



**Dr. V. Balaji,**  
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Senior Consultant Vascular Surgeon  
Adjunct Professor  
Tamilnadu Dr. M.G.R. Medical University



24/12/15

TO

Whom IT may concern

Re: - son - RATNUMA KANAR MATHU W/F

This is to inform that this patient is asked  
to come for Radio frequency ablation of varicose vein  
with two months.

Dr. V. Balaji

Dr.

**Dr. V. BALAJI,**  
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CIN : L85110TN1979PLC008035

AH-QF-RD-04

**DEPARTMENT OF RADIOLOGY**

**Patient Details** : Mrs. RAHNUMA ARA KHAN MAJLIS | Female | 45Yr 2Mth 1Days  
**UHID** : AC01.0003847064 **Patient Location:** OP  
**Patient Identifier:** CHMOPP5347174   
**DRN** : 218230655 **Completed on :** 20-DEC-2018 13:52  
**Ref Doctor** : Dr. BALAJI V

**DOPPLER LOWER LIMB VENOUS BOTH**

**Report ::**

Both common femoral, superficial femoral, proximal and at adductor canal, popliteal, posterior tibial veins and both saphenofemoral junction and saphenopopliteal junction are studied by Real time B.mode and later correlated with color / pulsed doppler. Examination done in pt. lying supine and erect positions and when patient attempted with / without valsalva.

All the veins are compressible and there is no evidence of thrombosis. Color filling is seen. Augmentation present. The spectral pattern in the veins show phasic variation during respiration. No obvious reflux seen in femoral and popliteal vein.

Left side saphenofemoral junctions show no reflux during valsalva manoeuvre.

Right side saphanofemoral junction reflux seen.

Both sides saphenopopliteal junctions show no reflux during valsalva manoeuvre.

Tiny prominent subcutaneous veins seen in both legs.

No obvious refluxing perforators seen.

Right side diameter of saphenofemoral junction is 0.8cm, LSV diameter in the upper thigh is 0.78cm and LSV diameter above knee is 0.4cm.

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Mrs. RAHNUMA ARA KHAN MAJLIS

AC01.0003847064

CHMOPP5347174

**DOPPLER LOWER LIMB VENOUS BOTH**

IMPRESSION :

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- Right saphanofemoral incompetence

 --- END OF THE REPORT ---

Dr.SUDHAKAR K

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