

**PERIPHERAL VENOUS DUPLEX SCAN
EVALUATION FOR THE LOWER EXTREMITY**

Name: DE CASTRO, ANTONIO A.

Address: QUEZON CITY

Date: March 12, 2019

Age/Sex: 67 / M

Study No: VDS 19-03-105/HD11/DIAN/CES

Referring MD: DR. MARIA DANIELA R. BANTILES

VASCULAR HISTORY / REASON FOR EXAMINATION:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Obesity | <input type="checkbox"/> Stroke | <input type="checkbox"/> Malignancy | <input type="checkbox"/> Previous DVT/PE |
| <input type="checkbox"/> Pregnancy | <input type="checkbox"/> Immobility (>72 hrs) | <input type="checkbox"/> Heart Failure | <input type="checkbox"/> Major Surgery |
| <input type="checkbox"/> Oral Contraceptives | <input type="checkbox"/> Occupation | <input type="checkbox"/> Varicose Veins | <input type="checkbox"/> Chronic Lung Disease |
| <input type="checkbox"/> Trauma | <input type="checkbox"/> Sitting/Standing | <input type="checkbox"/> Previous Venous Surgery | <input type="checkbox"/> Others: _____ |

CLINICAL STAGING OF CHRONIC VENOUS INSUFFICIENCY OF THE LEGS

- | | |
|---|---|
| Class 0 _____ No signs of vein disease | Class 4 _____ Skin Changes (pigmentation, dermatitis) |
| Class 1 _____ Telangiectasia; Reticular veins | Class 5 _____ Healed Venous Ulcers |
| Class 2 _____ Varicose Veins | Class 6 _____ Active Venous Ulcers |
| Class 3 _____ Venous Edema | |

NOTE:

- * Classes 0-3 may or may not associated with superficial or deep venous reflux as documented by Duplex Ultrasonography or other methods
- * Classes 4-6 are usually associated with documented venous reflux
- * For patients requiring saphenous veins for bypass saphenous vein mapping is suggested

REMARKS:

1. Incidental finding of an enlarged inguinal right lymph node
2. Reflux study done on patient in supine position
3. Pulsatile venous waveform pattern suggestive of elevated central venous pressure, severe tricuspid regurgitation and/or pulmonary hypertension

INTERPRETATION:

No evidence of acute Deep Venous Thrombosis on the bilateral Lower Extremities

Right Lower Extremity:

1. Deep Venous Valve Reflux of the Femoral Vein

Left Lower Extremity:

1. No significant venous valve reflux elicited



PREMIERE

MEDICAL & CARDIOVASCULAR LABORATORY

G/F BELL KENZ TOWER No. 127 MALAKAS St. QUEZON CITY

TELL NOs 426 - 9745
426 - 6599

CELL NO. 0905 - 295 - 9978

Name: DE CASTRO, ANTONIO A.

Address: QUEZON CITY

Date: March 12, 2019

Age/Sex: 67 / M

Study No: VDS 19-03-105/HD11/DIAN/CES

Referring MD: DR. MARIA DANIELA R. BANTILES

RIGHT LEG		B-Mode	Color Flow	Spontaneity	Phasicity	Augmentation	Competence	Pulsatility
Segments		C (Compressible) P (Partial) I (Incompressible)	+ (Full) P (Partial) - (Absent)	+ (Spontaneous) - (Non-spontaneous)	+ (Phasic) - (Non-Phasic)	+ (Augmented) - (Not-augmented)	+ (Competent) - (Not-competent)	+ (Non-pulsatile) - (Pulsatile)
DEIV		Compressible	+	+	+			-
CFV		Compressible	+	+	+	+	+	-
SFJ/GSV		Compressible	+	+	+	+	+/+	-
DFV			+	+	+	+	+	-
FV	P	Compressible	+	+	+	+	-	-
	M	Compressible	+	+	+	+	-	-
	D	Compressible	+	+	+	+	-	-
	POST	Compressible	+	+	+	+	-	-
SPJ/SSV			+			+	+/+	+
POP	P	Compressible	+			+	+	+
	D	Compressible	+			+	+	+
PERONEAL		Compressible	+			+		+
PTV		Compressible	+			+	+	+

LEFT LEG		B-Mode	Color Flow	Spontaneity	Phasicity	Augmentation	Competence	Pulsatility
Segments		C (Compressible) P (Partial) I (Incompressible)	+ (Full) P (Partial) - (Absent)	+ (Spontaneous) - (Non-spontaneous)	+ (Phasic) - (Non-Phasic)	+ (Augmented) - (Not-augmented)	+ (Competent) - (Not-competent)	+ (Non-pulsatile) - (Pulsatile)
DEIV		Compressible	+	+	+			-
CFV		Compressible	+	+	+	+	+	-
SFJ/GSV		Compressible	+	+	+	+	+/+	-
DFV			+	+	+	+	+	-
FV	P	Compressible	+	+	+	+	+	-
	M	Compressible	+	+	+	+	+	+
	D	Compressible	+	+	+	+	+	+
	POST	Compressible	+	+	+	+	+	+
SPJ/SSV			+			+	+/+	+
POP	P	Compressible	+			+	+	+
	D	Compressible	+			+	+	+
PERONEAL		Compressible	+			+	+	+
PTV		Compressible	+			+	+	+

PAOLO JOEL T. NOCOM, MD, FPCP, FPCC, FPSVM
Cardio-Peripheral Vascular Medicine

J.N.T./SONOGRAPHER