Informed Consent

Sclerotherapy

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INSTRUCTIONS

This is an informed consent document to help you learn more about sclerotherapy—treatment for visible veins. It will outline the risks and other treatments.

It is important that you read the whole document carefully. Please initial each page. Doing so means you have read the page. Signing the consent agreement means that you agree to the surgery that you have talked about with your plastic surgeon.

GENERAL INFORMATION

Sclerotherapy is a common surgical procedure. It is done to remove visible veins and telangiectasias (spider veins). A solution called a sclerosing agent is injected into the vein. This can fix issues like small varicosities (varicose veins), superficial veins, and spider veins. In some cases, your doctor may combine laser treatment with sclerotherapy to help you get the results you want.

You may want to use certain skin treatment procedures both before and after sclerotherapy to get better results.

OTHER TREATMENTS

You don't have to have sclerotherapy to change how your veins look. You can choose another type of treatment. You can also choose to have no treatment at all. You can go in for other treatments like lasers. Your doctor may also suggest intravascular or endovenous radio frequency therapy. In some cases, sclerotherapy may be better than other forms of treatment. In other cases, a different option might be better for you. All treatments have their own risks and possible problems.

RISKS OF SCLEROTHERAPY

Every surgery has risks. It is important that you understand the risks and the possible problems that can result from them. All procedures have limits. Choosing to have a surgery means comparing the risks and benefits. Most patients do not face problems, but you should talk about them with your plastic surgeon. Make sure you understand all possible outcomes of sclerotherapy.

SPECIFIC RISKS OF SCLEROTHERAPY

Color Change (Hyperpigmentation):

Sclerotherapy can change the natural color of your skin. You may see uneven patches of lighter and darker skin. It is most common for your skin to darken (hyperpigmentation). Chronic vein issues can cause hemosiderin or iron deposits in your skin. This may not be obvious until the vein is treated. This can make your skin appear browner or darker in color once the vein is gone. This usually gets better with time. You may want to have laser treatment in future to help lighten these dark patches. You may also have bruising after your treatment. This can last for several days or weeks. In some cases, you may see bruises for up to 6 months. Ask your doctor how long the bruises may last after treatment. Ask about how likely you are to develop dark spots.

Damaged Skin:

Major skin loss is very rare with sclerotherapy. In some cases, sclerosing agents may cause skin loss. If this happens, you may need more wound care to help the area heal. While it is rare, large areas of tissue can be damaged if you have extravasations (fluid leakage), arterial injections, or other problems. You may need other treatments like debridement or skin grafting to fix this.

Allergic Reactions:

You may be allergic to a sclerosing agent. Most allergic reactions are minor and involve rashes or hives (urticaria). They can be treated with medications or creams that can be applied to your skin. Major allergic

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reactions can affect your lungs, heart, or kidneys, and even cause death. Fortunately, severe allergic reactions to sclerosing agents are very rare.

Telangiectatic Matting:
Sclerotherapy may result in more small visible veins appearing. This is called telangiectatic matting. These areas of new very small veins can usually be treated with either more sclerotherapy or laser procedures.

Superficial Thrombophlebitis:
Sclerotherapy hides your visible veins. These veins may get inflamed, which is called superficial thrombophlebitis. If this happens, you might need more treatment. Treatment can involve medication (including antibiotics if the area has become infected), draining the area, or surgery. If you go in for surgery, it could leave scars. Superficial thrombophlebitis is very rare with sclerotherapy.

DISCLAIMER
Informed consent documents give you information about a surgery you are considering. These documents explain the risks of that surgery. They also discuss other treatment options, including not having surgery. This document is made after a full review of scientific literature and clinical practices. They describe a range of common risks and other forms of management of a disease.
However, informed consent documents can't cover everything. Your plastic surgeon may give you more or different information. This may be based on the facts of your case.

Informed consent documents are not meant to define or serve as the standard of medical care. Standards of medical care are determined based on the facts involved in an individual case. They may change with advances in science and technology. They can also change with the way doctors practice medicine.

It is important that you read the above information carefully and get all your questions answered before signing the consent agreement on the next page.

 _____ **Patient Initials**
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CONSENT FOR PROCEDURE OR TREATMENT

1. I permit Dr. Thomas Jeneby and the doctor's assistants to do the procedure **sclerotherapy.**
2. I got the information sheet on **sclerotherapy.**
3. I understand that, during the procedure, an unexpected situation may require a different medical procedure than the procedure listed above. I permit the doctor listed above, the assistants, and/or designees to provide any treatment(s) that my doctor thinks are needed or helpful. My permission includes all treatments that my doctor does not plan to do at the start of the procedure.
4. I understand what my surgeon can and cannot do. I understand that no warranties or guarantees have been hinted at or stated outright about the outcome of the procedure. I have explained my goals. I understand which outcomes are realistic and which are not. All my questions have been answered. I understand the procedure's risks. I am aware of other risks and possible issues, benefits, and options. I understand and choose to have the procedure.
5. I agree to the anesthetics and medications that are needed or helpful. I understand that all types of anesthesia have risks and may result in complications, injury, and even death.
6. I am aware of the serious risks to my health when blood products are used. I agree to my doctor using them if my doctor, assistants, and/or designees think they are needed or helpful.
7. I agree to the disposal of any tissue, medical devices, or body parts taken out during or after this procedure. I also agree to any additional surgeries or treatments that are needed or helpful.
8. I agree to have parts of my body photographed or televised appropriately before, during, and after the procedure for medical, scientific, or educational reasons, if the pictures do not reveal my identity.
9. For medical education, I agree that onlookers can be in the operating room.
10. I permit my Social Security Number to be given to the right agencies for legal reasons and medical device registration, when necessary.
11. I agree to the charges for this procedure. I understand that the doctor's charges are separate from the charges for the hospital and the anesthesia. I understand that there may be more charges if more procedures or treatments are needed or helpful. I agree to those charges, if any.
12. I understand that not having the procedure is an option and that I can opt out of having the procedure.
13. IT HAS BEEN EXPLAINED TO ME IN A WAY THAT I UNDERSTAND:
    a. THE ABOVE PROCEDURE OR TREATMENT TO BE PERFORMED
    b. THERE MAY BE OTHER PROCEDURES OR TREATMENT'
    c. THERE ARE RISKS TO THIS PROCEDURE OR TREATMENT

I CONSENT TO THE PROCEDURE OR TREATMENT AND THE ABOVE LISTED ITEMS (1-13).
I AM SATISFIED WITH THE EXPLANATION AND HAVE NO ADDITIONAL QUESTIONS.

_____

Patient or Person Authorized to Sign for Patient Date/Time

Witness_____ Date/Time_____

_____ Patient Initials

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