

Patient Name	: Mr.ASHISH	Visit No	: CHA250035236
Age/Gender	: 13 Y/M	Registration ON	: 27/Feb/2025 10:07AM
Lab No	: 10132532	Sample Collected ON	: 27/Feb/2025 10:07AM
Referred By	: Dr.KGMU	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 27/Feb/2025 11:36AM

CAROTID DOPPLER STUDY

- Visualized parts of bilateral common carotid, internal carotid and external carotid arteries show normal calibre, clear lumen with maintained color flow and normal spectral waveform without significantly increased intimo-medial thickness or atherosclerotic plaques.
- Peak systolic velocity of right common carotid artery 89 cm/sec, right internal carotid artery 56 cm/sec, right external carotid artery 86 cm/sec, left common carotid artery 93 cm/sec, left external carotid artery 85 cm/sec, left internal carotid artery 53 cm/sec.
- Visualized parts of bilateral vertebral arteries show anechoic lumen with maintained color flow. Peak systolic velocity on right and left side is 52 cm/sec and 43cm/sec respectively.
- Visualized part of right internal jugular vein is collapsed and shows circumferential mural thickening. Only a small segment of right internal jugular vein near its confluence with right subclavian vein shows patent lumen.
- Left internal jugular vein shows clear lumen with maintained color flow and wall to wall compressibility.
- Few subcentimetric to centimetric (upto 11 mm in MSAD) bilateral cervical lymph nodes are seen with some of them showing focal cortical thickening and maintained echogenic hila - ?infective / inflammatory / reactive.

OPINION:

- **COLLAPSED RIGHT INTERNAL JUGULAR VEIN WITH MILD MURAL THICKENING.**
- **NO OBVIOUS SIGNIFICANT ABNORMALITY IN VISUALIZED PARTS OF CAROTID AND VERTEBRAL ARTERIES.**

Suggested: CE-MRI Brain with MR Venography

Clinical correlation is necessary.

Transcribed By: Purvi

[DR. JAYENDRA K. ARYA, MD]

*** End Of Report ***

