

SMALL VESSEL SCLEROTHERAPY CONSENT FORM

GENERAL INFORMATION

Sclerotherapy involves the insertion of a tiny needle into the blood vessel where a small amount of sclerosing agent is gently injected. It may sting for 20-30 seconds or cause a slight cramp. The injection flushes out the red blood cells temporarily, leading to an inflammatory reaction. This reaction causes "sclerosis" or the formation of fibrous tissue within the vessel, leading to the gradual disappearance of the vessel. Fading the vessel can take from a few weeks to a few months.

RISKS AND REACTIONS

Some of the possible risks include variability in treatment results. The appearance of the veins may NOT improve. Each vein may need to be injected 1-4 times or more to achieve full clearance. Brown spots may appear that look like bruises or follow the path of the vein. These brown areas take several weeks to months to go away. It is rare of any discoloration to be permanent. Blistering, redness, itching, and irritation maybe develop as a reaction to the adhesive tape used for compression. Blistering, infection, ulceration, and scarring may develop if someone is exceptionally sensitive to the tiny amount of the solution that may leak out during the treatment. This occurs in less than 1% of patients. An allergic reaction to the solution is a rare possibility. Tenderness, bruising, or firmness in the treated area may last for varying periods of time. This can be minimized by the use of support hose after the treatment. Some people may develop "matting" or pink blush of the skin. This can be treated. Sometimes, blood may accumulate in larger veins treated by sclerotherapy. These accumulations may be treated by the physician to decrease any discomfort. Strict use of support hose minimizes this possibility. Rarely, this accumulation of blood may form a clot. Although this is usually trapped in the treated vein, in extremely rare possibility is the extension of this clot into a deeper vessel causing phlebitis. This risk of this occurring is much less than 1%. People with significant circulatory problems or complications associated with diabetes should not undergo this procedure.

By signing this form, I attest that I have read and understand the procedure and its risks and that have been explained to my satisfaction.

Patient Signature: _____ **Date:** _____