

SCLEROTHERAPY INFORMED CONSENT

This form is designed to provide you with the information you need to make an informed decision about the procedure called sclerotherapy. If you have any questions or do not understand any potential risks, please do not hesitate to ask us.

WHAT IS SCLEROTHERAPY?

Sclerotherapy is a popular method of eliminating varicose veins and superficial telangiectasias (“spider veins”) in which a solution, called a sclerosing agent, is injected into the veins.

DOES SCLEROTHERAPY WORK FOR EVERYONE?

The majority of persons who have sclerotherapy performed will see excellent or at least good improvement. However, there is no guarantee that sclerotherapy will be effective in every case. Approximately 10% of patients who undergo sclerotherapy have only fair results. In very rare instances, the patient’s condition may become worse after sclerotherapy treatment.

HOW MANY TREATMENTS WILL I NEED?

The number of treatments needed to clear or improve the condition differs from patient to patient, depending on the extent of varicose and spider veins present. One to six or more treatments may be needed. Individual veins may require up to 3 to 5 treatments; usually less is required.

WHAT ARE THE MOST COMMON SIDE EFFECTS OF SCLEROTHERAPY?

The most common side effects experienced with sclerotherapy treatment are:

1. **ITCHING:** Depending on the type of solution used, you may experience mild itching along the vein route. This itching normally lasts 1 to 2 days.
2. **TRANSIENT HYPERPIGMENTATION:** Approximately 30% of patients who undergo sclerotherapy notice a prolonged discoloration of light brown streaks after treatment. In rare instances, this darkening of the vein may persist for 4 to 12 months.
3. **SLOUGHING:** Sloughing occurs in less than 3% of patients who receive sclerotherapy. Sloughing consists of a small ulceration at the injection site which heals slowly.
4. **ALLERGIC REACTION:** Very rarely, a patient may have an allergic reaction to the sclerosing agent used. The risk of an allergic reaction is greater in patients who have a history of allergies.
5. **PAIN:** A few patients may experience moderate to severe pain and some bruising, usually at the site of injection. The veins may be tender to the touch after treatment, and an uncomfortable sensation may run along the vein route. This pain is usually temporary, in most cases lasting only one day, but in some cases lasting up to seven days.

WHAT ARE THE OTHER SIDE EFFECTS?

Other side effects include a burning sensation during injection of some solutions, neovascularization (the development, usually temporary, of new tiny blood vessels), transient phlebitic-type reactions (swelling of the vein which may cause the ankles to swell), temporary superficial blebs or wheals (similar to hives), and very rarely, wound infection, poor healing, or scarring.

Phlebitis is a very rare complication seen in approximately one of every one thousand patients treated for varicose veins greater than 3 to 4 mm in diameter. The dangers of phlebitis include the possibility of pulmonary embolus (a blood clot to the lungs) and postphlebitis syndrome, in which the blood clot is not carried out of the legs, resulting in permanent swelling of the legs.

WHAT TYPE OF SCLEROSING AGENT DOES DR. BADAME USE?

Dr. Badame currently uses hypertonic saline, and he has been using this agent for several years. Hypertonic saline is considered an off label agent for this procedure meaning that it is approved for use in other than the procedure being performed. Dr. Badame feels this is the best agent available to him for the treatment of spider veins. If you have any questions regarding hypertonic saline or other sclerosing agents, please discuss them with Dr. Badame before signing the consent.

ARE THERE OTHER TYPES OF PROCEDURES TO TREAT VARICOSE VEINS AND TELANGIECTASIAS? WHAT ARE THEIR SIDE EFFECTS?

Vein stripping and/or ligation may also be used to treat large varicose veins. This generally requires a hospital stay and is performed while the patient is under general anesthesia. Risks of vein stripping or ligation include permanent nerve paralysis, pulmonary emboli, infection, and permanent scarring. General anesthesia has associated serious risks, including the possibility of serious harm, paralysis, brain damage, and death.

WHAT IF I EXPERIENCE A PROBLEM AFTER RECEIVING SCLEROTHERAPY?

If you notice any type of adverse reaction, please call Dr. Badame, immediately.

By signing below, I acknowledge that I have read the foregoing informed consent form and that Dr. Badame has adequately informed me of the risks and benefits of sclerotherapy treatment and alternative methods of treatment with their attendant risks and benefits. I fully understand the benefits and limitations of sclerotherapy, all of my questions have been answered to my satisfaction, and I hereby consent to sclerotherapy treatment performed by Dr. Badame.

I also give permission for before and after photographs of the involved areas to be taken and used for medico-legal documentation, and general patient and public education.

(By checking the following box: , I do not give permission for use of before and after photographs other than medico-legal documentation.)

Patient:_____

Date:_____

Witness:_____

Date:_____

SCLEROTHERAPY MEDICAL HISTORY QUESTIONNAIRE

NAME _____ DATE _____

AGE _____ SEX _____ HEIGHT _____ WEIGHT _____

1. How many years have you noticed this problem? _____

2. Have you ever been previously treated for this problem? _____

By whom and when? _____

With what method?

Injection Laser
Electrocautery Surgery

3. When did your veins occur? Age _____
Before pregnancy After birth control
After pregnancy After Premarin therapy
After trauma Other _____

4. Is there a family history of varicose or spider veins? Yes No

Mother Children
Father Aunts
Sister Uncles
Brother

5. Do you have a history of ?
Thrombophlebitis Pulmonary embolus
Deep vein thrombosis Septicemia
Lupus Hepatitis
Bleeding disorders Easy bruisability
Heart disease Swollen feet/ankles
Migraine headaches Asthma
Dark spots after skin injury or surgery Other _____

| | Yes | No |
|---|--------------------------|--------------------------|
| 6. Are you developing new veins? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are your present veins getting bigger? | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. After prolonged standing or sitting, do your legs ache? | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Do your legs or veins ache before menses? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Does walking or exercise relieve or aggravate the pain? | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Are you required to be on your feet for long periods? | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Do you jog, run, jump rope, or do aerobics? | <input type="checkbox"/> | <input type="checkbox"/> |
| How often per week? _____ | | |
| 13. Are you pregnant or planning a pregnancy soon? | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Do you smoke cigarettes? | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Are you on any medications? | <input type="checkbox"/> | <input type="checkbox"/> |

Please specify medications (including birth control pills, Premarin, hormones) _____

SCLEROTHERAPY: BEFORE AND AFTER INSTRUCTIONS

Before the Procedure

1. Please read in detail the brochure entitled “Spider Vein, Varicose Vein Therapy”. If you have any questions regarding the information in this brochure, please ask Dr. Badame or his nurse before you begin treatment.
2. Do not take aspirin, aspirin-containing products, or NSAIDs such as Advil or Ibuprofen two weeks prior to treatment.
3. Do not apply moisturizer to your legs on the day of the procedure.
4. Wear shorts or bring them along with you.
5. Bring four 4 inch ace wraps.
6. Purchase of medical grade compression stockings is highly recommended. Medical supply stores such as Santa Clara Ostomy and Bischoff’s on Forest Avenue supply these.

After the Procedure

1. Keep the ace wraps and cottonballs on for 24 hours. Thereafter, wear heavy support hose, preferably medical grade compression stockings, or the ace wraps for three weeks.
2. You may return to work immediately after the procedure; however, minimize excess activity. Exercise may be resumed the day after the procedure; however, heavy exercise is discouraged for one week.
3. Treatment may be repeated in the same area ten weeks after a previous session. Treatment to new areas may be performed one week after a previous session.

PREVENTING NEW VARICOSE AND SPIDER VEINS

Exercise The best forms of exercise for preventing varicose veins are those which do not put extra pressure on the legs yet stimulate circulation gently, such as walking, swimming, and cycling. If you already have varicose veins, strenuous running, jumping, cycling, and aerobic dance are not recommended. These strenuous exercises can produce decreased circulation on the legs causing swelling and pain.

Control your weight If you are overweight, losing weight will take excess pressure off your legs.

Take care in choosing proper shoes and clothing Do not wear tight shoes or high heels; do not wear tight fitting underwear as they restrict circulation; do wear comfortable support hose.

Take breaks from prolonged non-activity If you must sit down for a prolong period of time, find time to stand up and walk around. If you must stand for long periods, find time to sit down.

Elevate your legs It is a good idea when lying down to elevate your legs on a pillow, above your heart, for 10 to 20 minutes. When sitting, elevate your legs on a stool.

Flex your ankles Any gentle circulation in your calves helps. When sitting down, turn your feet in a circular motion. Extend your legs forward, toes pointing upward, then downward. Flex your legs at the knees. When standing or walking, do so on your tiptoes.

Prevent constipation Straining can be a cause of varicose veins. Eat foods high in fiber and drink plenty of fluids.

CHARGES

Please inquire. Each session lasts 15 minutes and is timed so that you are guaranteed a full session. Medication and surgical supplies are included except for ace wraps which are charged at a nominal rate if you forget to bring your own.

Because many insurance companies consider sclerotherapy a cosmetic procedure, payment is due at the time services are rendered.

INSURANCE WAIVER

I understand that Dr. Badame performs sclerotherapy only for cosmetic purposes.

In the event Dr. Badame is a participating physician of my insurance company, I release him from any financial contractual obligation he maintains with my insurance company for this procedure.

I fully expect to pay the full amount at the time services are rendered. This fee is not subject to discount by a third party payer.

By signing this form, any insurance discounts or other financial arrangements between my insurance company and Dr. Badame do not apply.

Signature_____ Date_____