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SCLEROTHERAPY: TREATMENT of VARICOSE VEINS, SPIDER VEINS and SAPHENOUS VEINS BY INJECTION

We believe that sclerotherapy is the preferred treatment for almost all veins. No matter how they are treated, there is always the possibility of recurrence. When this happens, it is usually minor and can be handled in a few visits to the office. We would appreciate your coming back for touch ups and evaluations in 1-3 year intervals.

Like all medical therapy, there is the possibility of complications. The good news is that the complications are almost always mild or treatable in the office setting. We see small vessels form at the site of the previously larger vessel. These can usually be eliminated with further injections. If matting occurs (the formation of tiny red cluster veins), laser treatments may help or we may need to ultrasound the area to check for venous reflux.

There is some brownish discoloration that can occur at the site of injections, called staining or hyperpigmentation. This usually fades within several months to a year. Occasionally, a little discoloration may remain. Bleaching crème preparations with sunscreen may speed the fading process. We ask you to stop oral iron during your therapy.

Allergic reaction is a possibility, although quite rare. It usually manifests itself by hives. Although respiratory problems have been reported, we have not seen this.

Bruising is quite common for a period of days or weeks. This time frame is shortened with the compression pads and compression support hose prescribed for each individual.

At the site of injections, it is common to feel a firm area, lump or bump beneath the skin. It may be non-tender or tender, usually forming a week to 2 weeks after an injection session-or it may never occur. This is usually treated with an aspiration and anti-inflammatory medicines, after it is evaluated.

The sclerotherapy solution may infiltrate the surrounding tissue and a small slough may occur. This will result in a scab and potentially a scar. This is very unusual, almost never happens, but we want to appraise you of the possibility.

Some patients, especially diabetics, have a risk of infection. If infection does occur, you can be treated with antibiotics. If you are a diabetic or have problems with arterial disease, please let us know before starting therapies.

While we know of no problems associated with injections during pregnancy, we prefer to wait. If you are lactating, we can advise about preparing for your sessions by using a breast pump method.

One of the benefits of injection of large varicosities is that it markedly decreases the chances of superficial and deep phlebitis (a blood clot in the vein). However, there is still a small

possibility of this occurring. If you have any questions about phlebitis, please ask the Doctor or the R.N.

Medical support hose that we prescribe must be worn for 3 weeks after each injection session, for successful outcomes. These may be purchased, with a prescription, at any registered compression hose fitter (we will provide some DME suppliers given to us by nylon companies) or in our office. You must have them for the first session and each one thereafter.

Do not hesitate to speak to the doctor of nurse about any concerns. We thoroughly believe that these treatments will make your legs look and feel better. There is the occasional patient who is not satisfied with the injections or feels they cannot comply with the treatment plan. We will be glad to discuss your problems.

I understand that sotradechol and polidocanol are used interchangeably for injections of the legs, face, hands chest, and ankles. We vary the strengths and solutions for patient effectiveness and for an alternative in case of an allergic reaction of any nature. Polidocanol is not FDA approved, although it is the preferred solution with the least side effects.

Smoking cigarettes has been proven to prolong healing

times and increase the chances of tissue destruction after any invasive treatment. We would ask you to consider cessation and be aware of the risks.

If, during a cosmetic screening, an underlying medical problem is detected by examination and/or rheography,

the R.N. will recommend the patient have a scan and see the doctor for further evaluation and before proceeding with cosmetic injections. If there are no symptoms of pain, swelling, cramping or physical findings to suggest a medical problem, the injections may be started without first seeing the Doctors. The R.N. will commence with standard orders prescribed by the Doctor and the patient will see one Doctor at the next visit.

I have read and understood the above statement concerning benefits and risks of injection treatment of veins and hereby request the Doctor and/or the nurse to carry out this consent form for personal use.

I consent to the reproduction of photographs to be used in my chart for insurance, studies, or presentations deemed Appropriate by the Vein Center. I understand no personal ID will be in these pictures except those approved by me.

Signature ₋		 	
Date	 		