52 y/o male undergoing Venography for PICC placement

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Digital Subtraction Venography

Neck

Left Upper Extremity

R L
Digital Subtraction Venography

Neck

Left Upper Extremity
Digital Subtraction Venography

Neck

Left Upper Extremity

R

L
Digital Subtraction Venography

Neck

L

R

Left Upper Extremity
Digital Subtraction Venography

Neck

Left Upper Extremity
Digital Subtraction Venography

Neck

Left Upper Extremity
Digital Subtraction Venography
Left Superior Vena Cava
Digital Subtraction Venography

- Neck
- Left Upper Extremity
- Axillary Vein
Digital Subtraction Venography

- Neck
- Left Subclavian Vein
- Right (R) Left SVC
- Left Upper Extremity
- Axillary Vein
Digital Subtraction Venography

Neck

Left Subclavian Vein

R
Left SVC

Left Upper Extremity

Axillary Vein

UConn Health Radiology
Digital Subtraction Venography

- Neck
- Left Subclavian Vein
- Left SVC
- Axillary Vein
- Left Upper Extremity
Digital Subtraction Venography

- Neck
- Left Subclavian Vein
- R Left SVC
- Axillary Vein
- Left Upper Extremity

UCONN HEALTH
RADIOLGY
Left Superior Vena Cava

- Venous variant draining blood from left upper extremity and head
- Due to failure of left anterior cardinal vein regression
- 80-90% drain via coronary sinus into right atrium
  - Coronary sinus is usually dilated
- 10-20% drain into left atrium, therefore PICC line should not be placed into left SVC due to risk of stroke.
- 80-90% exist with right sided superior vena cava
- Usually asymptomatic
- Found incidentally on imaging or during venous line placement