QueenslandXRay

Patient Name	WRIGHT-GITTINS, SHANNON ARINA	Accession	22201192Q1
Patient D.O.B.	25/10/1978	Description	US LOWER LEG - BOTH SIDES
Patient ID	QXR1126309	Study Date/Time	29/10/2024 12:22
Referring Physician	AIREY, CAROLINE ALEXANDRA	Modality	US

QXRACW
EXAMINATION:

US BILATERAL LOWER LEG

HISTORY:

To Confirm - bilateral calve pain on examination need muscle injury. Hx
progressive for 2/52. Not consistent with DVT type picture

FINDINGS :

Left lower leg: At the medial gastrocnemius musculotendinous junction there is a
curvilinear hypoechoic region measuring approximately 30 x 2 x 6 mm, with
tenderness to overlying probe pressure, most likely reflecting a small
partial-thickness tear.

The lateral gastrocnemius, soleus and plantaris muscles are intact. The left
calf veins compress normally and demonstrate normal flow, with no evidence of
superficial or deep vein thrombosis. Normal appearances of the popliteal fossa
structures.

Right lower leg: Within the medial gastrocnemius and soleus muscle bellies there
is slightly increased echogenicity compared to the left, with no convincing
defect detected this may reflect a very low-grade muscle strain.

The lateral gastrocnemius and plantaris are intact. The right calf veins
compress normally and demonstrate normal flow with no evidence of superficial or
deep vein thrombosis. Note appearance of the popliteal fossa structures.

CONCLUSION:

Findings most in keeping with a small partial-thickness tear at the left medial
gastrocnemius musculotendinous junction.

Slightly increased echogenicity within the right medial gastrocnemius and soleus
muscle bellies with no discrete defect, potentially reflecting very low-grade
muscle strain.
No evidence of lower leg superficial or deep vein thrombosis.

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Dr Frans van Tonder
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