

## INFORMED CONSENT AND GENERAL INFORMATION

### INJECTION TREATMENT (SCLEROTHERAPY) AND/OR LASER TREATMENT OF COSMETIC VARICOSE/SPIDER VEINS

I \_\_\_\_\_ hereby authorize Dr. D'Livro Beauchamp and/or associates to use sclerotherapy and/or treatment with laser to treat visible spider and reticular veins in order to improve the appearance and circulation of my legs.

**NATURE OF THE PROCEDURE:** Using very small needles, veins will be injected with a solution that is designed to damage the inside walls of the vein resulting in its closure and, in most cases, its disappearance. The type of solution we use and its concentration are selected based on the individual characteristics of your veins. Some solutions we use are not FDA-approved in the United States. These solutions, however, are commonly used in compounded form and are considered standard of care in this country and are recommended by the American College of Phlebology. These solutions also have a long track record of safety worldwide. Residual small surface veins, or veins in locations where sclerotherapy cannot be performed may be treated with flashes of laser designed to send energy to the vein to cause it to swell and eventually close and disappear.

#### EXPECTATIONS OF TREATMENT

1. The results of this treatment are not guaranteed. No currently available treatment for varicose veins or spider veins is successful 100% of the time. Our goal is a 75% improvement at the end of a series of treatments.
2. Varicose veins and spider veins are chronic recurrent conditions. Within 1-6 years after treatment, many patients will have developed new ones, which will require additional treatment.
3. Sclerotherapy can cause the spider veins to break up into smaller vessels, which we refer to as "secondary vessels". In other words, at some point in the treatment, you may see spider veins you *didn't have* before. Please note further that the treated areas may look *worse* before they look better. Each successive treatment tends to reduce the size of the remaining vessels, until they are so small that they are no longer a cosmetic problem. This usually requires multiple visits to the office. A single treatment in an area of your leg almost *never* completely clears the area, *even if every vessel is successfully injected*. Veins treated with laser generally require many more treatments than veins treated with sclerotherapy.
4. Immediately after injection, a vein may get hard and lumpy. The veins are longer than they look, and a lump may appear several inches from the actual point of injection. Especially in cases of spider veins, *a lump may appear in a place where you didn't think there was a vein at all*. These lumps will be tender to the touch for a number of weeks. The lumps normally require 1-6 months to shrink completely. On rare occasions, a lump may persist indefinitely. If the vein contains trapped blood, we will often drain this blood with a needle at subsequent visits.

## **RISKS OF THE PROCEDURE**

1. **PIGMENTATION:** The skin overlying an injected vein will sometimes develop brown pigmentation after the treatment. The pigment usually requires 4 -12 months to fade. In a minority of patients, a few of the spots may require as long as 1-2 years to fade completely. On rare occasions, pigmentation can last for prolonged periods, or even be permanent. On occasion, laser treatment can cause some transient skin color changes in some patients, especially if they tan.
2. **SKIN ULCERATIONS/SCARS/BLISTER FROM LASER:** Any medicine that can eliminate an abnormal vein has the potential to burn the skin, leaving a scar. A small ulceration at an injection site may heal with a small scar. Larger ulcerations may cause some skin sloughing leaving a more noticeable scar. This is often the result of the sclerosing agent leaking into a small artery that is abnormally connected to the superficial vein. This is very rare with and cannot be predicted or avoided. Laser may be used at high power to treat stubborn veins, but at this power a mild burn or blister may develop.
3. **PHLEBITIS:** An intense inflammatory reaction, known as superficial phlebitis, develops in less than 1% of patients after injection. The reaction is not dangerous, but it is painful. It lasts around a week. Phlebitis leading to thrombosis in a deep vein is possible but very rare (1 in 100,000 patients). A deep-vein thrombosis will require treatment with blood thinners for months and could result in chronic swelling of the leg or an embolus that can travel to the lung.
4. **CREATION OF NEW VEINS:** Dense patches of spider veins may break out along or near the paths of treated veins. They can be re-injected or treated with laser, but it may not be possible to eliminate them entirely. Some patients can even look worse after treatment than before.
5. **ALLERGIC REACTIONS:** These are extremely rare and are generally reserved for injections of larger veins with more concentrated solutions than we use in our practice. An allergic reaction may rarely result in death.
6. **NUMBNESS:** Rarely a small invisible sensory nerve near the treated area may become affected leading to a patch of temporary or permanent numbness. This is extremely rare with the dilute solutions we use.
7. **VISUAL CHANGES:** Visual flashes or spots are very rare and are sometimes seen after treatment with foam agents. This usually resolves in a few hours.

## **ALTERNATIVES TO TREATMENT**

In some cases, wearing support hose, quitting smoking, and treatment with some herbals can slightly improve the appearance of some unsightly veins. The improvement from these modalities does not approach the success rate of sclerotherapy and/or laser.

## **RISKS OF NOT RECEIVING TREATMENT**

Small cosmetic veins may continue to enlarge and become more painful. In the case of more widespread, long-standing insufficiency of veins in an area, risks of skin ulceration and phlebitis are higher.

## **OTHER CONSIDERATIONS**

I understand that this treatment is cosmetic in nature and will not be covered by my insurance.

Visits will be scheduled every 3-6 weeks depending on the severity and distribution of your veins. I understand it is important to keep my follow-up appointments at the recommended regular intervals. We reserve the right not to treat at a follow-up visit if we feel it is too soon after your last treatment to properly assess your veins.

**By signing below, I acknowledge that I have read and understand the information in these three pages. I have also received a copy of the pre- and post-treatment instructions and understand the need to follow these closely. I have had all of my questions regarding the nature of the treatment, realistic expectations, and the risks of the treatment answered to my satisfaction. I consent to photography of the treatment area before, during, and after treatment. I understand that these photos may be displayed in the office, shown to other prospective patients, or used in advertising or on our practice website. My name will not be disclosed in any photos used in this manner.**

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**Patient's Signature**

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**Today's Date**

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**Witness**