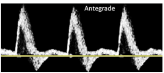
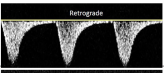
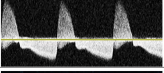
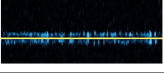
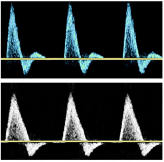
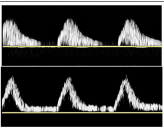
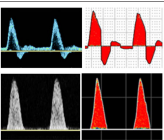
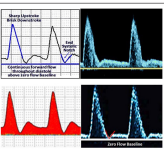


Table 2. Arterial Waveform Nomenclature Major Descriptors.

Major descriptor	Major descriptor terms definitions	Waveform figure
Flow direction	Antegrade <i>Previous Alternate Term: Forward Flow</i> Blood flows in the normal direction for the artery being evaluated	
	Retrograde <i>Previous Alternate Term: Reverse Flow</i> Blood flows opposite to the normal direction for the artery being evaluated	
	Bidirectional <i>Previous Alternate Term: To-Fro</i> Blood flow enters and leaves a contained space via the same orifice.	
	Absent No blood flow is detected with an absent spectral Doppler signal.	
Phasicity	Multiphasic <i>Previous Alternate Terms: Triphasic; Biphasic</i> Waveform crosses the zero-flow baseline throughout any part of the cardiac cycle; blood flows in both forward and reverse velocity components	
	Monophasic Waveform does not cross the zero-flow baseline throughout any part of the cardiac cycle; blood flows in a single direction <i>Note: If waveform does not cross the zero-flow baseline it is considered monophasic</i>	
Resistance	High resistive Key features: sharp upstroke and brisk downstroke, with or without diastolic flow reversal.	
	Intermediate resistive Key features: sharp upstroke, brisk downstroke, visible presence of an end systolic notch and continuous forward flow throughout diastole that is above the zero-flow baseline. In contrast to low resistance, the intermediate resistive waveform contains a rapid deceleration at end systole followed by a diastolic acceleration with continuous forward flow. The waveform pattern suggests vasodilation and can be the result of exertion (exercise), increased temperature, vasodilator drugs, or a severe arterial obstruction distal to the point of Doppler insonation. ³⁹	
	Low resistive Key features: a prolonged downstroke in late systole and continuous forward flow throughout diastole <i>Note: Key feature: prolonged diastolic downslope with the presence of pandiastolic flow. In contrast to intermediate resistance, the low-resistive waveform contains a continuous and prolonged diastolic forward flow without the presence of an end systolic notch</i>	