



Maryland Vascular Specialists
Glen Burnie
Non-Invasive Vascular Laboratory
 1212 York Road Suite B201
 Lutherville MD 21093
 Phone 410-825-4530
 Fax 410-825-3787

Medical Director
 Samer Saiedy, M.D.

Technical Director
 Jodi Zannino, RVT

Patient Name: **Doe, John** Date: **07/21/15**
 Patient ID:
 D.O.B: **01/02/32** Age: **83 Male**
 External Pat
 External Acc
 Order ID #
 Referring Dr.:
 Referring Dr. Fax:
 Technologist:
 Prior Exam: **N/A**

Extracranial Examination

Test Performed: Carotid Duplex (Complete)

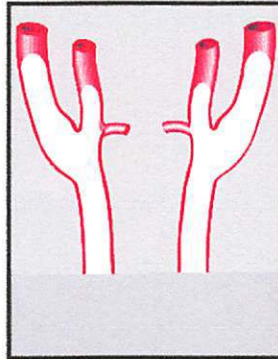
Primary Indication: TIA

Examination Data

	cm/s			
RIGHT	(S)	(D)	Percent	Plaque
ECA	132	2		
DICA	80	25		
MICA	78	25		
PICA	101	22	0%	
BULB				
DCCA	60	21		
MCCA				
PCCA	56	20		
SUBCL				
VERTE				

Max ICA Stenosis 0%
 ICA/CCA Ratio 1.7

Carotid drawing is provided for reference only and should not be used for diagnosis



Antegrade Vertebral Flow Antegrade

	cm/s			
LEFT	(S)	(D)	Percent	Plaque
ECA	180	2		
DICA	87	25		
MICA	81	20		
PICA	100	22	0%	
BULB				
DCCA	65	21		
MCCA				
PCCA	56	25		
SUBCL				
VERTE				

Max ICA Stenosis 0%
 ICA/CCA Ratio 1.54

Key to Plaque P1 Homogeneous P2 Heterogeneous P3 Mixed
 S1 Smooth S2 Irregular S3 Ulcerated

Impressions

COLOR DUPLEX ULTRASONOGRAPHY OF THE BILATERAL EXTRACRANIAL CAROTID ARTERIES:

The bilateral common, internal, and external carotid arteries were evaluated with gray scale imaging, color flow, and pulsed-wave Doppler. The bilateral vertebral arteries were evaluated for direction of flow.

Tortuous bilateral internal carotid arteries with no evidence of hemodynamically significant stenosis.

See velocities and ratios above.

Vertebral flow is antegrade bilaterally.

IMPRESSION:

NO EVIDENCE FOR HEMODYNAMICALLY SIGNIFICANT STENOSIS INVOLVING THE BILATERAL EXTRACRANIAL CAROTID ARTERIES.

S Saiedy

07/21/15
 10:10 AM



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Technologist:	

Lower Venous Examination

Test Performed: Venous Duplex (Limited/Unilateral)

Primary Indication: Edema

History Notes:

Swelling right leg x 1 week.

Examination Data

	Thrombus		Compressible		Spontaneous		Phasic		Augmented		Competent		Pulsatile			
	R	L	R	L	R	L	R	L	R	L	Sec.	R	L	Sec.	R	L
C. Femoral	N	N	Y	Y	+	+	+	+	+	+						
S. Femoral	N		Y		+		+		+							
Popliteal	N		Y		+		+		+							
Post. Tibial	N		Y						+							
Peroneal	N		Y						+							
Greater S.	N		Y													

N = No Y = Yes O = Absent + = Present -- = Variable or Decreased

Impressions

COLOR DUPLEX ULTRASONOGRAPHY OF THE RIGHT LOWER EXTREMITY VEINS:

The right femoral, popliteal, and tibial veins were evaluated with B-mode imaging and color/spectral Doppler. The right great and small saphenous veins were also assessed.

The patient was placed in the reverse Trendelenburg position.

All veins evaluated are compressible in a transverse view. No intraluminal echoes are visualized. Doppler waveforms are spontaneous and demonstrate respiratory variation.

The contralateral common femoral vein was evaluated as per protocol and is patent.

IMPRESSION:

NO EVIDENCE OF DEEP VEIN THROMBOSIS IN THE RIGHT LOWER EXTREMITY.

07/21/15
 10:14 AM