Ultrasound Management of Abdominal Aortic Aneurysm (AAA).

• An abdominal aortic aneurysm may be found as an incidental finding on abdominal ultrasound. This algorithm is intended to guide the management of those patients who have an incidental finding of a previously undetected AAA.

Abdominal Aortic Aneurysm (AAA).

The AP diameter of the abdominal aorta must be measured in AP diameter from inner wall to inner wall.

A measurement of over 3cm is regarded as aneurysmal.

AAA: 3.0 – 5cm (men)

3.0 - 4.5cm (women)

Recommend routine vascular referral according to local policy. Surveillance to be planned accordingly

AAA: >4.5cm (women)
>5cm (men)

Contact vascular surgeon on-call to discuss while patient is in department. Where not possible, ensure results are communicated urgently to the referrer for urgent vascular referral according to local policy.

- The upper extend of the AAA must be visualised. If this extends above the diaphragm or is not visualised, additional imaging should be recommended to assess for thoracic aortic aneurysm.
- Seek clinical assistance if the aneurysm is tender, regardless of size.
- The presence of a previously undiagnosed intimal flap/dissection should be regarded as a surgical emergency and immediate help sought.

References

Public Health England. NHS Abdominal Aortic Aneurysm (AAA) Screening Programme. Essentail elements in providing an AAA screening programme within the HHS Screening Programme in England. 2017. Available at https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/598365/AAA_Screening_Stand-ard_Operating_Procedures_March_2017.pdf

SCoR and BMUS. Guidelines for Professional Ultrasound Practice. 2019. Available at https://www.bmus.org/static/uploads/resources/Guidelines for Professional Ultrasound Practice v3 OHoz76r.pdf

Agreed by the Diagnostic Regional Ultrasound Group

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