

Bilateral Carotid Study Report

CAROTID VIVIDS35 December 18, 2018

LEFT

Accession/Encounter No: 613335 Procedure/Order ID: 254998 DOB:

1983-12-01 Age: 35

Gender: F Study Time: 03:10 PM Reading Group: Reset Reading

Referring Group: Anytown Family Practice

Sonographer: Jason Stoddard

Location: West Unit: 5C Vivid S **Equipment:**

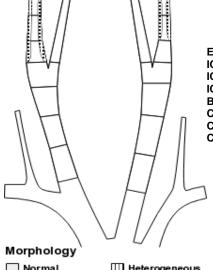
Risk Factors: Elevated Cholesterol Level Study Quality: Excellent Diagnosis Code: (H35.82) Retinal ischemia Procedure Code: 93880Extracranial bilat study

After informed consent, a duplex Carotid ultrasound was performed.

RIGHT

	PSV	EDV	Stenosis
	(cm/s)	(cm/s)	
ECA	52	9	
ICA-dis	94	32	16-49%
ICA-mid	87	26	16-49%
ICA-prox	67	21	16-49%
Bifurcation	53	11	
CCA-dis	59	18	
CCA-mid	57	15	
CCA-prox	54	14	

PSV ICA/CCA ratio: 1.61 Vertebral PSV: 72 cm/s



PSV **EDV Stenosis** (cm/s) (cm/s) **ECA** 83 ICA-dis 23 50-69% 88 ICA-mid 91 15 50-69% ICA-prox 89 37 Bifurcation 42 CCA-dis 47 8 CCA-mid CCA-prox 53 10

Vessel Geometry: Normal Vertebral PSV: 70 cm/s Vert. Art. Waveform: Normal Subclavian PSV: 157 cm/s

Sub. Art. Waveform: Normal multiphasic

Normal Homogeneous Calcific Calcific Shadowing 🍳 Intimal hyperplasia Post-operative

> Image represents data. For details see findings/conclusions text.

Right Findings:

Doppler flow velocities in the right internal carotid artery (ICA) are consistent with stenosis in the range of 16-49% with moderate homogeneous plaque.

Right vertebral PSV 72 cm/sec.

Left Findings:

Doppler flow velocities in the left distal internal carotid artery (ICA-dis) and mid internal carotid artery (ICA-mid) are consistent with stenosis in the range of 50-69% with >= 50% homogeneous plaque.

The left vessel geometry is normal.

The left vertebral artery waveform is normal.

Left vertebral PSV 70 cm/sec.

Duplex imaging demonstrates left subclavian artery is normal.

Conclusions:

April 23, 2019 11:57 AM EDT CSI Admin Staff Electronically Signed on Studycast

Moderate stenosis in the right internal carotid artery (16-49%). Severe stenosis in the left internal carotid artery (50-69%).

Follow up in six months is appropriate if clinically indicated.