

Scheduling from a Vascular Referral

Carotid Stenosis

- **Asymptomatic Carotid Stenosis** – Schedule patient within **2 weeks** with
 - 50-70% stenosis – no repeat study
 - 70% ^ stenosis – *repeat study
- **Symptomatic Carotid Stenosis** – Triaged by RNs/ on-call Surgeon.
 - OV only – schedule 48 hours to 1 week
 - U/S and/or CT, MRI/MRA and **ALL images pushed to PACs** needed in referral for dx of stenosis and hard copy of radiology report
 - TIA - slurred speech, Amaurosis Fugax
 - 80-99% occlusion – urgent if symptomatic

***Over 70% occlusion studies done at MMC or Maine Cardiology are acceptable. All other facilities will need a repeat study.**

PAD/PVD: claudication, rest pain, or foot ulcers or infection (Offer to have U/S done the day before OV)

- schedule OV within **3-4 weeks for claudication**
- schedule OV within **2 week with chronic rest pain, foot/leg ulcers or infections (duration > 4weeks); 1 week for subacute rest pain, ulcers or infections:**
 - ABI with segmental pressures if no ABI has been performed within 6 months.
 - If patient has recent ABI from another lab, order segmental pressures if ABI <0.9 and weren't done.
 - If patient has tissue loss as indication, order toe pressure in addition to ABI.

Deep Vein Thrombosis: schedule within 1 week IF patient has iliofemoral DVT, axillo-subclavian DVT and/or DVT <14 days duration. – *No automatic U/S if they have been diagnosed; they already had a study*

- Office visit only, ultrasound scheduled for day of visit if patient lives far away.
- **(Offer to have U/S done the day before OV if patient lives close).**
- **3-4 week appointment for chronic DVT**

Venous insufficiency / varicose veins/edema:

- 4-6 weeks with valve incomp study prior to OV
- Offer to have U/S done the day before OV if patient lives close

Mesenteric arterial occlusive disease

- **Asymptomatic Mesenteric Disease** – Schedule OV only within **2-4 weeks.**
- **Symptomatic Mesenteric Disease (post-prandial pain, weight loss, abdominal pain, food fear)** – Triaged by RNs/ on-call Surgeon.

Renal Artery Stenosis

- U/S, CTA, MRA reports and **images pushed to PACs** required for appointment.

- **Asymptomatic Renal Artery Stenosis** – Schedule OV only within 2 weeks.
- **Symptomatic Renal Artery Stenosis** – Triaged by RNs/ on-call Surgeon.

AV Fistula Placement

- Schedule 2-4 weeks
- Schedule vein mapping first, then OV.

Subclavian Artery Stenosis:

- Schedule 2-4 weeks OV only; U/S or CT reports and **images pushed to PACs** required for appointment.

Cellulitis

- OV only, office note needed
- ? Concern for vascular disease or need for wound doctor.

Splenic Artery Aneurysm

- Schedule within 2-4 weeks
- U/S, CTA, MRI reports and **images pushed to PACs** required for appointment

Vertebral Artery Stenosis

- U/S reports and **images pushed to PACs** required for appointment.

Phlebitis

- Schedule 2-3 weeks