Ante;Inter;Mono	1.15	62
Tib-Per trunk	Ante;Inter;Mono	0.97	60
PTA	Ante;Inter;Mono	1.1	66
ATA	Ante;Inter;Mono	0.52	32
DPA	Ante;Inter;Mono	1.91	61
PER	Ante;Inter;Mono	0.97	58

Left

	Waveform	Ratio	PSV (cm/s)
EIA	Multiphasic		116
CFA	Multiphasic	0.78	90
PFA	Multiphasic	0.99	89
SFA Prox	Multiphasic	1.01	91
SFA Mid	Multiphasic	0.95	86
SFA Dis	Ante;Inter;Multi	0.62	53
POP Prox	Ante;Inter;Multi	1.09	58
POP Mid	Ante;Low;Mono	0.66	38
POP Dis	Ante;Low;Mono	1.79	68
Tib-Per trunk	Low;Mono	0.63	43
PTA	Low;Mono	0.56	24
ATA	Low;Mono	0.72	49
DPA	Low;Mono	1.02	50
PER	Low;Mono	1.42	61

Right

Spectral Waveform	PVR Waveform	Rest (mmHg)
Ante;Inter;Mono	Diminished	66
Ante;Inter;Mono	Diminished	61
		0.55
	Diminished	60
		0.5

ABI

Rest (mmHg)	ABI	TBI
120	Brachial	118
66	Post Tibial	24
61	Dors Pedis	50
0.55	ABI	0.42
60	Toe Pressure	42
0.5	TBI	0.35

Left

Spectral Waveform	PVR Waveform
Ante;Low;Mono	Diminished
Ante;Low;Mono	Diminished

Right Findings:

No significant elevation of the peak systolic velocity is seen in the right lower extremity to suggest a hemodynamically significant stenosis.

The right proximal superficial femoral, mid superficial femoral, distal superficial femoral, proximal popliteal, mid popliteal, distal popliteal, tibial-peroneal trunk, posterior tibial, anterior tibial, dorsalis pedis and peroneal arteries waveforms demonstrate an antegrade, intermediate-resistant, monophasic flow pattern. The right external iliac, common femoral and profunda femoral arteries waveforms demonstrate an antegrade, high-resistant, multiphasic flow pattern.

Left Findings:

No significant elevation of the peak systolic velocity is seen in the left lower extremity to suggest a hemodynamically significant stenosis.

The left tibial-peroneal trunk, posterior tibial, anterior tibial, dorsalis pedis and peroneal arteries waveforms demonstrate a low-resistant, monophasic flow pattern. The left mid popliteal and distal popliteal arteries waveforms demonstrate an antegrade, low-resistant, monophasic flow pattern. The left distal superficial femoral and proximal popliteal arteries waveforms demonstrate an antegrade, intermediate-resistant, multiphasic flow pattern. The left external iliac, common femoral, profunda femoral, proximal superficial femoral and mid superficial femoral arteries waveforms demonstrate a multiphasic flow pattern.

ABI Findings

The right post tibial spectral waveform demonstrates an antegrade, intermediate-resistant, monophasic flow pattern. The right dors pedis spectral waveform demonstrates an antegrade, intermediate-resistant, monophasic flow pattern. Moderately abnormal PVR waveforms of the right ankle. The left post tibial spectral waveform demonstrates an antegrade, low-resistant, monophasic flow pattern. The left dors pedis spectral waveform demonstrates an antegrade, low-resistant, monophasic flow pattern. Moderately abnormal PVR waveforms of the left ankle.

Moderately decreased right resting ABI. Severely decreased left resting ABI. Abnormal right TBI. Abnormal left TBI.

Conclusions:

No hemodynamically significant stenoses are identified in the right lower extremity arterial system. No hemodynamically significant stenoses are identified in the left lower extremity arterial system.

This exam reveals moderately decreased perfusion of the right lower extremity, noted at the post tibial artery level (ABI). This exam reveals severely decreased perfusion of the left lower extremity, noted at the dorsalis pedis artery level (ABI).

Abnormal right TBI. Abnormal left TBI.

November 12, 2020 09:53 AM EST
CSI Admin Staff
Electronically Signed on Studycast

Admin CSI