

Gross Anatomy and Physiology (10%)

- A. Cerebral Arterial System
 - Anterior circulation (carotid)
 - 2. Posterior circulation (vertebro-basilar)
 - 3. Intracranial circulation (circle of Willis)
 - 4. Peri-orbital circulation
- B. Central and Peripheral Arterial System (including anatomical variations)
 - 1. Thoracic arteries
 - 2. Upper extremities
 - 3. Abdominal arteries
 - 4. Lower extremity arteries
- C. Venous System (including anatomical variations)
 - 1. Central veins
 - 2. Portal, mesenteric and renal veins
 - 3. Lower extremity veins (origins, termination, venous valves, number of valves)
 - a. Deep veins
 - b. Superficial veins
 - c. Perforators
 - d. Venous Sinuses
 - 4. Upper extremity veins (including anatomic variants)
 - a. Deep veins
 - b. Superficial veins
- D. Microscopic Anatomy, Microcirculation

2. Test Validation (3%)

- A. Statistics
- B. Measurement of Stenosis

3. Peripheral Arterial Disease (28%)

- A. Epidemiology of Arterial Disease
- B. Patient History and Physical Examination
- C. Risk Factors and Contributing Diseases
- D. Lower Limb Arterial Disease
 - 1. Claudication
 - 2. Critical limb ischaemia
 - 3. Chronic arterial occlusive disease
 - 4. Healing of ulcers and amputations
 - 5. Acute arterial occlusion thrombosis, emboli, trash foot
 - 6. Aneurysms
 - 7. Popliteal entrapment



- 8. Iliac endofibrosis
- 9. Graph surveillance
- 10. Aetiology
- E. Upper Limb Arterial Disease
 - Acute and chronic upper limb arterial disease
 - 2. Subclavian steal
 - 3. Thoracic outlet syndrome and other neurovascular compression syndromes
 - 4. Arterial occlusive diseases of the upper extremity
 - 5. Trauma, dissection, vasospasm, vibration, thermal injury
 - 6. Hand-arm vibration syndrome
 - 7. Upper extremity aneurysms
 - 8. Hypothenar Hammer aneurysm
 - 9. Aetiology
- F. Abdominal Arterial Disease
 - 1. Abdominal aortic and iliac artery aneurysms
 - 2. Duplex evaluation for EVAR
 - 3. Renovascular
 - 4. Mesentericischaemia
 - 5. Aetiology
- G. Global Arterial Diseases (duplex examination, epidemiology, risk factors, patient history, physical examination, treatment)
 - 1. Non-atherosclerotic lesions to include emboli and trauma
 - 2. Fibromuscular dysplasia
 - 3. Young patients with claudication
 - 4. Arteritis
 - 5. Vasopastic disorders
 - 6. Raynaud's syndrome and other vascular syndromes related to environmental temperature
 - 7. Cold sensitivity testing
 - 8. Digital Ischaemia and vasopastic disease
 - 9. Dissection-intimal, medial, spontaneous, traumatic
 - 10. Acrocyanosis
 - 11. Entrapment syndromes
 - 12. Arterial syndromes, e.g. Buegers, Takayasu's
 - 13. Arteriovenous fistulae
- H. Duplex Imaging
 - 1. Lower extremity
 - 2. B-mode, Pulse wave Doppler, Colour Doppler, Power Doppler
 - 3. Quantitative interpretation (i.e. Pulsatility Index, Resistive Index, Acceleration time/Systolic rise time)



- I. Pressures
 - 1. Lower extremity
 - 2. Upper extremity
 - 3. Penile pressures
- Other Non-invasive Tests (patient positioning, technique, interpretation, capabilities, limitations)
 - 1. Doppler velocimetry
 - 2. Plethysmography (venous occlusion technique, volume pulse measurements techniques, interpretation, capabilities, limitations)
- K. Other Methods of Investigation (methods, interpretation, limitations)
- L. Intervention
 - 1. Medical therapy
 - 2. Surgical therapy
 - 3. Non-surgical intervention

4. Cerebral Arterial Disease (28%)

- A. Epidemiology of Cerebro-Vascular Disease
- B. Patient History and Physical Examination
- C. Risk Factors and Contributing Diseases
- D. Extracranial Cerebro-Vascular Diseases
 - 1. Stenosis
 - 2. Embolism
 - 3. Thrombosis
 - 4. Subclavian steal
 - 5. Dissection/fibromuscular dysplasia
 - 6. Aetiology
- E. Duplex Imaging
 - Patient positioning, technique, interpretation, capabilities and limitations
 - 2. B-mode, Pulse wave Doppler, Colour Doppler, Power Doppler
- F. Intracranial Cerebro-Vascular Disease
 - 1. Vasospasm
 - 2. Sources of emboli
 - 3. Sickle cell anaemia and STOP criteria
 - 4. Aetiology
- G. Transcranial Doppler (patient positioning, technique, interpretation, capabilities, limitations, indications)
 - 1. Imaging
 - 2. Non-imaging (to include intra-operative monitoring)
- H. Other Non-invasive Vascular Tests (technique and interpretation)



- I. Intervention
 - 1. Medical therapy
 - 2. Surgical therapy
- J. Other methods of investigation (methods, interpretation, limitations)

5. Venous Disease (28%)

- A. Epidemiology of Venous Disease
- B. Aetiology of Venous Disease (Upper and Lower Limb)
 - 1. Valvular incompetence (superficial and deep)
 - 2. Thrombosis (superficial and deep)
 - 3. Differential diagnoses
- C. Patient History / Signs and Symptoms of Physical Examination (Upper and Lower Body)
 - 1. Acute deep vein thrombosis
 - 2. Pulmonary embolism
 - 3. Chronic venous insufficiency
- D. Risk Factors and Contributing Diseases
 - 1. Venous insufficiency
 - 2. Venous Thrombosis
 - 3. Venous insufficiency and venous thrombosis
- E. Duplex Imaging (Upper and Lower Limb and Pelvic veins)
 - 1. Patient positioning, technique, interpretation, capabilities and limitations
 - 2. B-mode, Pulse wave Doppler, Colour Doppler, Power Doppler
 - 3. Differential for DVT
- F. Pre-Operative Marking
 - 1. For vein to use in arterial bypass
 - 2. Prior to varicose vein surgery
- G. Other Non-invasive Tests (technique and Interpretation)
 - 1. Handheld Doppler examination
 - 2. Plethysmography
- H. Other Methods of Investigation (methods, interpretations, limitations)
 - 1. Venography
 - 2. MRV
 - 3. D-dimer tests
 - 4. Wells Diagnostic algorithm
 - 5. Homan's sign
 - 6. CT scanning
 - 7. Pulmonary embolism diagnosis



- I. Intervention
 - 1. Medical therapy
 - 2. Surgical therapy
 - 3. Non-surgical intervention

6. Other Conditions (2%)

- A. Arteriovenous Fistula
- B. Trauma
- C. Compartment Syndromes
- D. Carotid Body Tumours
- E. Carotid Aneurysms
- F. Congenital Vascular Abnormalities
- G. Klippel-Trenaunay syndrome
- H. Sickle Cell Anaemia
- I. Blood Clotting Disorders
- J. False Aneurysms
- K. Cystic Adventitial Disease
- L. May Turner Syndrome
- M. Coeliac Artery Compression Syndrome
- 7. Nice Guidelines to Include DVT, Arterial Disease and Carotids (1%)