Diagnostic Testing for Suspected PAD

History and physical examination suggestive of PAD without rest pain, nonhealing wound, or gangrene (Table 4)

ABI with or without segmental limb pressures and waveforms (Class I)

Noncompressible arteries
ABI: >1.40

TBI (Class I)

Normal ABI: 1.00–1.40
Borderline ABI: 0.91–0.99

Exertional non–joint related leg symptoms

Exercise ABI (Class I)

Abnormal ABI: ≤0.90

Exercise ABI (Class IIa)

Search for alternative diagnosis (Table 5)

Lifestyle-limiting claudication despite GDMT, revascularization considered

Continue GDMT (Class I)

Anatomic assessment:
• Duplex ultrasound
• CTA or MRA (Class I)

Anatomic assessment:
• Invasive angiography (Class IIa)

Colors correspond to Class of Recommendation in Table 1.

ABI indicates ankle-brachial index; CLI, critical limb ischemia; CTA, computed tomography angiography; GDMT, guideline-directed management and therapy; MRA, magnetic resonance angiography; PAD, peripheral artery disease; and TBI, toe-brachial index.