

SCLEROTHERAPY TREATMENT CONSENT FORM

What is Consent and what does it mean?

Consent to treatment means that you as the patient must give permission before you receive any type of medical treatment, test or examination. This must be done on the basis of and following an explanation by a clinician. You must have agreed to what actually will happen and must have been given by the person who is to be treated.

What is Sclerotherapy?

Sclerotherapy is method of treating varicose veins by injecting a chemical irritant into the vein. When the vein wall comes in contact with the chemical it sets of an inflammation. This inflammation causes scarring and the scar shuts the vein. The injection may be performed under ultrasound guidance for precision.

The inflammation may cause redness swelling pain warm tenderness, itching or combination of these. These are normal course of the treated vein. The dead vein is subsequently be removed by the human body.

Varicose Veins and Spider Veins are chronic and recurrent conditions. The variety of treatments available will not offer a cure, but rather a control of the condition. Surgically removed veins cannot come back; veins that are sclerosed generally will not return. However, your tendency towards developing new veins will not be relieved by this or any other form of treatment.

Contraindications for Sclerotherapy

Contraindications include but are not limited to the following:

- Allergy to the chemical agent
- Migraine (relative contraindication)
- Hole in the heart

Potential Risks and Side Effects

All surgical procedures carry an inherent risk of infection, allergic reaction, and bleeding

Allergic reaction: While extremely rare, allergic reaction to the agent can occur. The risk of this is greater in patients who have a history of other allergies.

Pain: Patients may experience moderate to severe pain following the procedure. The leg may be tender to the touch after treatment and/or an uncomfortable sensation may run along the vein route. This discomfort is usually temporary.

Swelling: Usually occurs after treating veins in the leg. It usually resolves in a few days but may last a few weeks, especially after treatment of large varicose veins. Wearing the prescribed compression hose lessens leg swelling.

Thrombophlebitis- The sclerotherapy works by producing inflammation of the veins-(called thrombophlebitis) .For some people this reaction can be exaggerated to produce lumpy veins. All the reactions and lumpiness will disappear in due course.

Skin Burns: Utilizing ablative therapy carries a risk of skin burns; this may require further surgical treatment.

Hematoma: Bruising is very common around the injection site and can last several days or weeks. Trapped blood may cause discoloration, which may need additional treatment.

Infection: As with any surgical procedure there is a risk of infection. We use sterile technique with all procedures to reduce this risk.

Neovascularization: The development of new, tiny blood vessels may occur at the site of sclerotherapy treatment. These tiny veins can appear days or weeks after the procedure. They often fade within three to twelve months without further treatment.

Hemorrhage: Bruising is very common after ablative therapy, specifically around the treated area. It can last several days or weeks.

Pulmonary embolism/ Deep Vein Thrombosis: This is an unusual complication; the dangers of phlebitis (vein inflammation) include the possibility of pulmonary embolus (a blood clot carried to the lungs) and post-phlebitic syndrome, resulting in a permanent swelling of the leg.

Transient hyperpigmentation: Some discoloration after treatment is common. This discoloration is usually transient and will resolve in about three months. In some cases this darkening of the skin may persist up to a year or longer.

Nodularity: Nodularity at the site of vein treatment may persist for up to a year or longer. This occurs when there are pieces of the vein that remain in the body and have scarred down and become hard. With time, the body will absorb and soften these areas.

Skin ulceration: Skin ulceration can occur at the site of injection. This is an uncommon complication. In the event of a skin ulcer it may take months for the area to heal.

Reoccurrence of new veins: When a patient has varicose veins, it is usually an ongoing problem. Several years after the vein has been treated the body will attempt to repair itself by taking veins that were insignificant and make them significant.

Spider Veins: Occasionally occur along the path of the treated areas.

Recurrence of veins- There is a small chance of recurrence of varicose veins. It may take few years for the recurrence to establish. EVLT is known to be successful in 97% of the patients.

Potential Benefits of Sclerotherapy

This treatment usually results in improvement in varicose vein-related symptoms. Most patients have additional sessions of sclerotherapy in order to treat all of the patients' venous disease and symptoms. There is no absolute guarantee that you will receive any medical benefit as a result of treatment, but the majority of patients undergoing this procedure do report resolution/lessening of pain complaints, reduced or resolved swelling, improved appearance of the treated leg and greater self-confidence.

Alternative Treatments

Since varicose veins are only life threatening if associated with non-healing ulcers that become severely infected, or cause spontaneous severe hemorrhage; sclerotherapy or phlebectomy are not mandatory. Some patients may get adequate symptomatic relief by wearing graduated compression stockings. There are other treatments performed for varicose veins that include multiple phlebectomy and pulse laser therapy. Mr Sridhar will discuss these options with you and you have the right to ask question on the alternatives.

The other option is to receive no treatment at all.

Potential Complications of No Treatment

Potential complications of not having the treatment are most often related to worsening of the condition over time making the venous insufficiency more difficult to successfully treat. Most commonly, there will be an increase in the size and number of varicose veins. In cases of large varicose veins, spontaneous superficial phlebitis or bleeding may occur. The bleeding has the potential to be severe. Patients with varicose veins associated with underlying venous insufficiency may develop ankle swelling, and skin changes (eczema and/or hyper-pigmentation), and if severe venous insufficiency, non-healing skin ulcers can develop and become infected.

Informed Consent

By signing below, I acknowledge that I have read the foregoing information and understand the risks and possible side effects, alternative methods, and potential benefits of treatment, and I hereby consent to the treatment.

I know the practice of medicine and surgery is not an exact science, and therefore, reputable practitioners cannot guarantee results. While the overwhelming numbers of patients have noted gratifying symptomatic and cosmetic improvement, we cannot promise or guarantee any specific result.

Patient Signature: _____

Date:_____

Print Patient name:_____

Physician's Signature: _____

Date:_____

Print Physicians name:_____

Witness Chaperone Signature:_____

Date:_____