

HILL-BENNETT , Sheila
5 Britannia Street GRABBen GULLEN 2583
Phone: 0400217494

Birthdate: 17/10/1942 **Sex:** F **Medicare Number:** 2174 91826 1-
Your Reference: 2024GOU0000016 **Lab Reference:** 2024GOU0000016-1
Laboratory: Goulburn X-Ray
Addressee: Dr Rebecca SCOTT **Referred by:** Dr Rebecca SCOTT
Name of test: US Arteries Right Leg
Requested 02/01/2024 **Collected:** 02/01/2024 **Reported:** 03/01/2024
08:54:00



canberra imaging
GROUP

Patient Name: HILL-BENNETT, Sheila
DOB: 17/10/1942
Gender: F

Address: 5 Britannia Street
GRABBen GULLEN NSW
2583
Phone:
Medicare Number:

[Click here to view images](#)

Patient Name: Sheila HILL-BENNETT, DOB: 17/10/1942, Date: 02/01/2024 10:38

Requesting Dr: 2323546Y Dr Rebecca SCOTT
CopiesTo: ,

US RIGHT LEG ARTERIES

Referral notes

Claudication right buttock and calf, difficult to feel pedal pulses.

Report

There are biphasic wave forms present within the common femoral artery. There is no inflow stenosis. There is a diffuse area of atherosclerotic disease extending from the distal superficial femoral artery into the proximal popliteal artery. Within the distal superficial femoral artery there is a severe stenosis 22cm below the groin crease. The peak systolic velocity increases from 31cm/second to 130cm/second. At the level of the adductor canal, the peak systolic velocity increases from 31cm/second to 179cm/second and within the proximal popliteal artery the peak systolic velocity increases from 60cm/second to 163cm/second. Three vessel run off is maintained within the calf. Dampened monophasic wave forms are present within all the calf vessels.

Comment

Multifocal moderate to severe stenoses within the distal superficial femoral and proximal popliteal arteries.

Thank you for referring this patient.

Dr Rohit TAMHANE MBBS FRANZCR
Canberra Imaging - Goulburn

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Form sent on 04/01/2024 15:01 AEDT

Vascular Surgery

Canberra Health
Services

Patient: Sheila Hill-Bennett, 81yrs, F, DOB 17/10/1942, PH: 0400 217 494

Residential address: 5 Britannia St, Grabben Gullen, NSW 2583

Postal address: same as residential address

Referred by: Rebecca Scott, The Health Care Centre., Prov. No. 2323546Y, Reg. No. MED0001186437, HPI-O 8003629166675062, HPI-I 8003611672374943, PH 0248432500, FAX 0248432525

Referral date: 04/01/2024 15:01 AEDT

Clinical Referral Information

Referred To: Dr Alister Jones (154465)
 Referral Date: 04/01/2024
 Referral Type: New
 Referral Period: 12 months
 Interpreter Required: No
 Special Needs / Reasonable Adjustments for Disability: No
 Does the patient have a carer / support person? No
 Is the patient appropriately equipped and enabled for Telehealth (video) consultation? No

Reason for Patient Referral:

Claudication right calf, thigh and buttock. Ultrasound of arteries shows multifocal moderate to severe stenoses within superficial femoral and proximal popliteal arteries. Your assessment and help in management would be appreciated.

Who should be contacted about this referral? e.g. patient, carer, parent, guardian, EPOA, etc.:

patient

Measurement Details

Date	Code	Value
10/10/2023	Height	156
10/10/2023	Weight	81.4

Date	Code	Value
10/10/2023	BMI	33.4
30/11/2023	BP	130/80

REFERRER DECLARATION (please tick)

By completing this referral you note that you may be contacted to provide further information and confirm that to the best of your knowledge:

- The patient information including address and phone numbers are correct.
- You have attached all necessary forms, results and reports.
- The patient is aware of this referral and has expressed an intention to attend any appointments.

Medications & Management

The medication details are as provided by the sending health provider. For accurate assessments of patient medications, please refer to the sender for any clarifications you may require.

Long Term Medications

Date	Details	Dose	Units	Instructions
08/08/2023	Diprosone 0.05% Ointment			Apply Application In the evening
08/08/2023	Candesartan 4mg Tablet			1 Tablet In the evening
08/08/2023	Noxicid 20mg Capsules			1 Capsule Daily

Medical History

Long Term Classifications (Co-Morbidities)

Code	Description	Comments
840539006	COVID-19 infection	
73761001	Colonoscopy	Diverticulosis
76009000	Gastroscopy	
444566006	Pacemaker replacement	
80142000	Perforation of nasal septum	
126660000	Deviated nasal septum	
	GORD	
73761001	Colonoscopy	
76009000	Gastroscopy	
73761001	Colonoscopy	normal
76009000	Gastroscopy	normal
441509002	Pacemaker	
441509002	Pacemaker	

Smoking History and Additional Information

Ex smoker

Patient Information

Pension number: 200 948 481C
Medicare/DVA Eligible: Yes
Medicare number: 2174918261 2
Medicare expiry: 31/12/2024
IHI: 8003601132892055
Private health fund name: No Fund
Patient's indigenous status: Neither Aboriginal nor Torres Strait Islander origin
Email: hilbennett42@gmail.com

Referrer Information

Referral number: ACTE-62713
Practice Address: 17 Kialla Road, Crookwell NSW, NSW 2583
Referrer EDI: hcottage

Diagnostic Reports / Patient Documents

Date	Name	Comments	Size
03/01/2024	US Arteries Right Leg	Notation: Abnormal, Action to be taken: Doctor to advise, Comment:	17 KB
02/12/2023	ED-DIABETES DIAG&MONITOR	Notation: Normal, Action to be taken: No action, Comment:	1 KB
01/12/2023	SE-GENERAL CHEMISTRY	Notation: Abnormal, Action to be taken: Doctor to advise, Comment:	4 KB