

Lower Extremity Physiologic Study, Single Level

(Ankle Brachial Index Assessment Form for VISTA AVS)

Patient Name _____

ID Number _____

Date _____

Risk Factors

- Tobacco Use
- Diabetes
- Heart Disease
- Current Age _____
- Other _____
- Hypertension
- Hyperlipidemia
- Stroke/TIA
- Previous Vasc Surgery

Current Symptoms

- Intermittent Claudication
- Numbness, tingling in feet
- Ulcerations
- Rest Pain
- Gangrene
- Other _____

ABI / Severity of Disease

- 0.90-1.30 - Normal
- 0.70-0.89 - Mild
- 0.40-0.69 - Moderate
- 0.00-0.39 - Severe

ABI Results

PEEL AND STRIP
ABI RESULTS



Comments

PEEL AND STRIP WAVEFORM

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Arterial Index Assessment Form for VISTA AVS FastView™

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