# Lower extremity Venous Duplex Scan: Patient Communication





## Results

Lower extremity Venous Duplex Scan (Order 88408890)

## **Lower extremity Venous Duplex Scan**

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Order: 88408890

Status: Final result Visible to patient: Yes (seen) Next appt: None Dx: Varicose vein of leg

**Details** 

Reading Physician Reading Date Result Priority
Fady Fayez Haddad, MD 05/07/2024 Routine

**4**9611350000 or 1545

<del>==</del>675

Emma Maria Mardinian 09/07/2024

**Result Text** 

**Exam Name** 

LOWER EXTREMITY VENOUS DUPLEX SCAN

**Clinical Indication** 

Assess varicose veins source

Performing physician

Performing Physician:FH16-Fady-Haddad

**Findings** 

Right Left

Common Femoral Vein Competent Common Femoral Vein Competent

Femoral Vein Competent Femoral Vein Competent

Popliteal Vein Competent Popliteal Vein Competent

Posterior Tibial Veins Competent Posterior Tibial Veins Competent

Long Saphenous Vein Stripped Long Saphenous Vein Competent

Saphenous-Femoral Junction Incompetent Saphenous-Femoral Junction Competent

Short Saphenous Vein Competent Short Saphenous Vein Competent; except for incompetent short segment at proximal calf.

Measurements:

Right Long Saphenous Vein: Left Long Saphenous Vein:

Thigh - Thigh 4.1 mm Leg - Leg 3 mm

**Impression** 

There is no evidence of deep or superficial vein thrombosis in both lower extremities major veins.

No evidence of reflux in both lower extremities deep veins.

Stripped right Long Saphenous vein.

Incompetent right Sapheno-Femoral Junction.

Multiple Neovascularaization in the right groin originating from the Sapheno-Femoral Junction and connected to multiple small superficial varicose veins in the proximal to mid thigh.

There is incompetent superficial branch noted in the mid right thigh connected to the small right thigh varicose veins and courses down in the medial knee and leg, feeding multiple varicose veins in the leg.

Multiple varicose veins in the lateral right leg, originating from dilated leg perforator.

Incompetent left Sapheno-Popliteal Junction and localized short segment of the left Short Saphenous vein at proximal calf.

No evidence of Baker's cyst in the Popliteal fossa, bilaterally.

Exam Ended: 04/07/24 19:18

Last Resulted: 09/07/24 14:50

Patient Communication

Result Care Coordination

Released

Last Resulted: 09/07/24 14:50

Lab and Collection Details Routing Result History

Result Care Coordination

Seen

## **PACS Images & Report**

(Link Unavailable) Show images for Lower extremity Venous Duplex Scan

#### **All Reviewers List**

Fady Fayez Haddad, MD on 10/07/2024 06:51

#### **Lab Information**

Lab

AGFA RIS

Lab Technician

VAS

## **PACS Images**

(Link Unavailable) Show images for Lower extremity Venous Duplex Scan

#### Signed

Electronically signed by Fady Fayez Haddad, MD on 09/07/24 at 14:50 EEST

## **Additional Information**

4 Jul 2024	6:42 PM			9 Jul 2024	2:50 PM
Specimen Date Taken	Specimen Time Taken	Specimen Received Date	Specimen Received Time	Result Date	Result Time
88408890					
Specimen ID		Bill Type		Client ID	

## LDT Disclaimers:

### POC, COVID-19/Flu A&B Rapid Ag Detection:

A negative test result does not eliminate the possibility of SARS-COV-2 and influenza A&B infection and should be confirmed by molecular testing if necessary for patient management.

#### POC, COVID-19 Rapid Ag Detection:

Any negative Ag test should be confirmed with PCR.

#### **POC, Glucose:**

The Glucose testing using Accu-check Performa was developed and its performance characteristics determined by the Pathology and Laboratory Medicine Department at AUBMC. It has not been cleared or approved by the FDA. The laboratory is CAP accredited and qualified to perform high-complexity testing. This test is used for clinical purposes. It should not be regarded as investigational or for research.

#### **POC, Tramadol:**

"Instant-View "Tramadol Cassette test was developed and its performance characteristics determined by the Pathology and Laboratory Medicine Department at AUBMC. It has not been cleared or approved by the FDA. The laboratory is CAP accredited and qualified to perform high-complexity testing. This test is used for clinical purposes. It should not be regarded as investigational or for research.

General Note for all POC Drug of Abuse tests and POC Tramadol

Drugs of abuse screening: AUBMC does not assume any responsibility or liability whatsoever with respect to the genuineness or condition the urine specimen from whom it is reported to be taken.

It is also being clearly agreed and understood that the immunoassay test for drug abuse is simply carried out as a screening test for clinical purposes and any results thereof need to be further confirmed by other analytical procedures; it is further agreed and understood that AUBMC assumes no responsibility or liability for the consequences, if any, resulting from the use of the test or the interpretation of the findings thereof and that AUBMC is and shall remain independent of the purpose for which the performance of the test is requested or the use for which the test is intended.