



Global DXI Ankle-Brachial Index Report

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Name: TEST, PATIENT Date: 00/00/0000 00:00 Sonographer: Test, Sonographer
DOB: 04/14/1930 Location: 1000TST Ordering Physician:
Age: 79 Test MD, Doctor 888-888-8888

Procedure - 93922

Indication - Peripheral Vascular Disease, unspecified, Limb pain, Hypertension Benign
443.9 729.5 401.1

RIGHT Maximal Systolic BP: LEFT
Brachial BP: 108 / 108.0 Brachial BP: 100 /

RIGHT		<u>Resting Pressure</u>		LEFT	
Index	BP	PT (Posterior Tibial)	BP	Index	
0.32	35	DP (Dorsalis Pedis)	45	0.42	
			60	0.56	

Exercise

The patient exercised, completing a total of _ toe exercises.

Index	PT	<u>Post-Exercise</u>	PT	Index
		1 min		

ABI Criteria

0.91 or above	Normal
0.81 - 0.90	Mild Disease
0.51 -0.80	Moderate Disease
0.41 -0.50	Moderate to Severe Disease
0.40 or below	Severe Disease

CONCLUSIONS:

Abnormal ankle-brachial index noted bilaterally at rest.
Severe disease noted bilaterally.
Unable to measure pressure in right posterior tibial artery due to decreased flow.
Monophasic waveforms noted bilaterally in the distal posterior tibial and dorsalis pedis arteries.
The ABI was positive, lower extremity duplex ultrasound is recommended.
Atherosclerotic risk factor modification is important. Consider antiplatelet agents (e.g. Plavix).
Consider Pletal 100mg po BID if left ventricular systolic function is normal.
Consider intervention for symptomatic peripheral vascular disease if clinically appropriate.
This ABI reveals a very high cardiovascular morbidity and mortality (over 75% in the next year). Consider a nonextensive risk profile including duplex ultrasound of lower extremities, abdominal iliac, cardiac and carotid ultrasound and possibly stress testing in preparation for intervention if clinically appropriate.

Reading Cardiologist MD
(Electronically signed)