HUNTLEIGH



NOTE 4 Screening For The Absence Of An Acute DVT Using PPG

HOW TO USE THIS APPLICATION NOTE

- PATIENT SYMPTOMS Verify that your patient's symptoms correspond to one or more of those listed in Figure 1.
- DOPPLEX® EQUIPMENT REQUIRED Select the most appropriate Dopplex® Pocket unit to perform the examination.
 For suggestion of suitable Dopplex® equipment, refer to Figure 2.
- PROCEDURE Connect your Rhow Dopplex® II to the Printa II
 Package or Reporter Software Package (and a computer), and begin your examination, refer to Figure 3.
- SENSOR POSITION Figure 4 suggests position for sensor and correct position of patient.
- EXAMINATION RESULTS Taking careful note of your Rheo Dopplex® II display and PPG waveforms, refer to Figure 5 overleaf and compare your examination results with those shown.
- NOTES Refer to Figure 6 overleaf for general notes relating to this form of examination for venous incompetence.
- It is ESSENTIAL that the PPG curve is used to confirm the Refill Time.

FIGURE 1 PATIENT SYMPTOMS

- SEVERE PAIN
- SWELLING OF LEG
- CELLULITIS
- REDDENING OF SKIN

FIGURE 2 EQUIPMENT REQUIRED

- Rheo Dopplex®
- Dopplex® Printa II or Dopplex® Reporter Software Package







FIGURE 3 PROCEDURE

- Remove footware and stockings.
- Place foot on insulated mat.
- Adjust height to minimise weight on feet.
- Obese patients should be reclined to reduce venous compression.
- Fit sensor 10cm above the medial malleolus (use length of blue cable).
- Ensure patient is stable, i.e., pulse rate normal
- Undertake exercise routine

FIGURE 4 TESTING POSITION

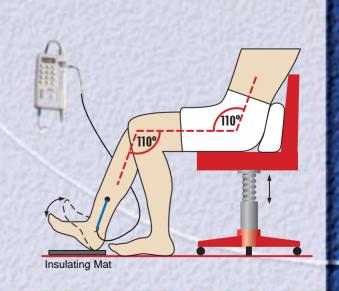
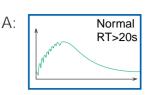


FIGURE 5 EXAMINATION

NORMAL

If the Refill Time (RT) is greater than 20 seconds, then the presence of a DVT is highly unlikely. (See Figure 6 below)



ABNORMAL

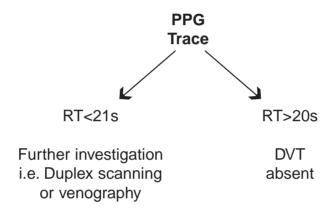
If the refill time is less than 21 seconds, then DVT or venous insufficiency

The patient should then be referred for further investigation, i.e., Duplex scanning or venography.

B: Abnormal RT<21s

Deep venous obstruction or insufficiency

DECISION MAKING FLOWCHART FOR DVT SCREENING



Do not compress limb if DVT is suspected

Flowchart is for quidance only

FIGURE 6 NOTES

The above procedure is only valid for clinically suspected acute lower limb DVT's. The PPG technique is not sensitive enough to detect a floating, non-occluding thrombosis. A distal (below knee) thrombosis may not be detected.

References: Tan Y, Da Silva AF, Digital photoplethysmography in the diagnosis of suspected lower limb DVT. Euro Journ of Vasc and Endovasc Surg. 1999 18:1, p71-79 Our thanks go to Dr. Mo Aslam, Dept of Surgery. Hammersmith Hospital, London, UK



EDUCATIONAL MATERIAL AVAILABLE FROM HUNTLEIGH HEALTHCARE

- Library of Sounds Audio CassetteAssessment & Treatment of Leg
- Ulcers Video
- Vascular Investigations Video
- Assessment of the Diabetic Foot
- · ABPI & TBPI guides.

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Registered No: 942245 England ©Huntleigh Healthcare Limited 2002 APPLICATION NOTES AVAILABLE FROM HUNTLEIGH HEALTHCARE

NOTE 1 • Arterial Investigation Of The Lower Limb

NOTE 2 • Venous Investigation Of The Lower Limb Using Doppler

NOTE 3 • Venous Investigation Of The Lower Limb Using PPG

NOTE 4 • Screening For The Absence Of

An Acute DVT Using PPG

NOTE 5 • Using A Hand Held Doppler To
Assist With PICC Placement