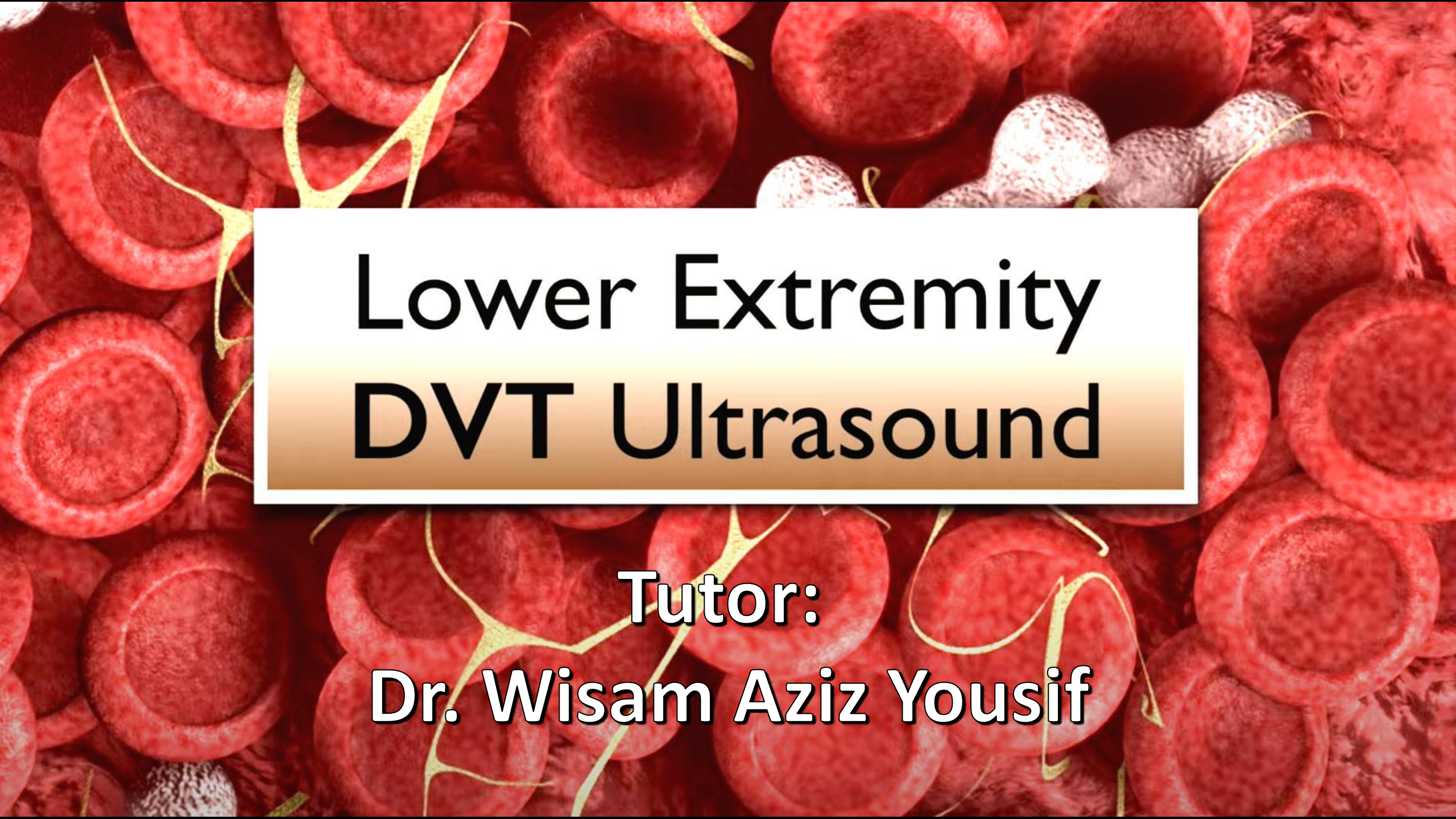
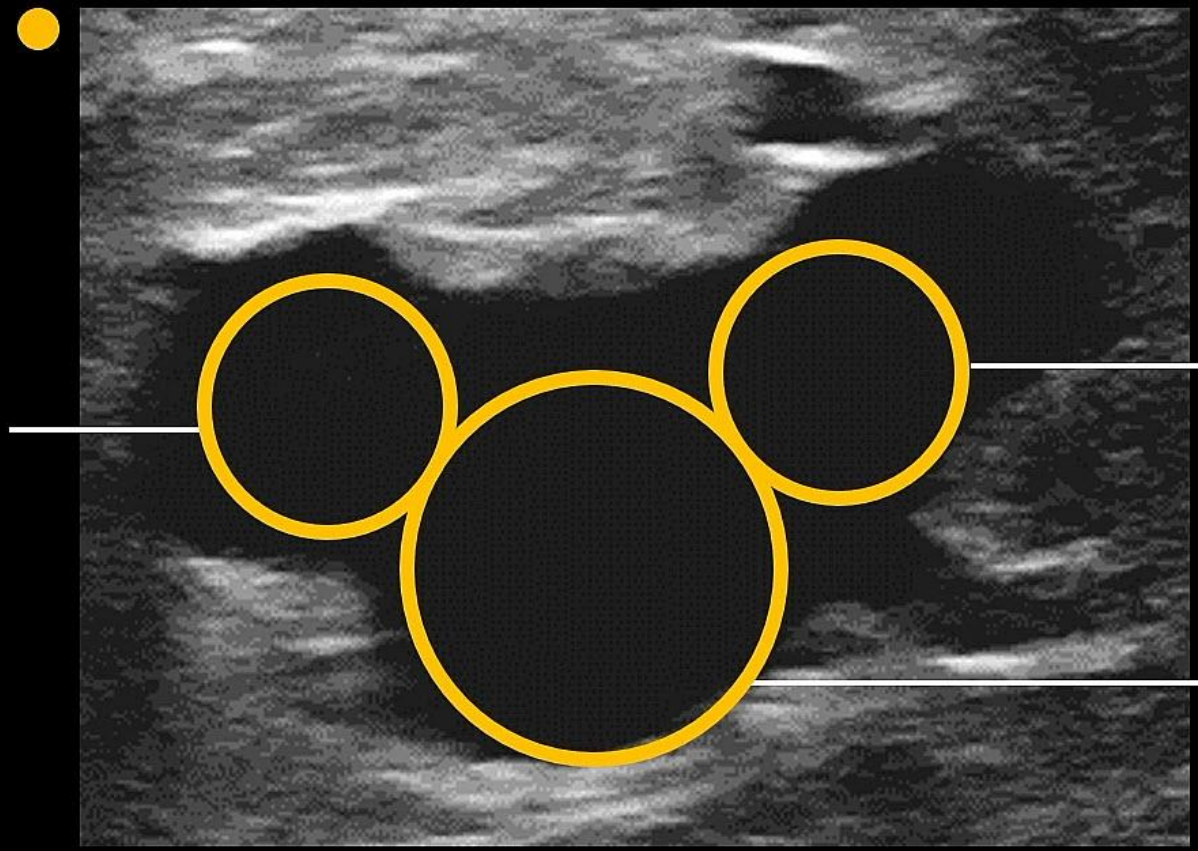
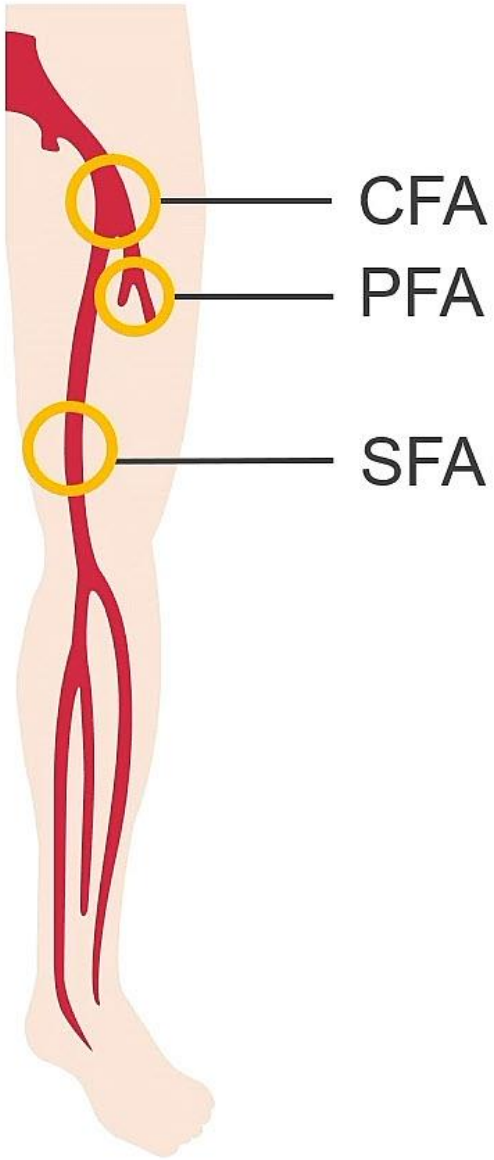
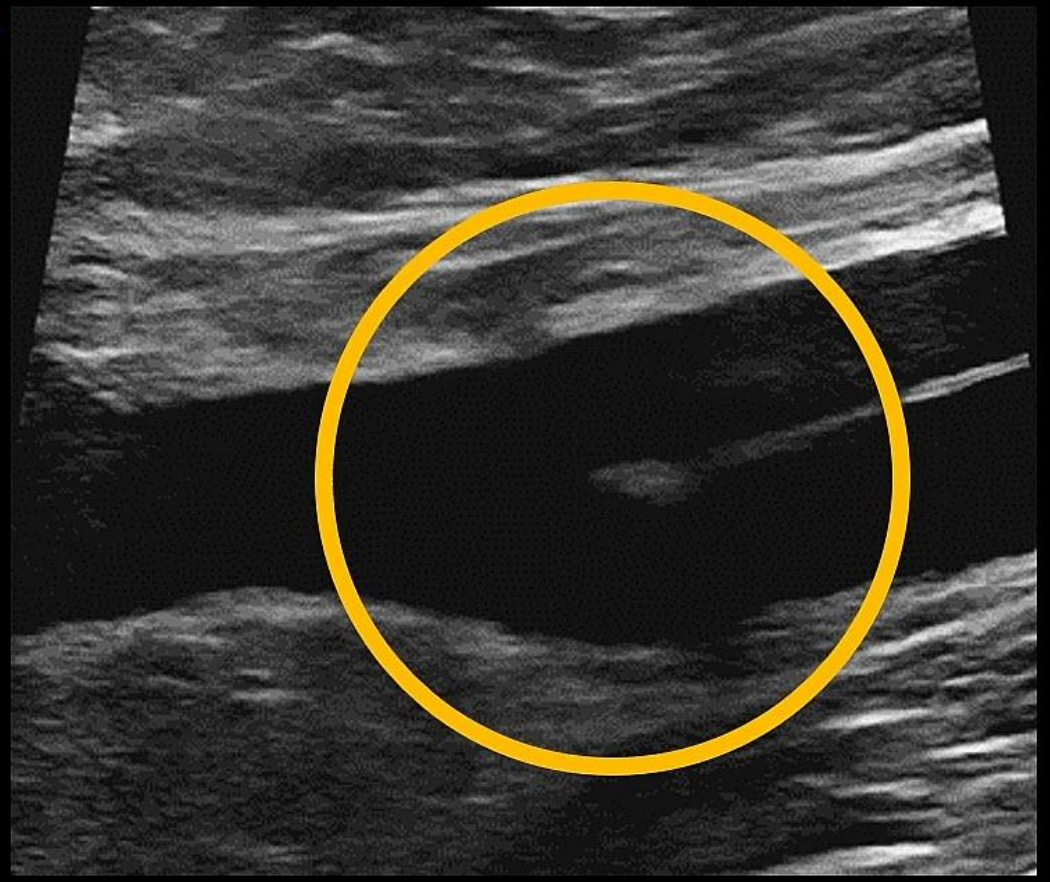
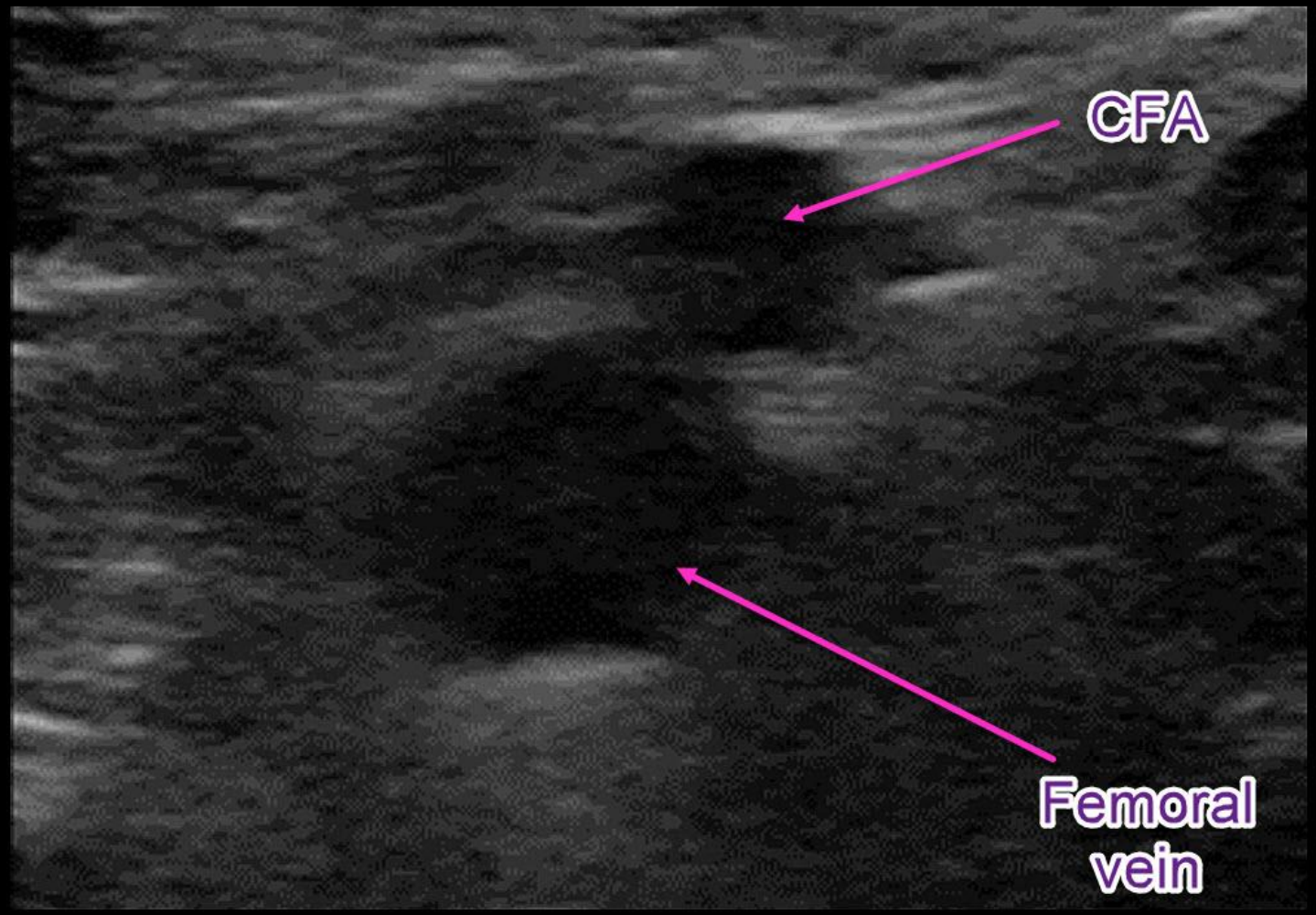
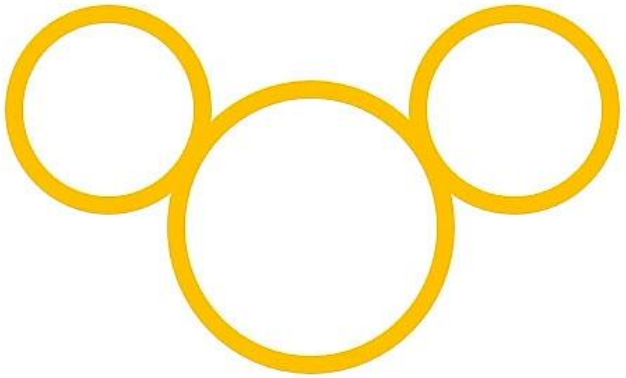

Lower Extremity
DVT Ultrasound
Tutor:
Dr. Wisam Aziz Yousif


Common femoral artery (CFA)
Saphenofemoral junction (SFJ)
Common femoral vein (CFV)

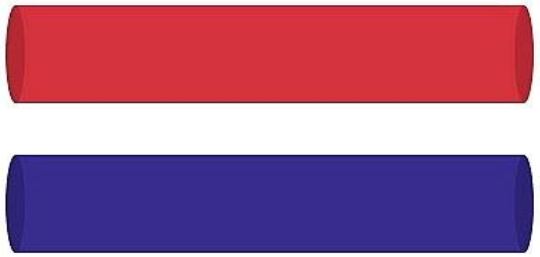

CFA
PFA
SFA



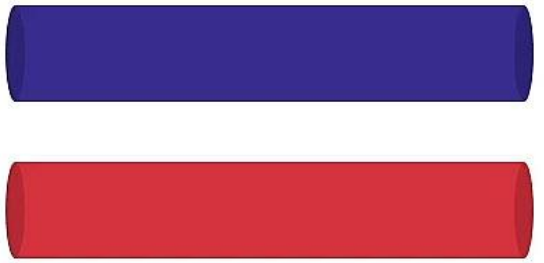

CFA
Femoral vein



CFA



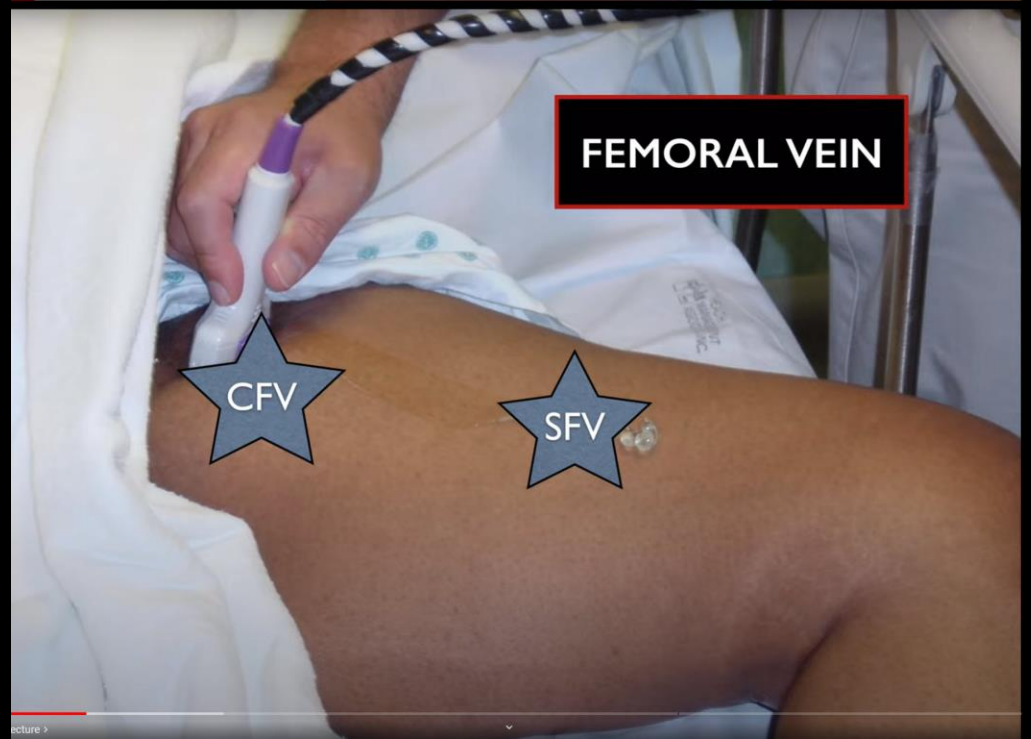
SFA

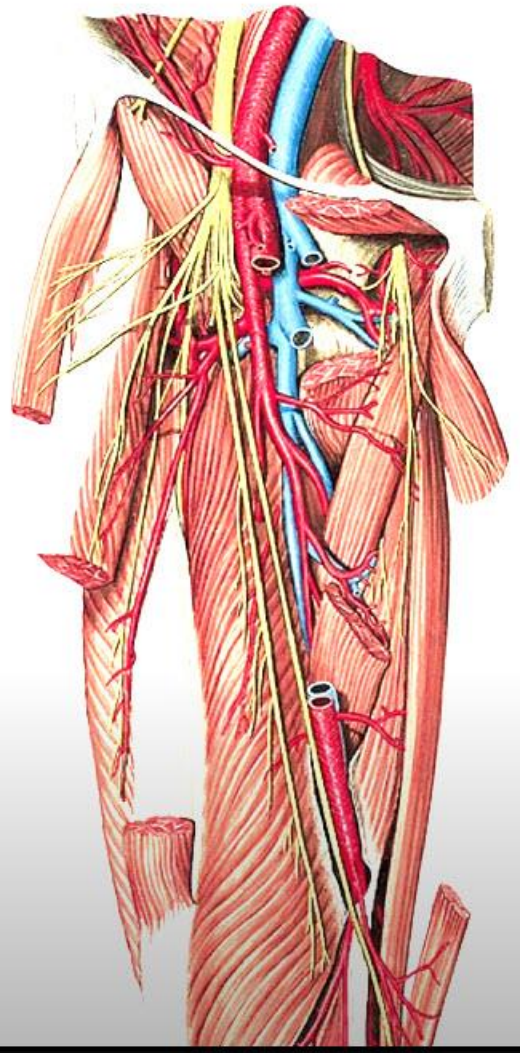


Popliteal artery

SWOLLEN leg


FEMORAL VEIN


FEMORAL VEIN
CFV
SFV



Anatomy

Vein Lateral

Artery

Nerve Medial

PROXIMAL DVT = Popliteal and Above

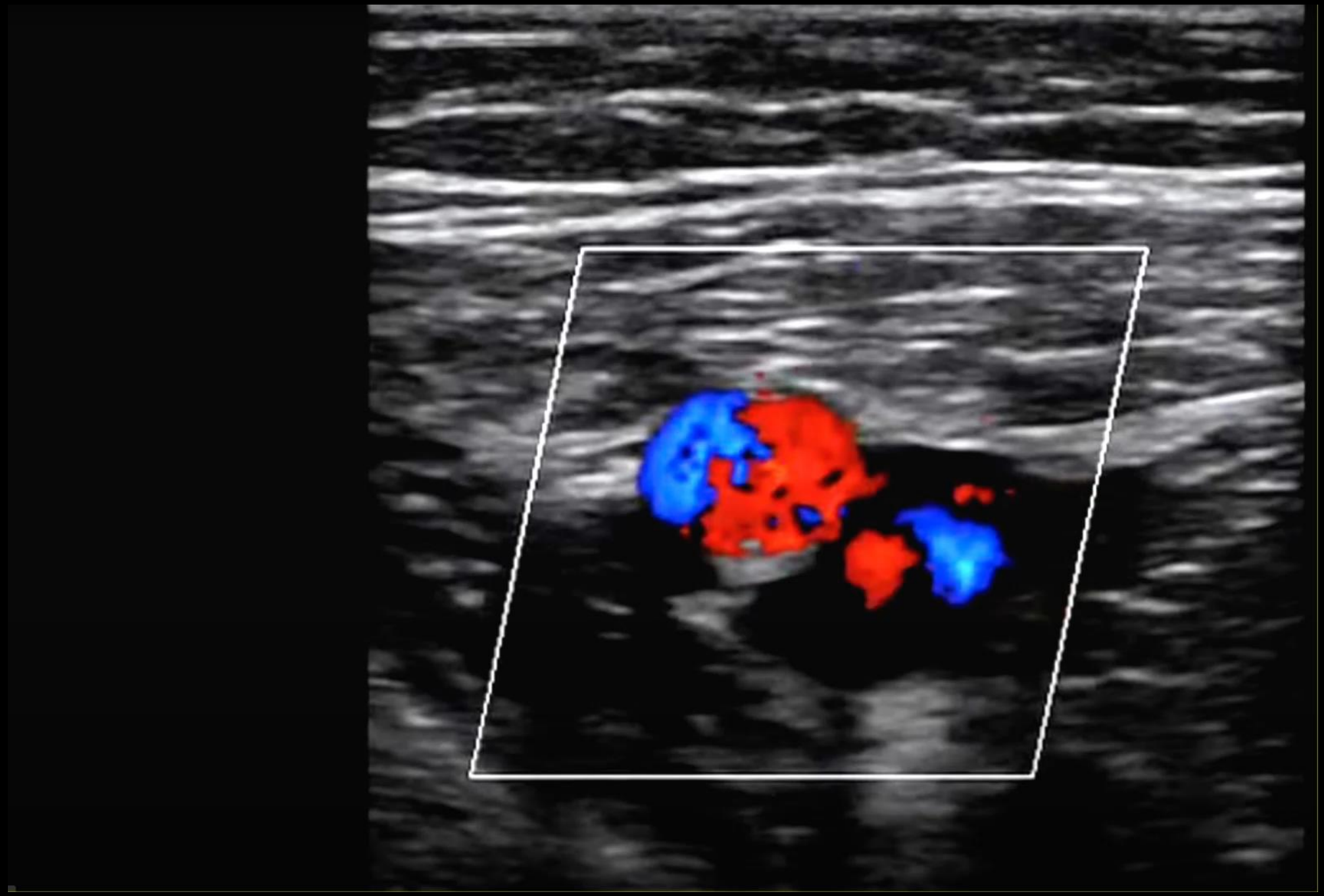
3 TECHNIQUES

1. Color Doppler
2. Augmentation
3. Compression

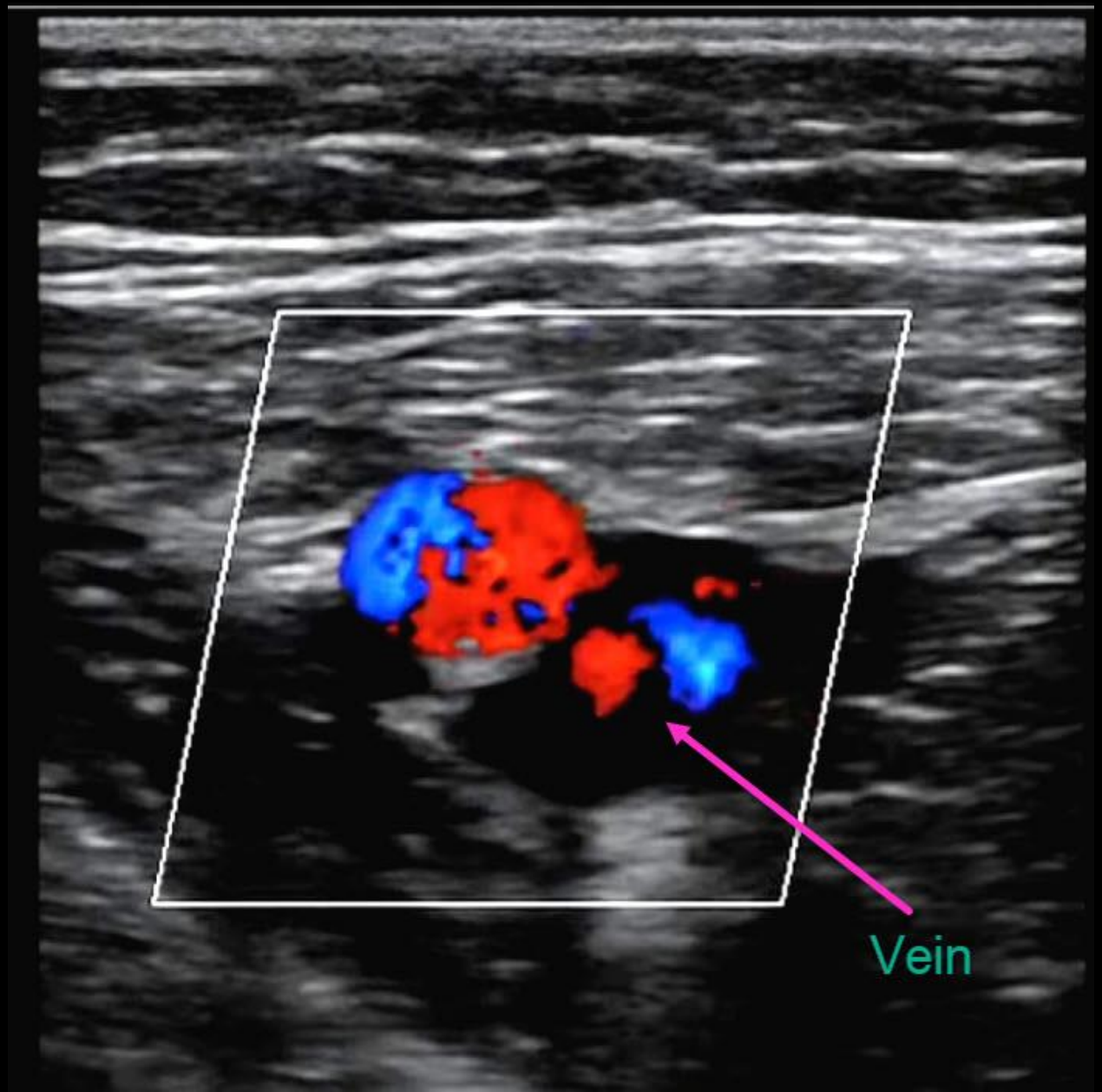
Color Doppler did **NOT** detect any additional Proximal/Calf DVT

ONLY use Vein **COMPRESSIBILITY**.

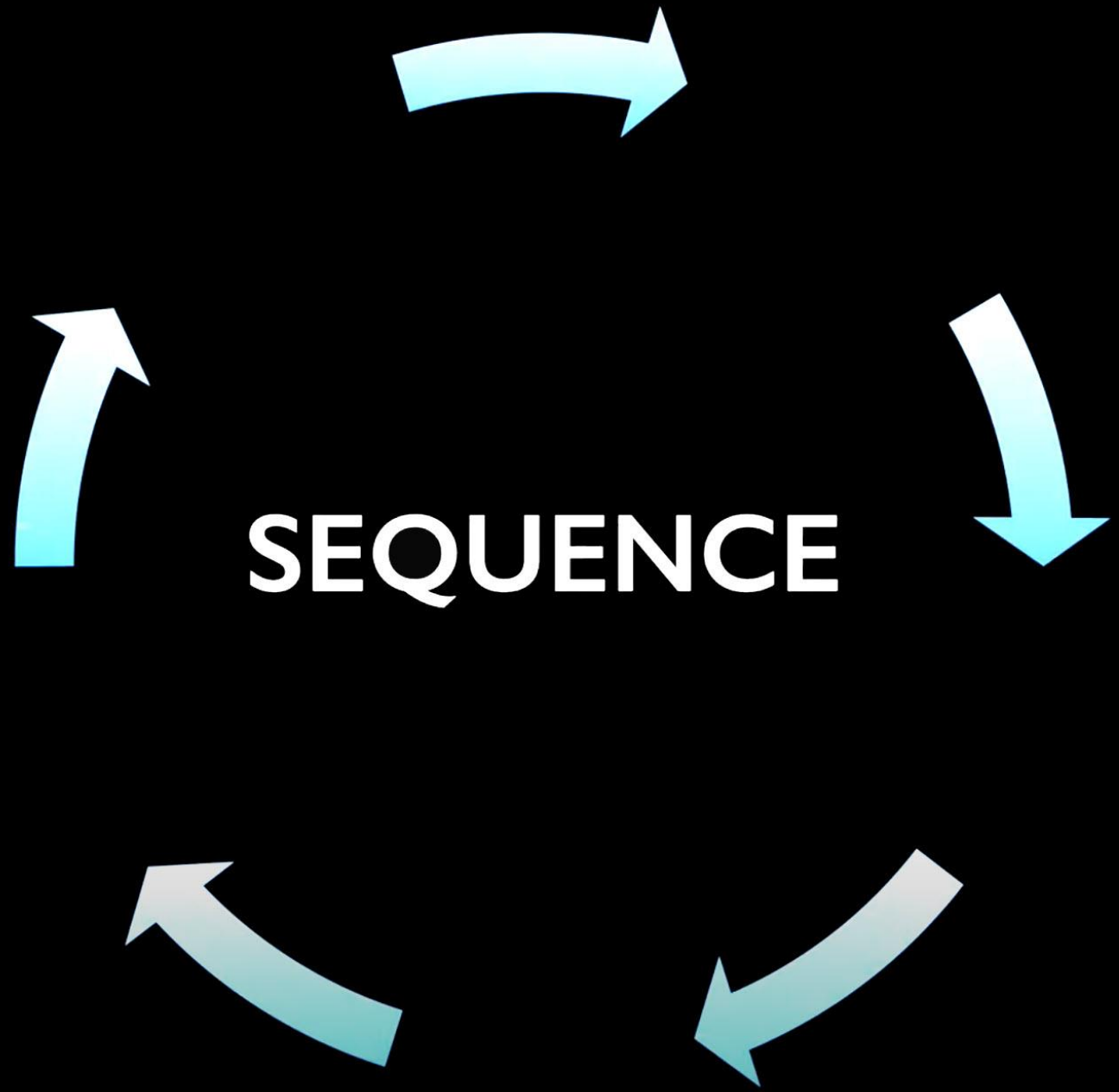
100% Sensitive for PROX DVT



1 Color Doppler



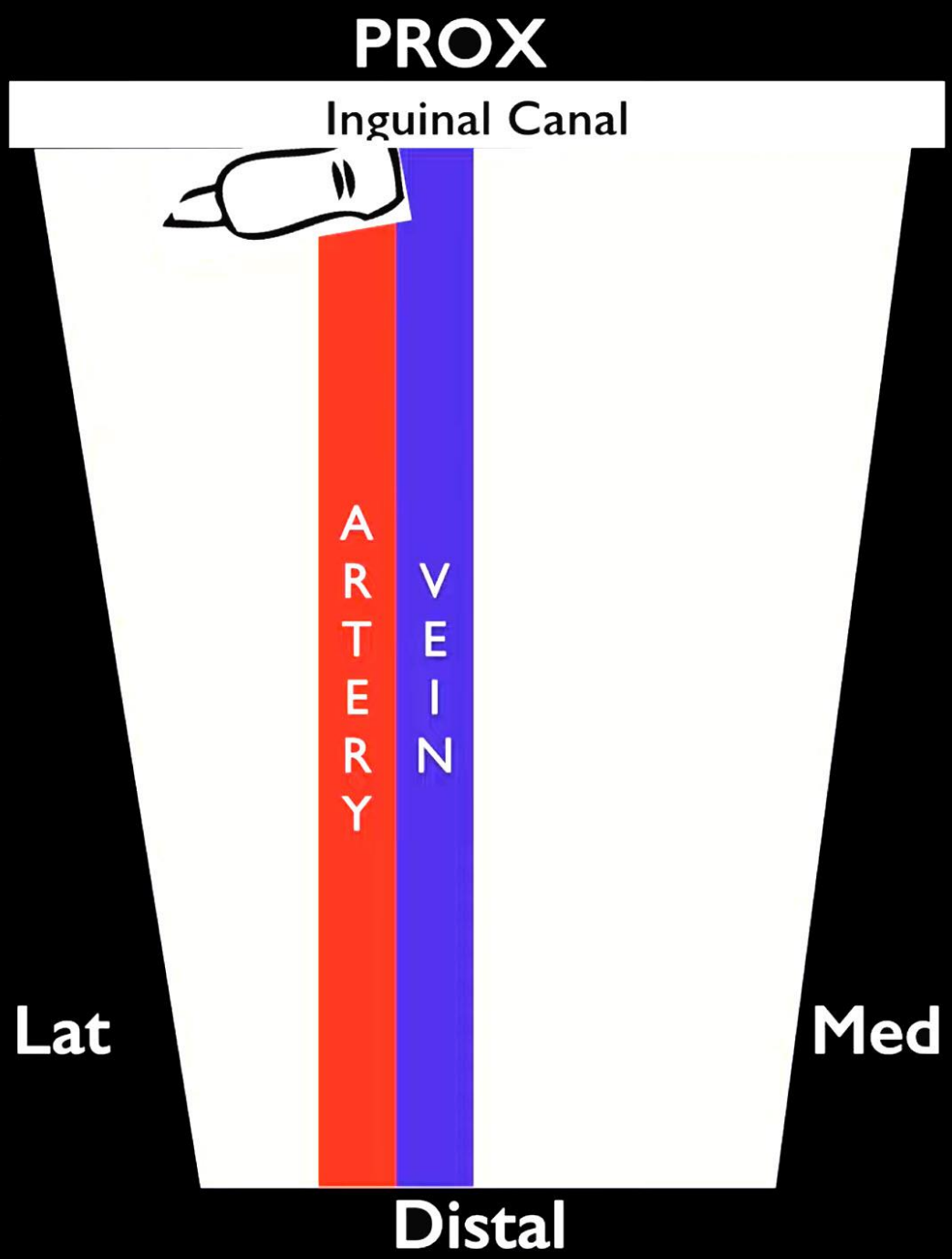
3 Compression:



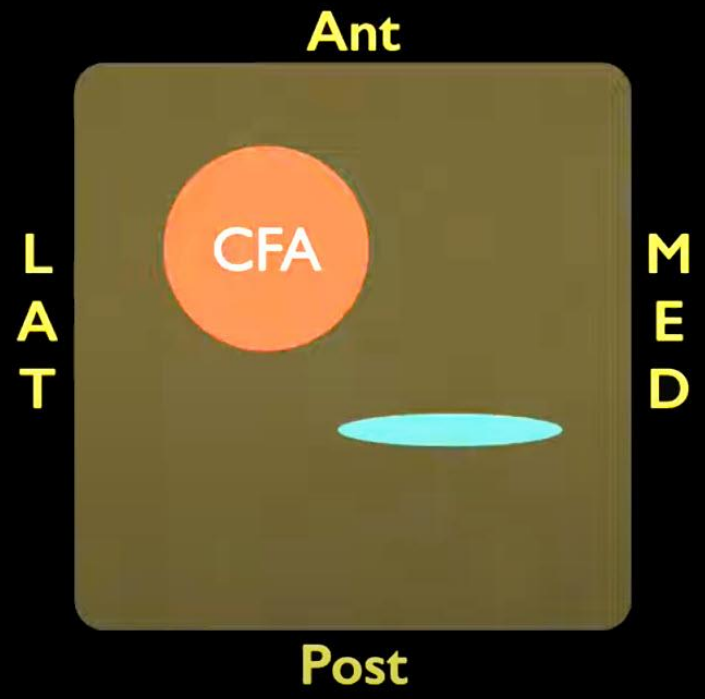
RIGHT LEG

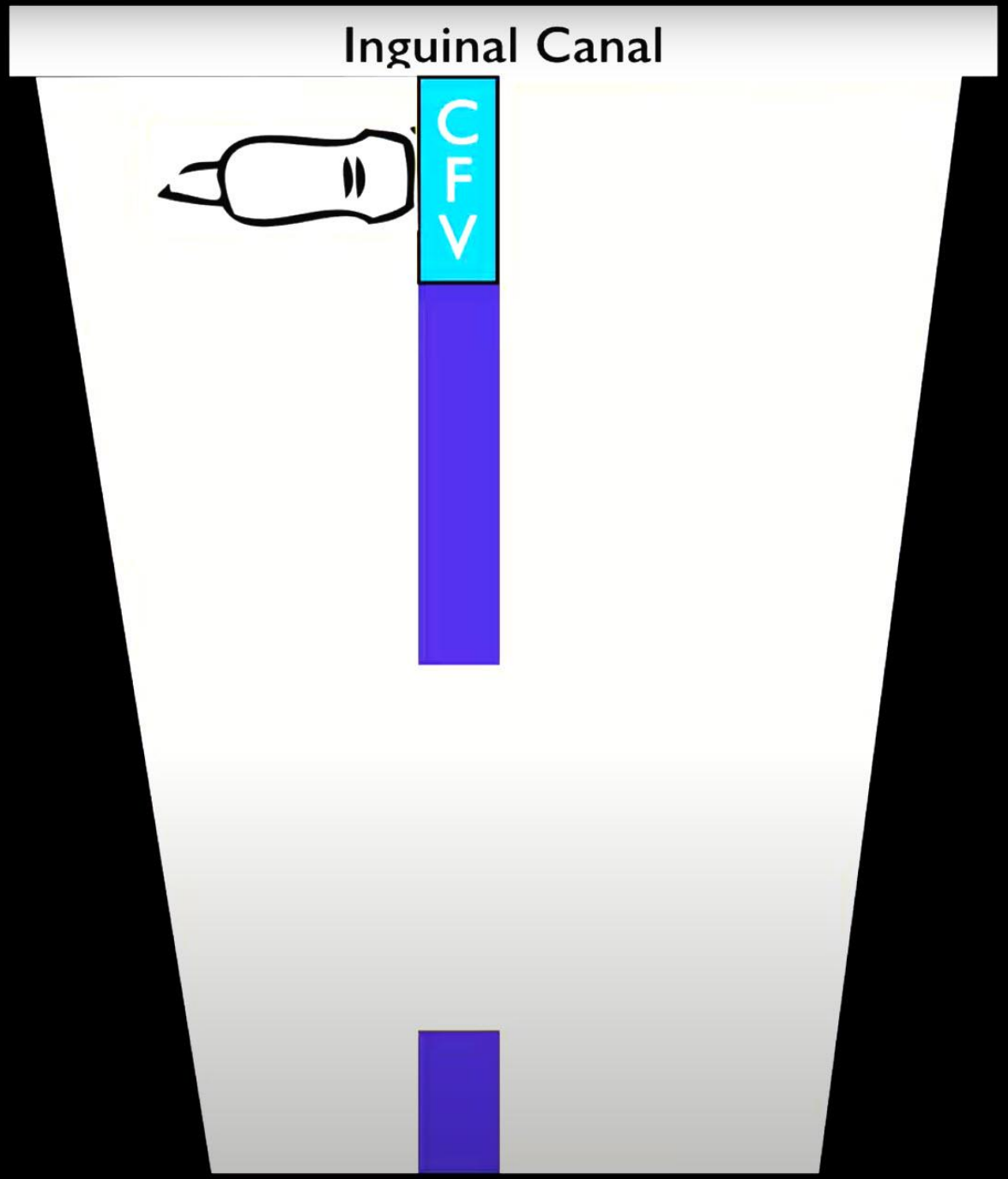
Start at Inguinal Canal

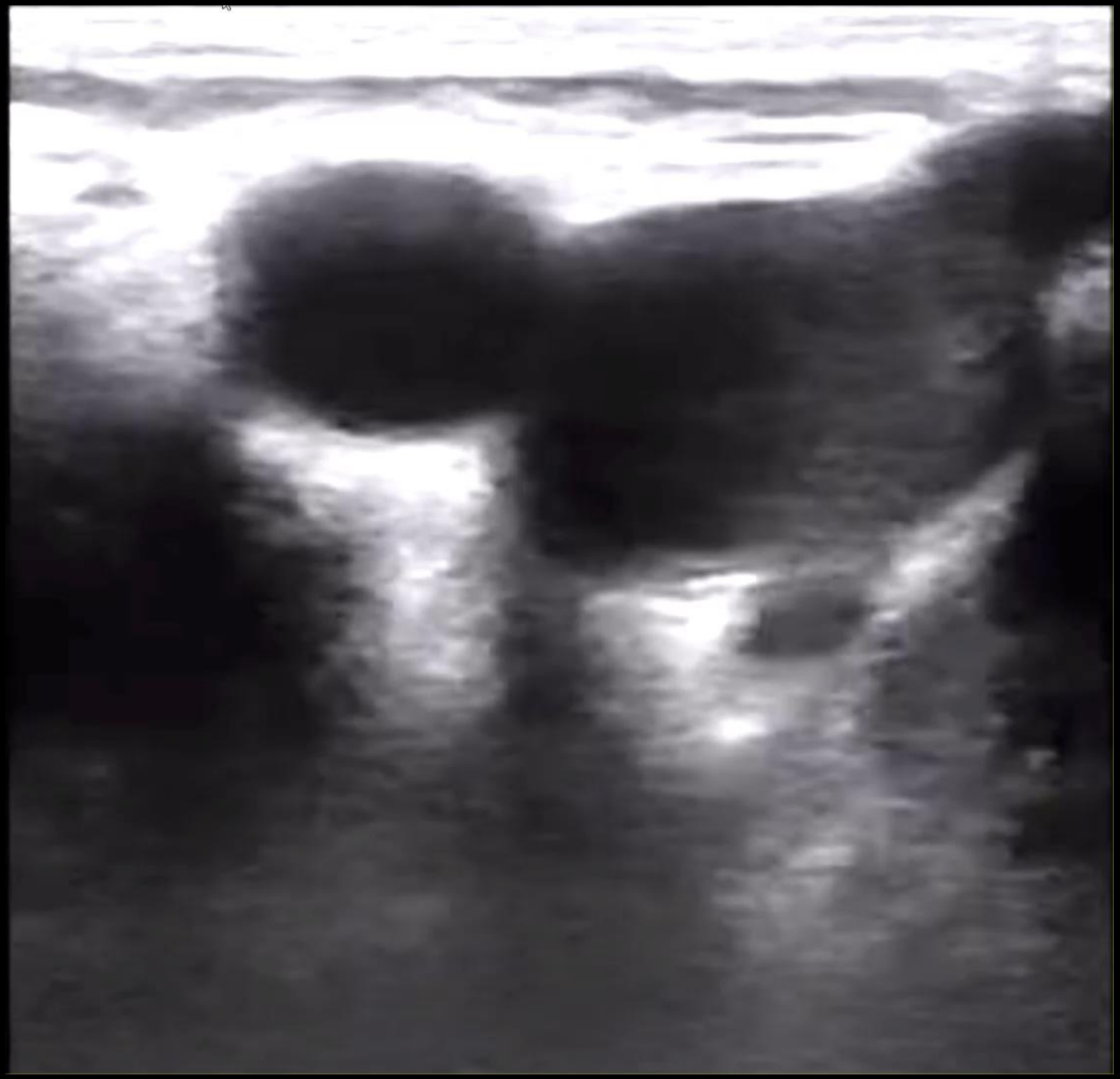
Locate
Common Femoral
ARTERY and VEIN



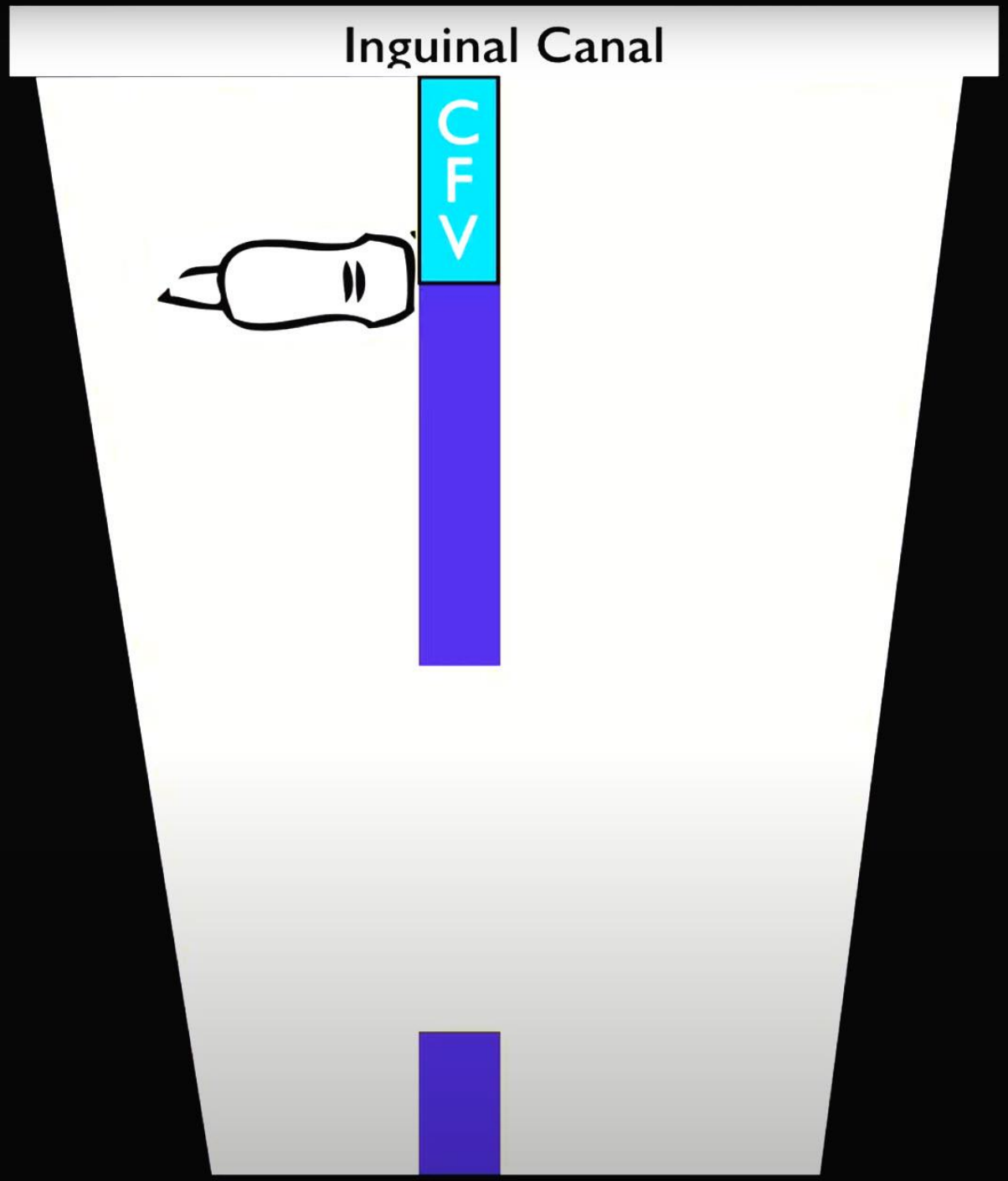
COMMON FEMORAL VEIN



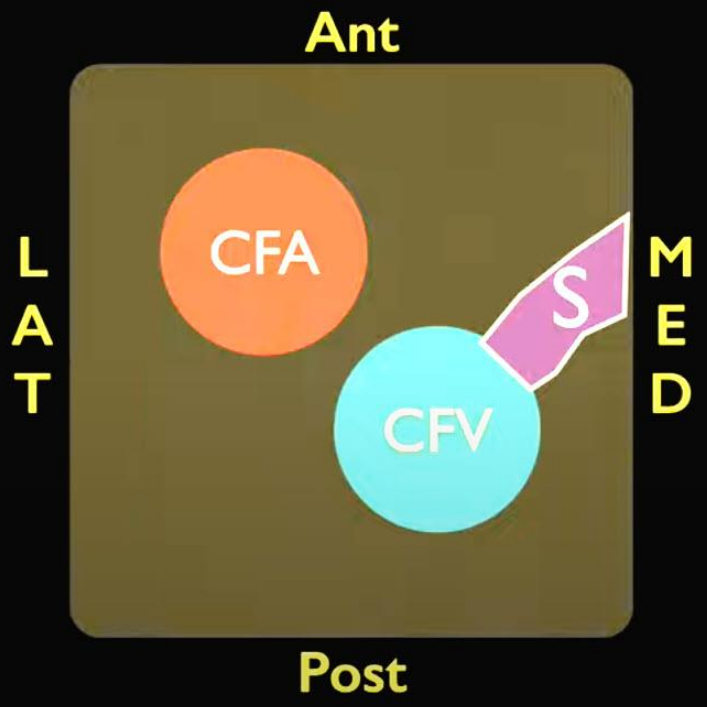


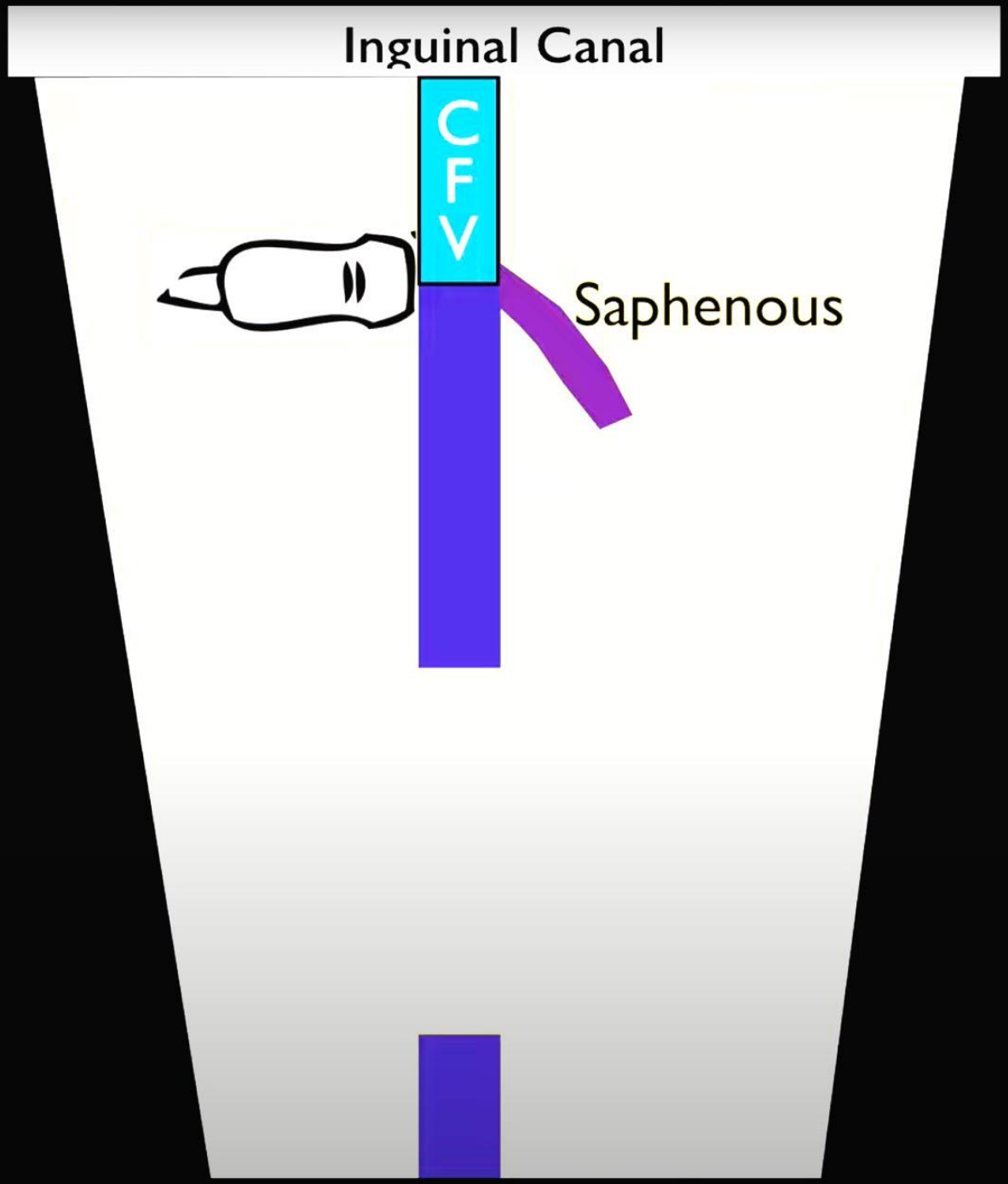


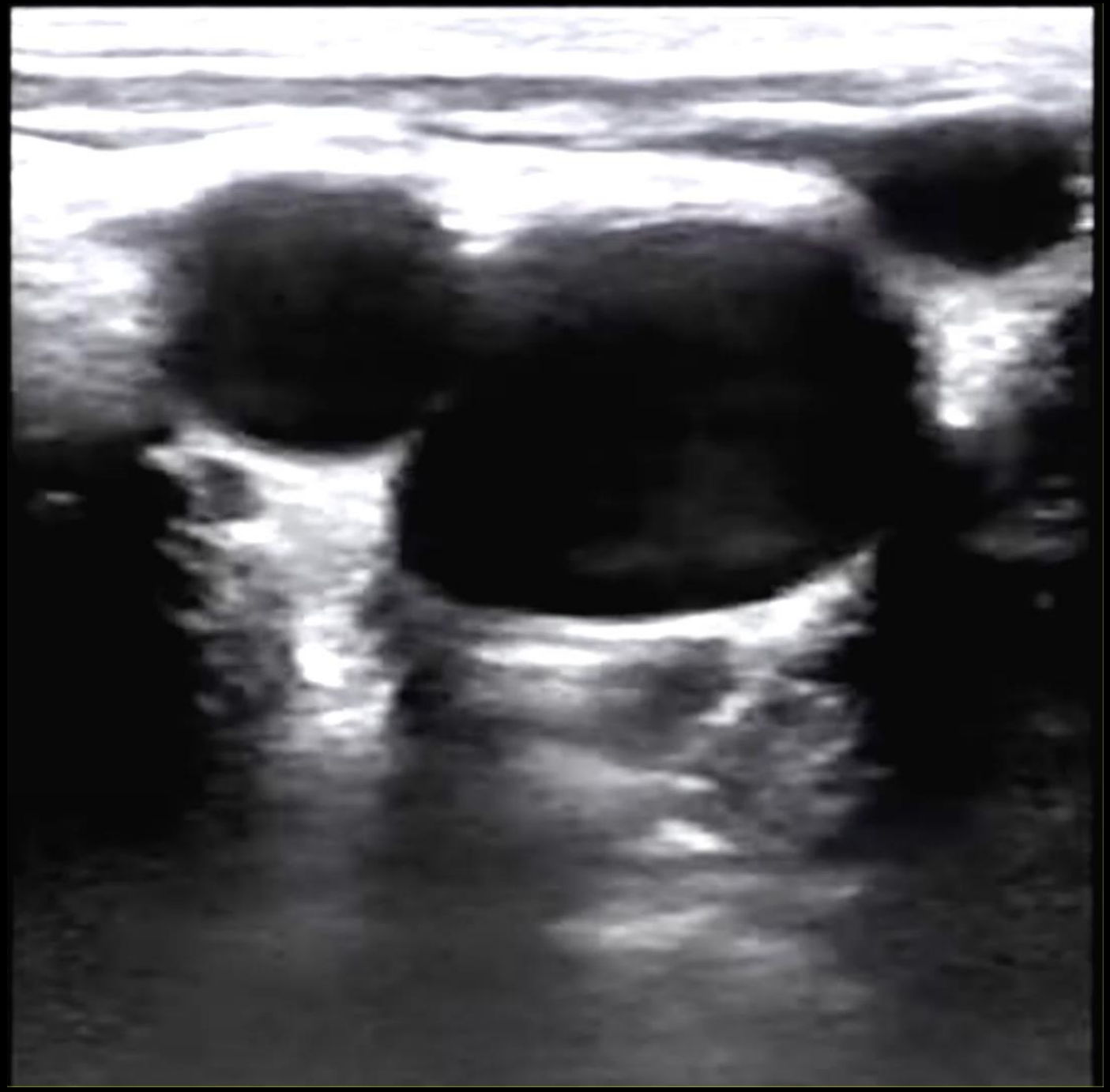
Scan 1-2cm
Distally



Saphaneous Vein (superficial)

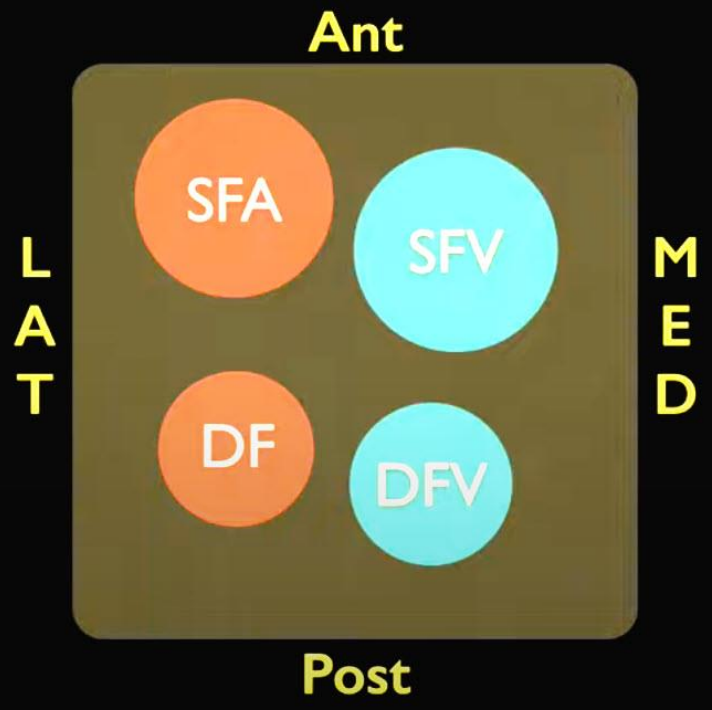


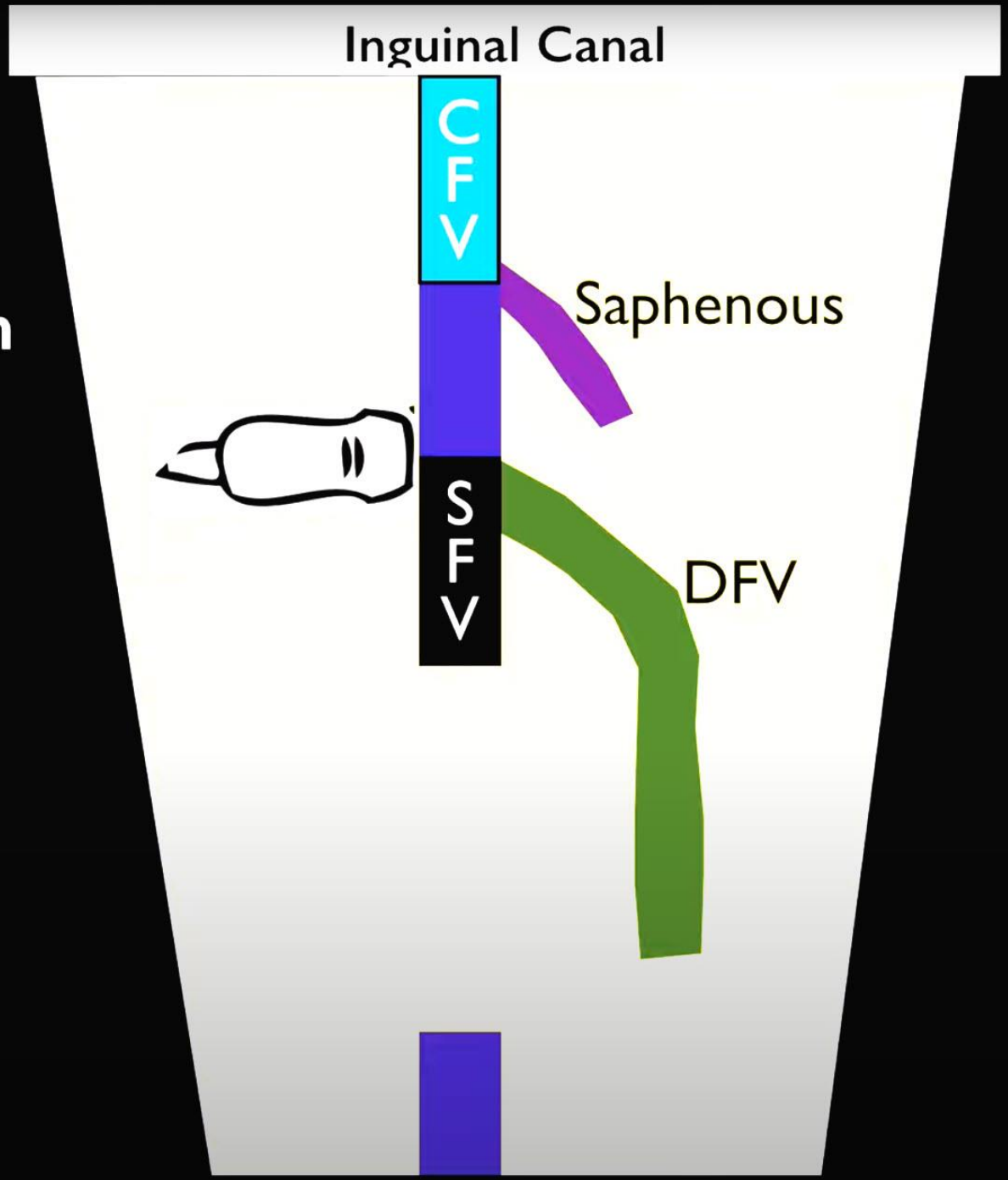




Deep Femoral Vein

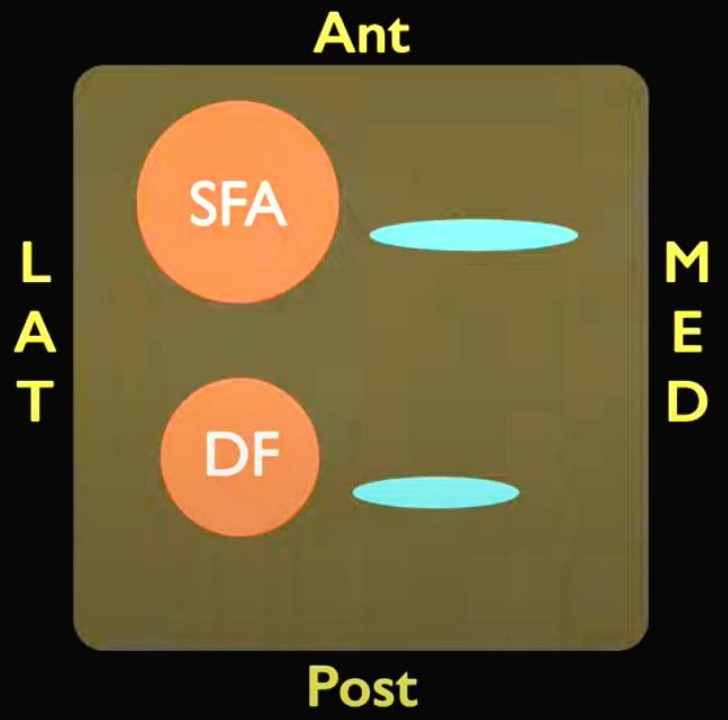
Superficial Femoral Vein

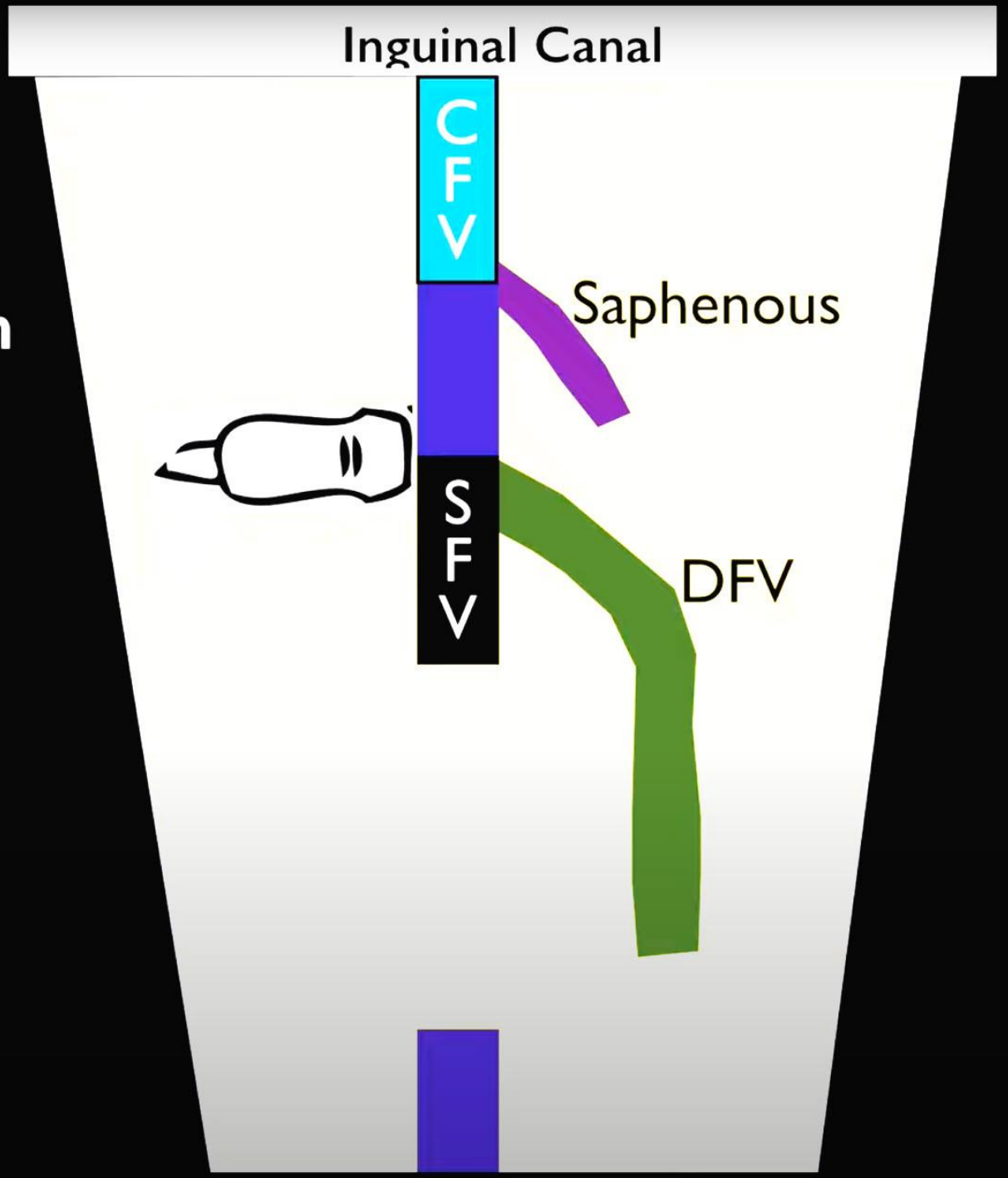




Deep Femoral Vein

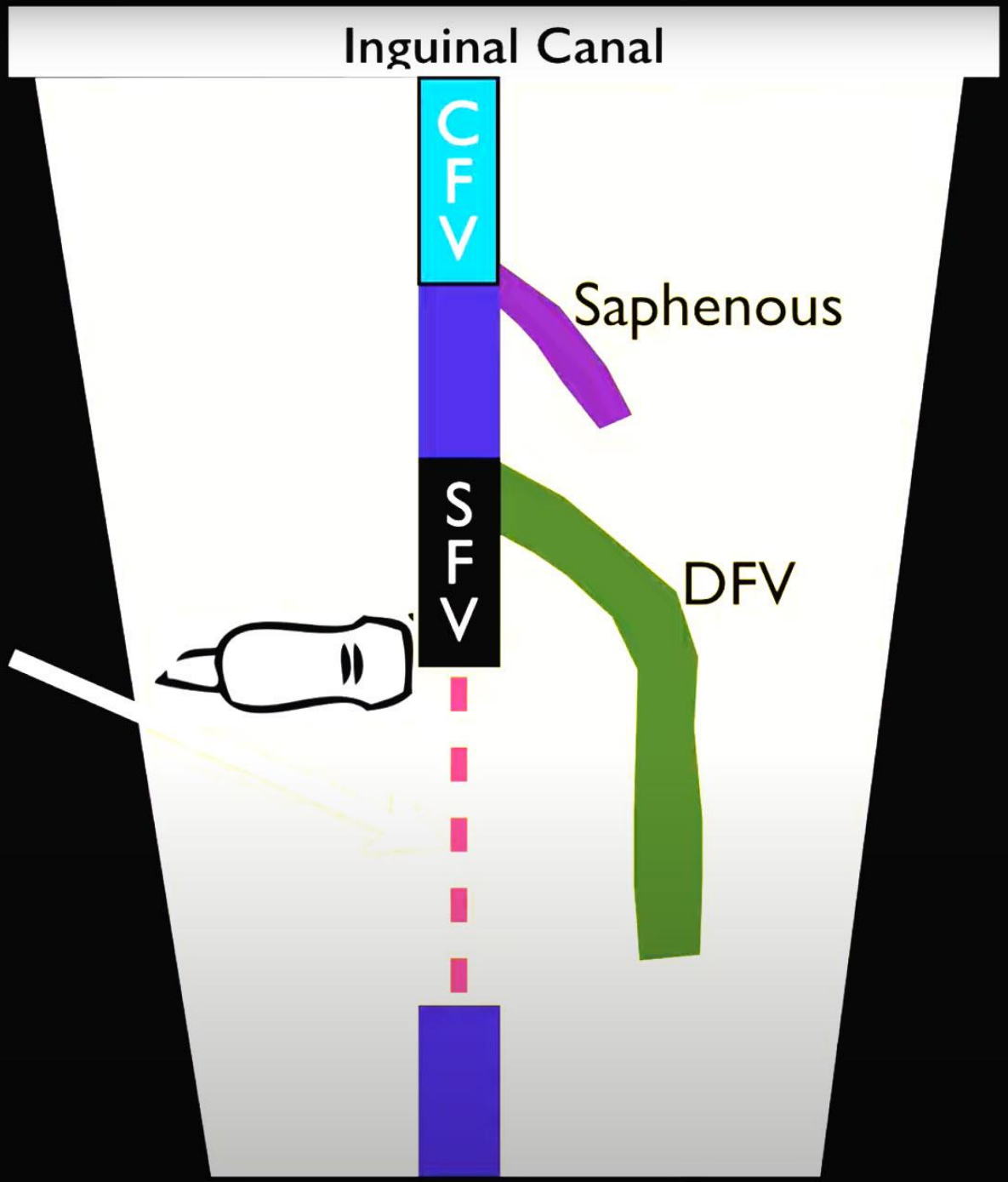
Superficial Femoral Vein



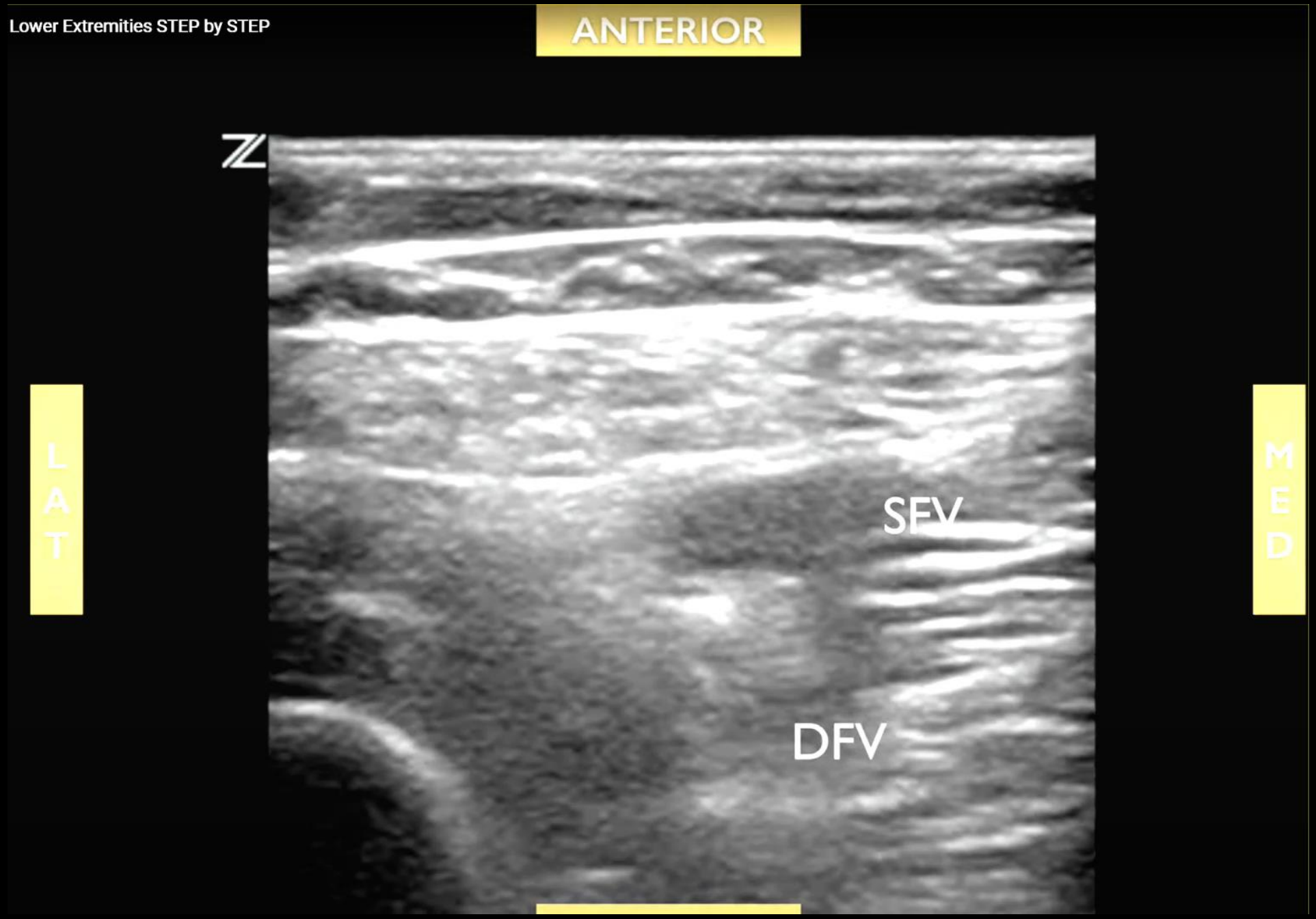


DFV DISAPPEARS

SFV Around Knee

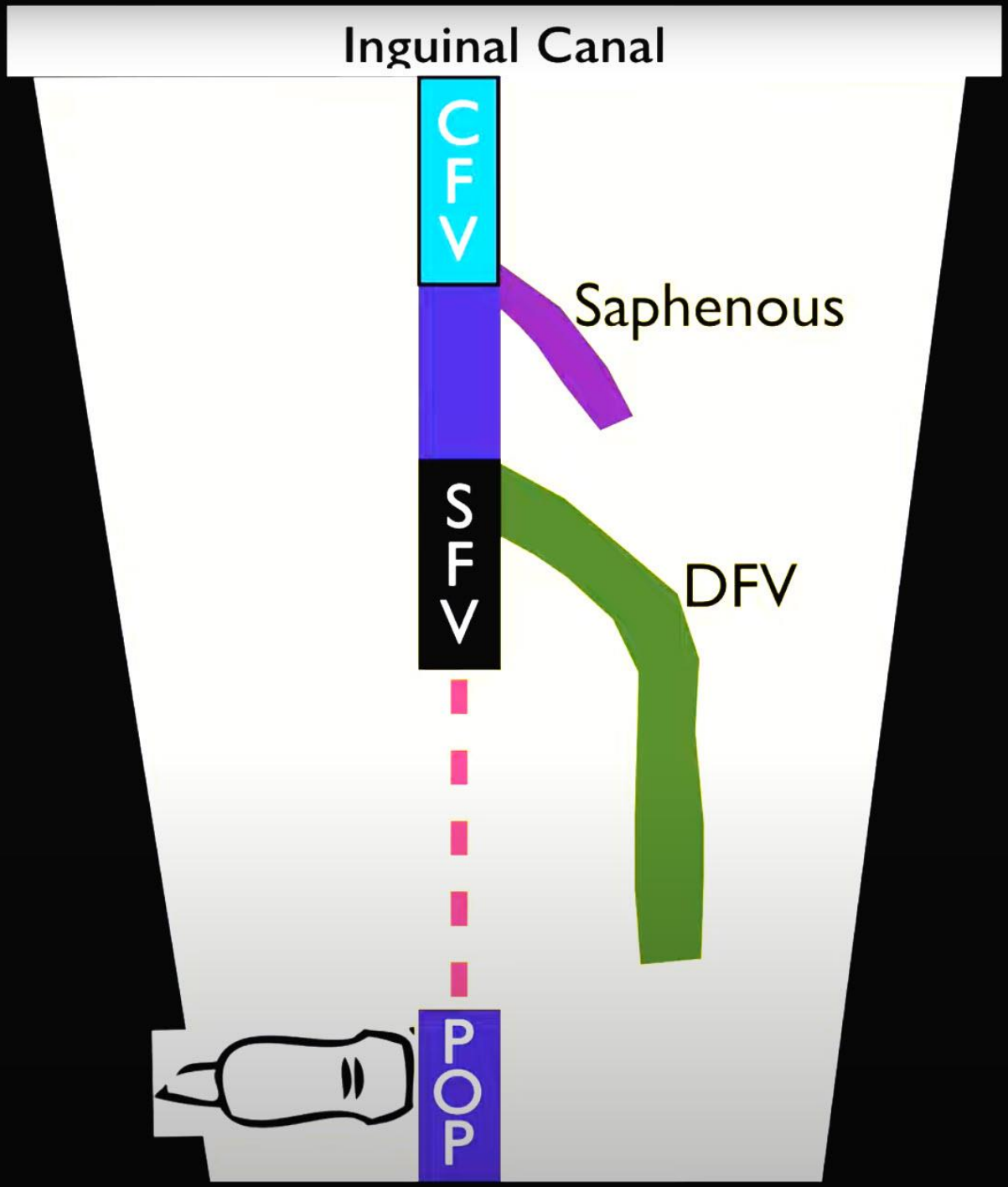


Lower Extremities STEP by STEP

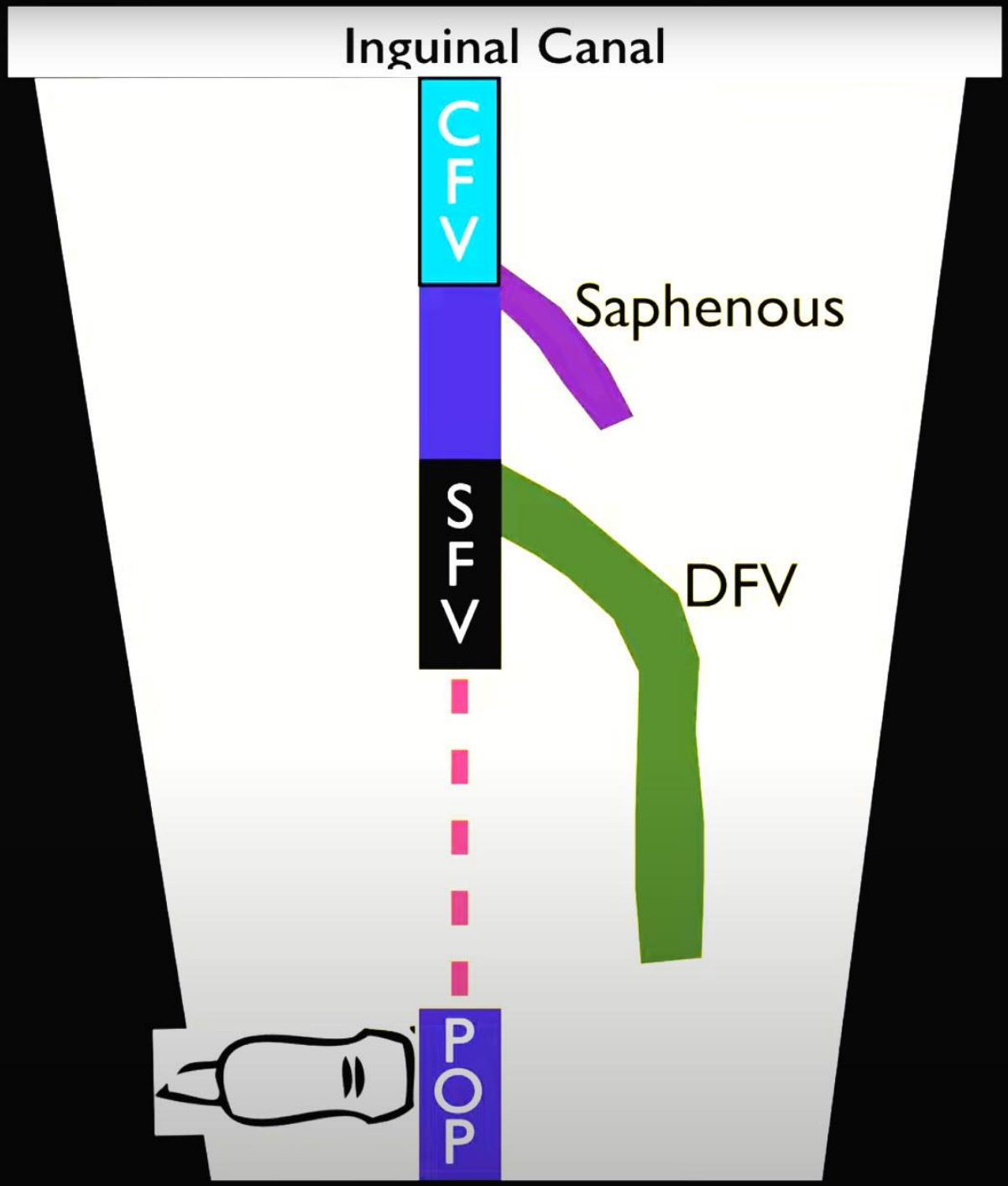


Popliteal Vein

"Pop on Top"



Scan 2cm Above and Below Popliteal Crease



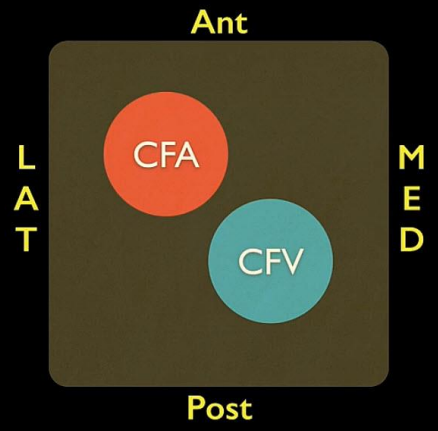

M
2
4

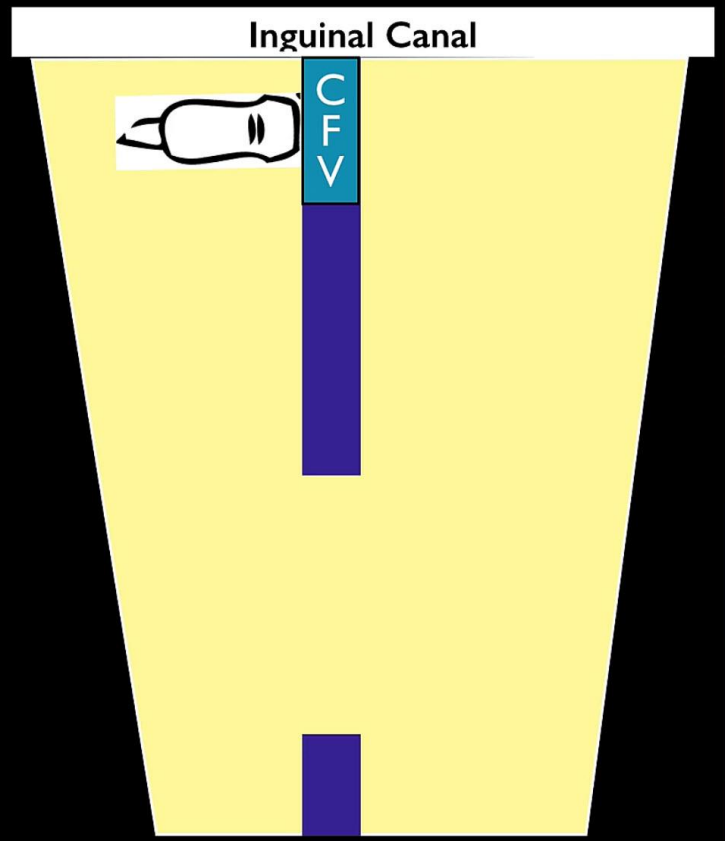
Abnormal Veinous Scan

ABNORMAL SCANS

DVT:

COMMON FEMORAL VEIN

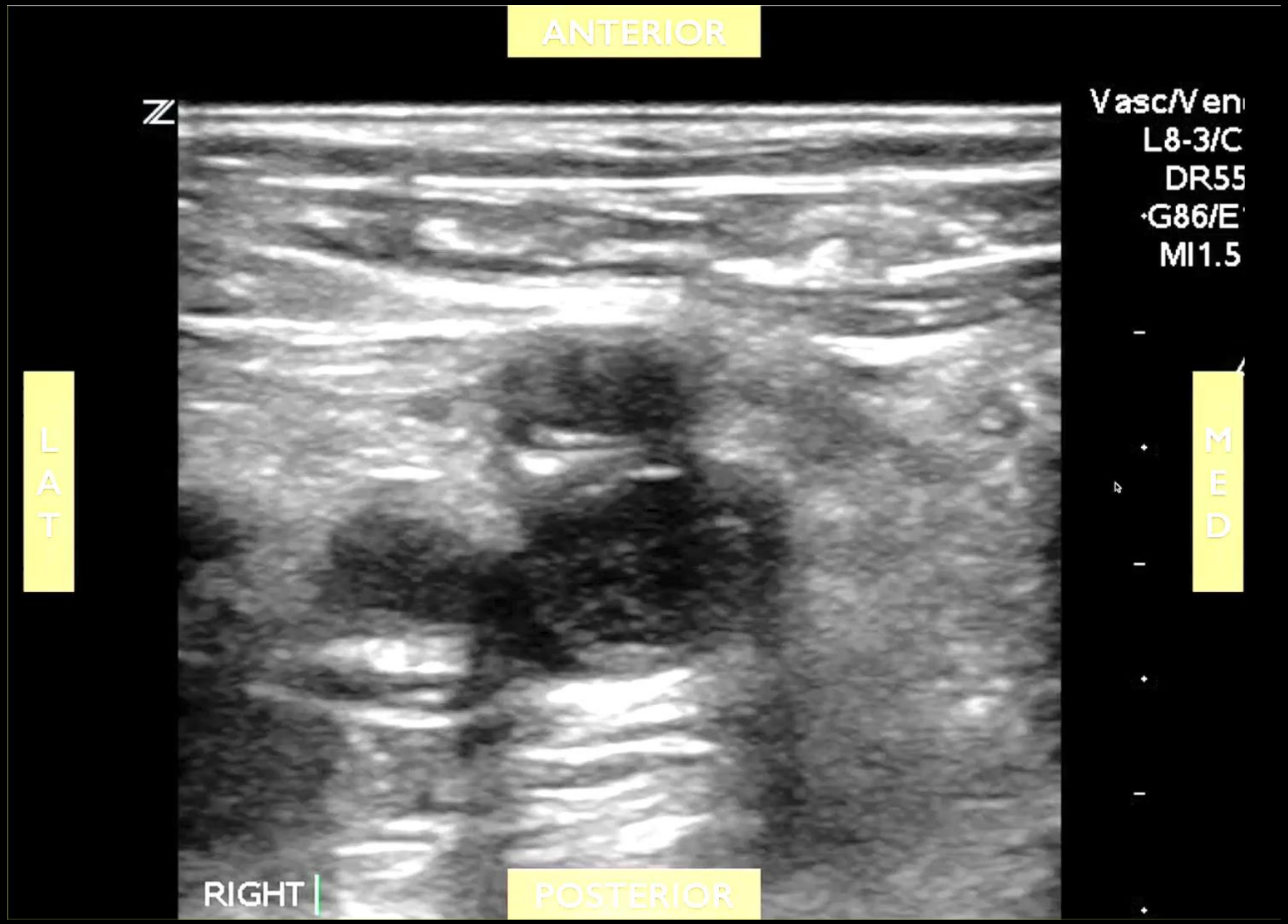




Do not do augmentation or hard compression
as they can lead to dislodge of thrombus

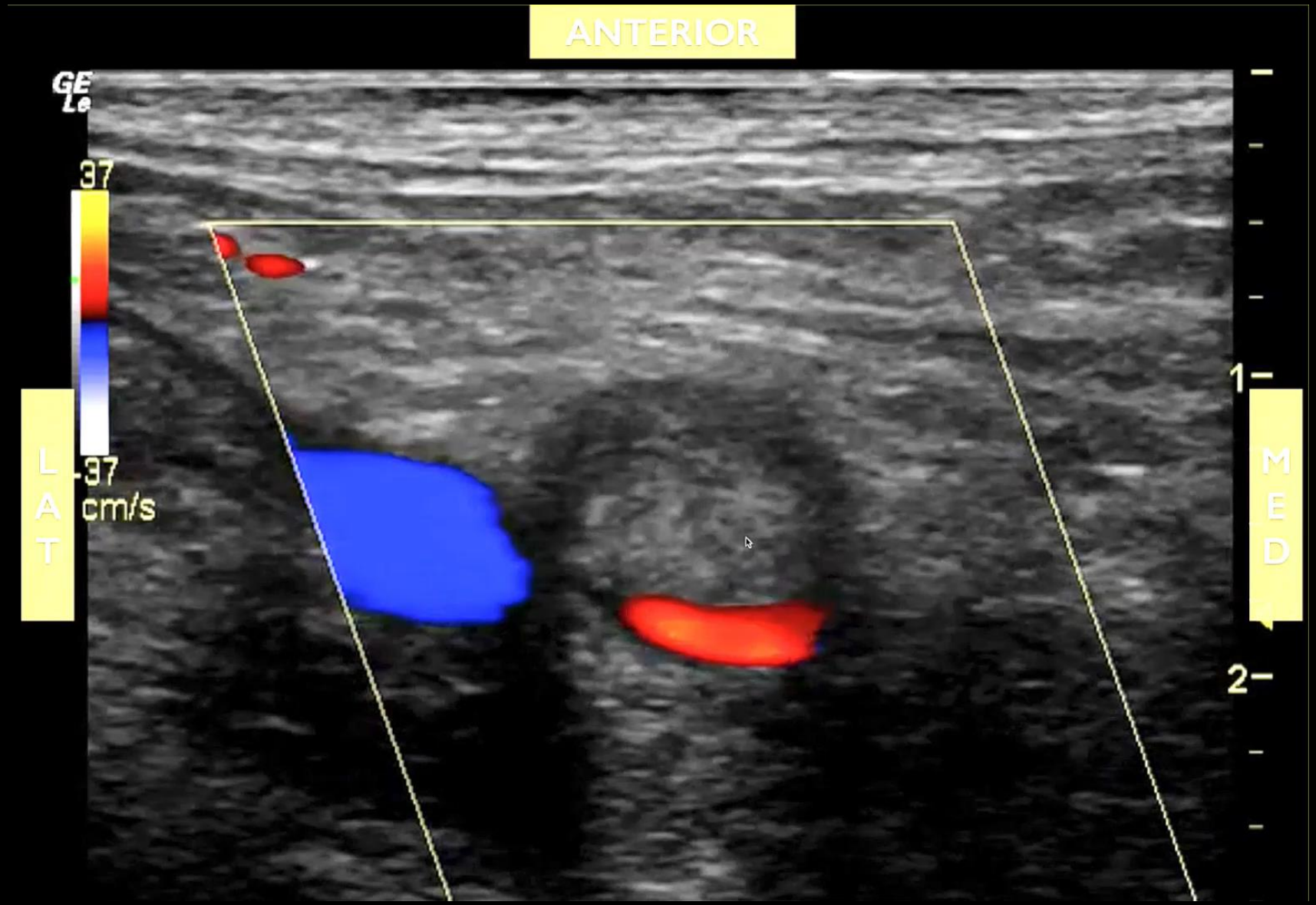
DVT in Common Femoral Vein on B-Scan

CFV uncompressible



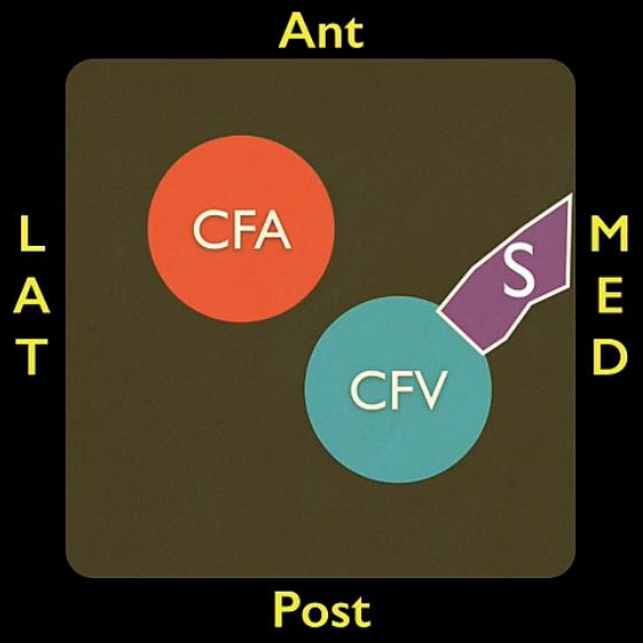
Uncompressible vein

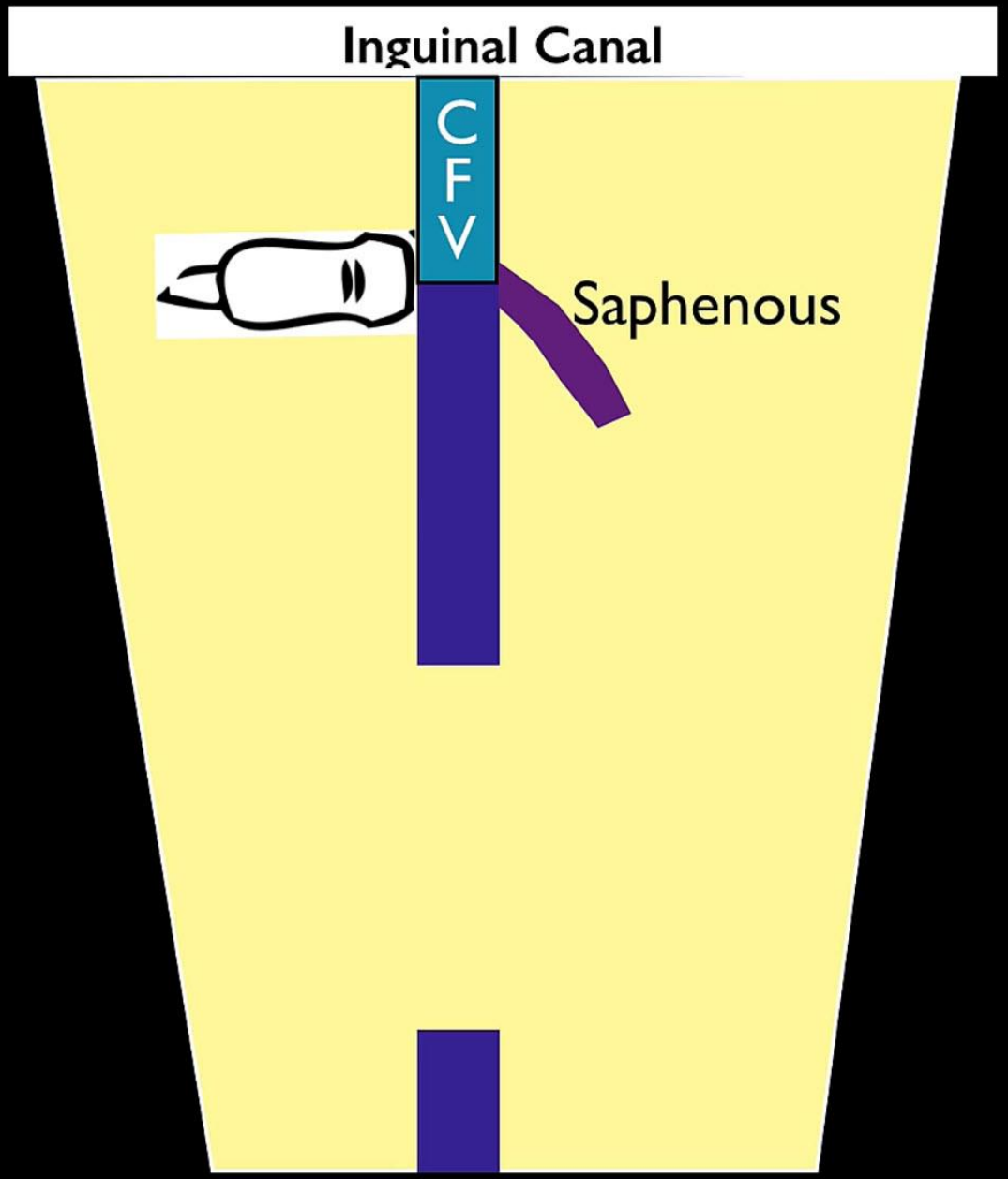
Color Doppler shows DVT



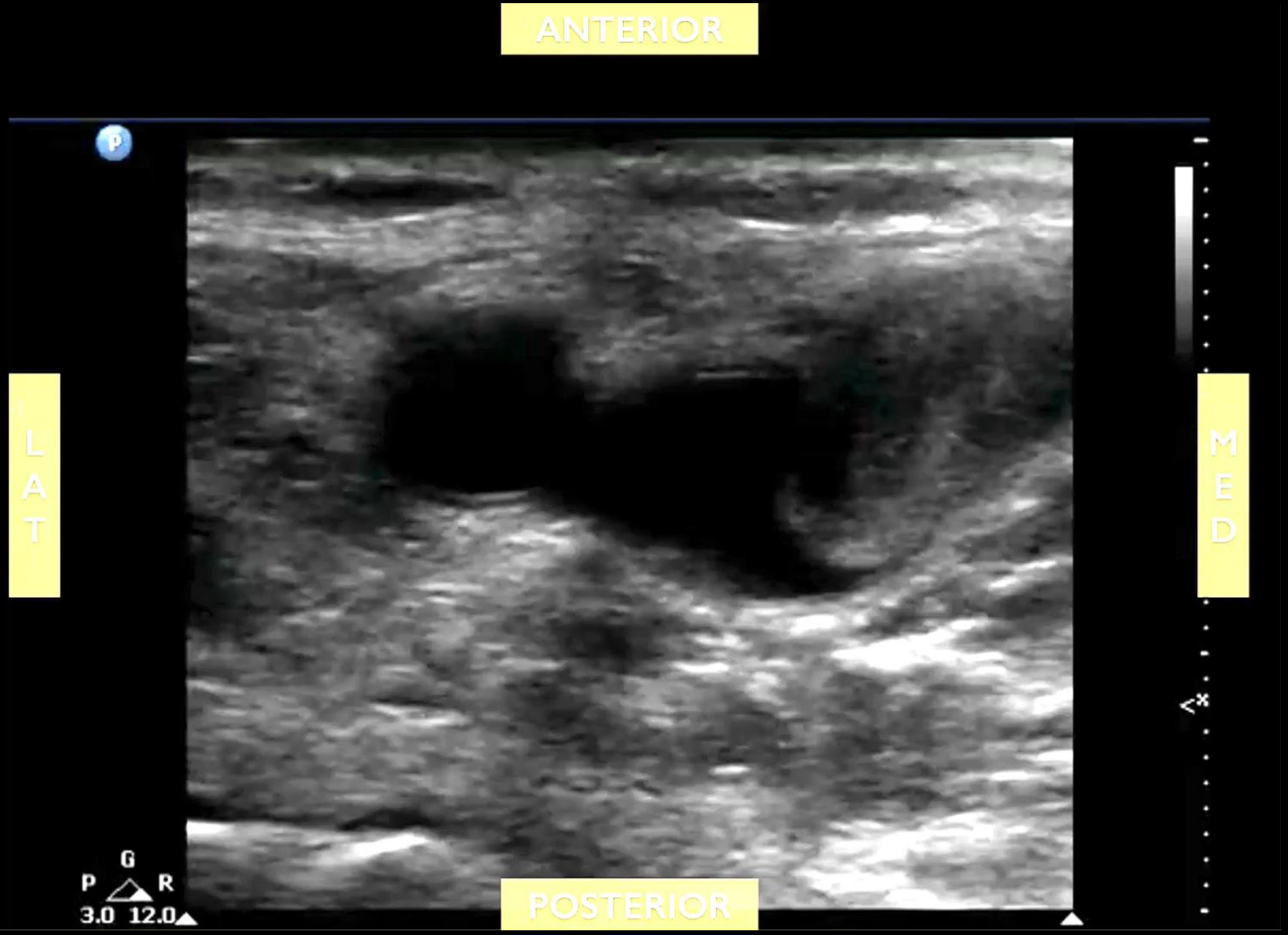
DVT on the junction between SV and Femoral vein

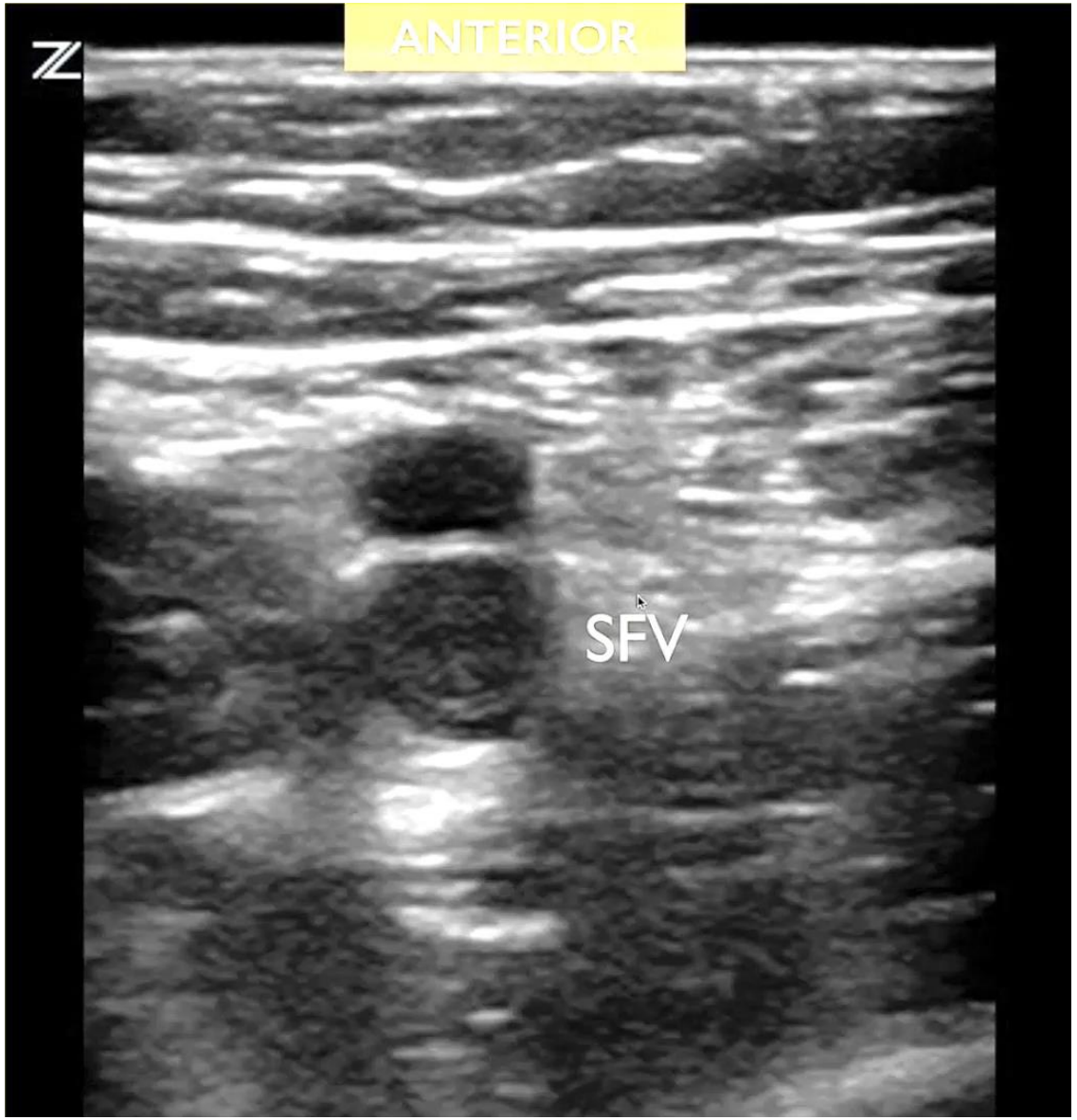
Saphaneous Vein
(superficial)



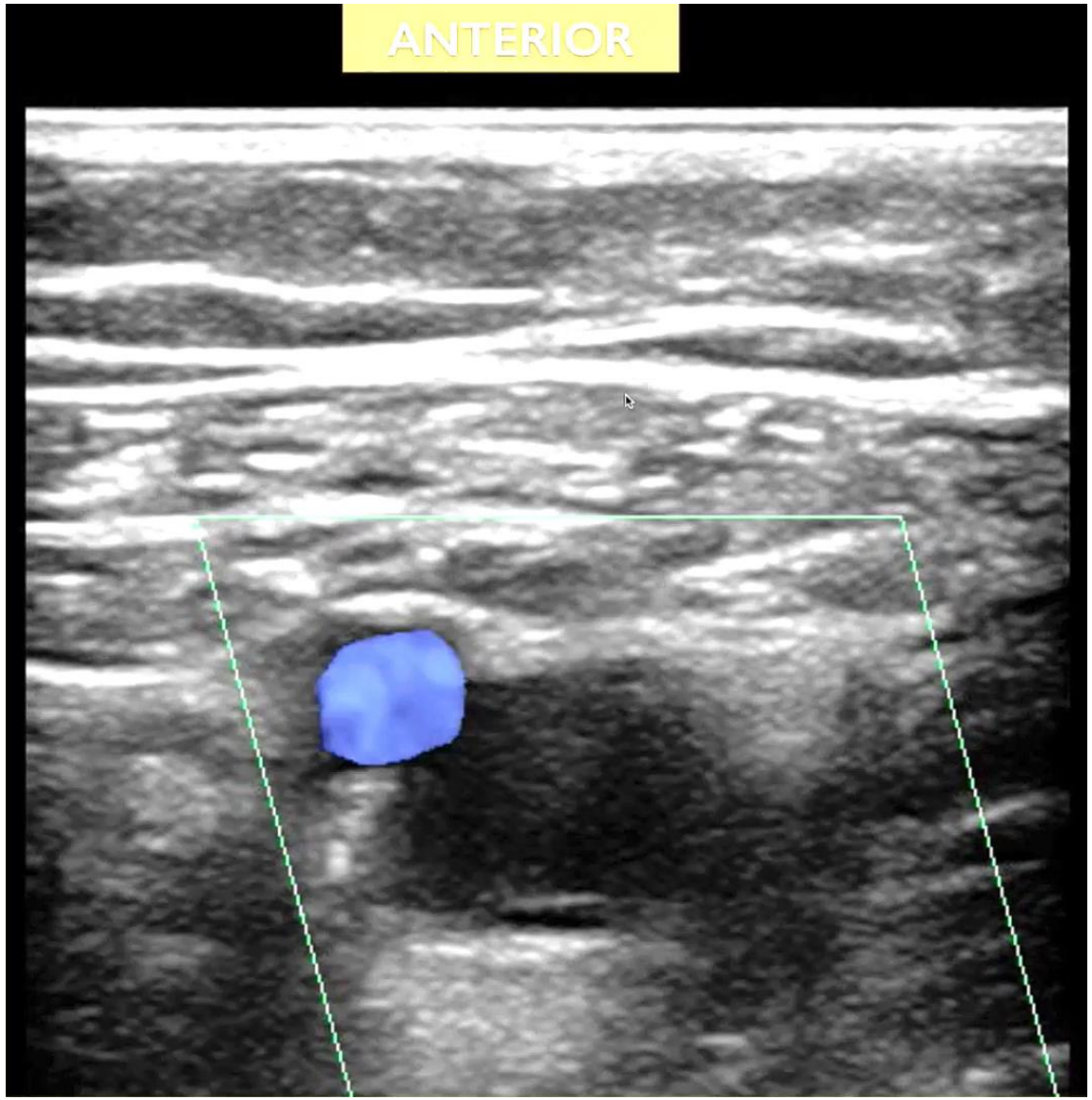


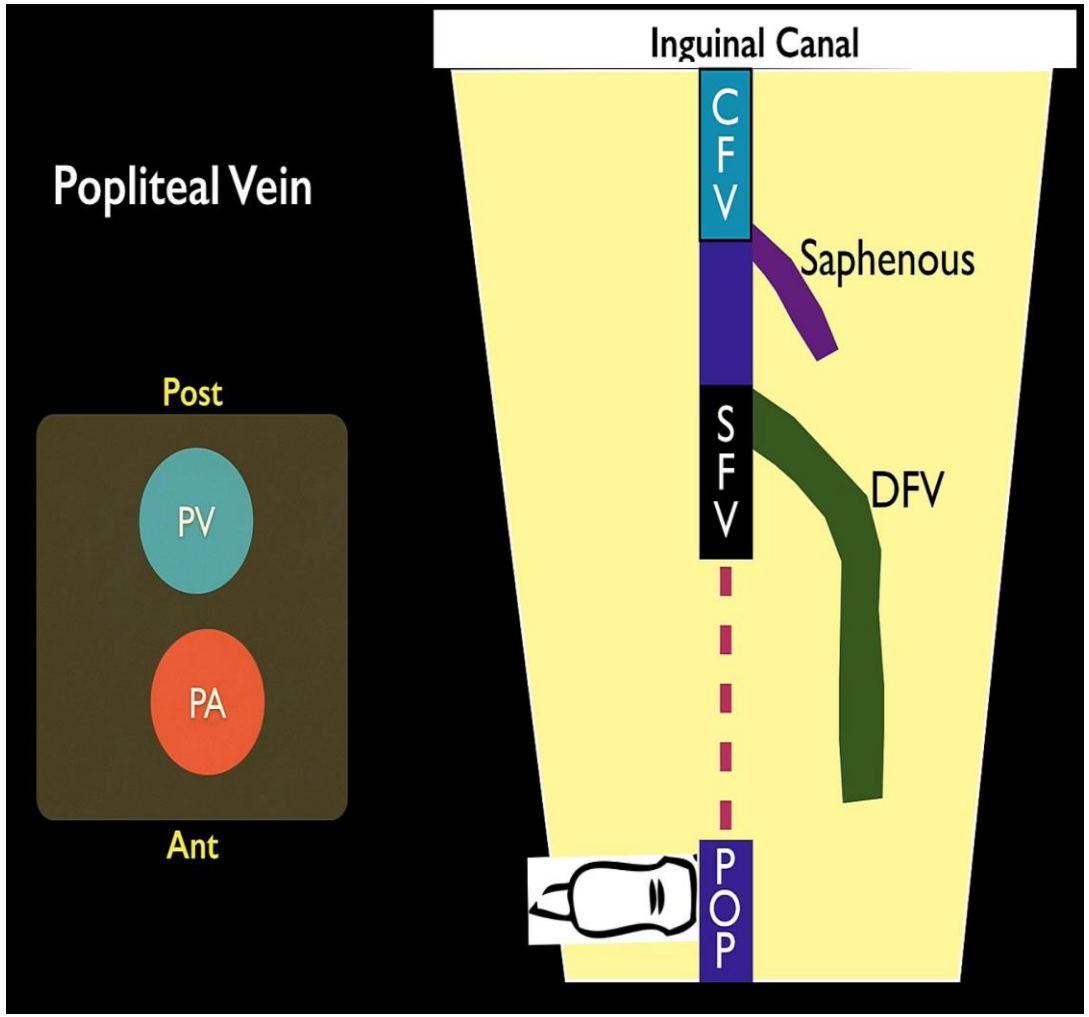
FV / FV DVT

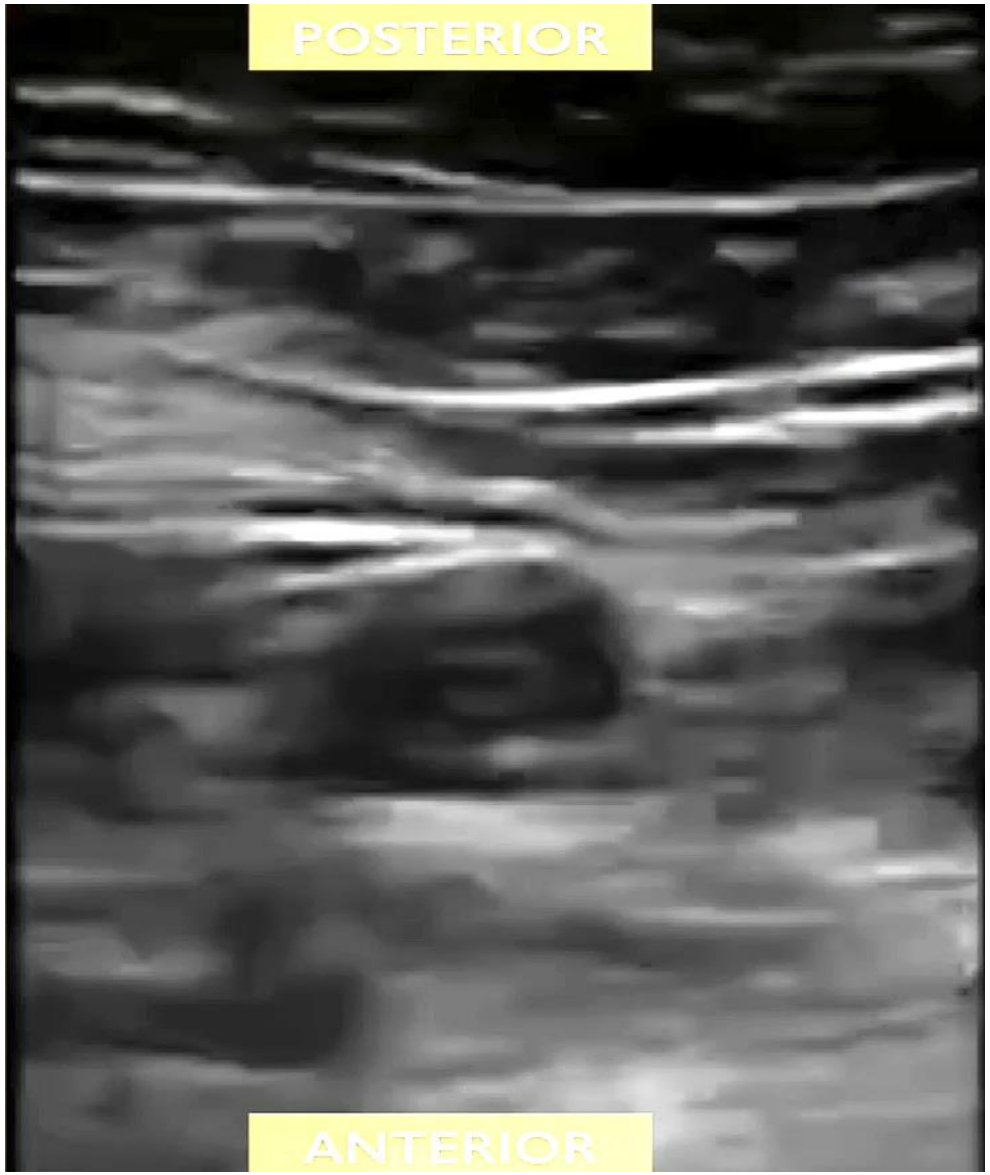




SFV Thrombus


ANTERIOR


Inguinal Canal
Popliteal Vein
CFV
Saphenous
SFV
DFV
POP
Post
PV
PA
Ant


POSTERIOR
ANTERIOR

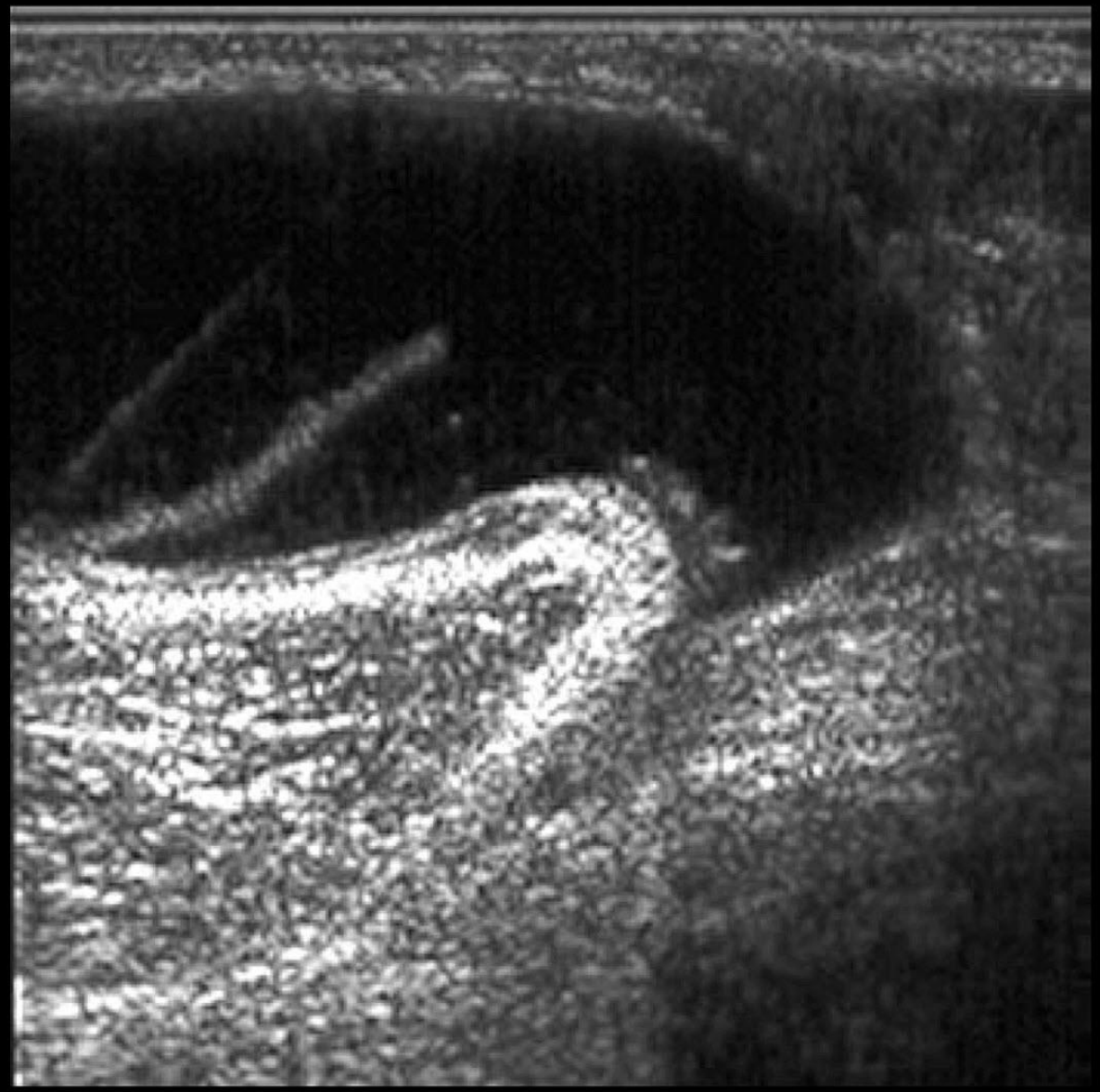
Serial 2-Point Ultrasonography Plus D-Dimer vs Whole-Leg Color-Coded Doppler Ultrasonography for Diagnosing Suspected Symptomatic Deep Vein Thrombosis

A Randomized Controlled Trial

2098 Patients Randomized

Conclusion The 2 diagnostic strategies are equivalent when used for the management of symptomatic outpatients with suspected DVT of the lower extremities.

Baker's Cyst-**FALSE** Positive



SUMMARY

3-Point Ultrasound

Use COMPRESSION

Follow up Formal ultrasound

Thank you for Listening