



1 Wellness Boulevard, Suite 103
Irmo, South Carolina 29063
Phone: (803) 407-8346
Fax: (803) 732-2624

ENDOVENOUS LASER ABLATION PROCEDURE INFORMED CONSENT

I _____ (Patient or Guardian) authorize Dr. Stephen Miller, his associates and assistants, to perform the following procedure:

Endovenous Laser Ablation of my right/left (circle one or both) greater Saphenous vein.

I understand this means that the physician, using ultrasound for guidance, will direct a catheter and subsequently a laser fiber, into the damaged vein from a point distal to the groin up towards the groin area. I understand that once the laser fiber is positioned and anesthetic is injected around the vein, that he will activate the laser and pull all the components down the inside of the vein, closing the vein with heat energy.

I understand that the reason for this procedure is to correct my venous insufficiency caused by the reflux, or backward flow, of blood down my leg.

The procedure is performed using local anesthesia along the course of the saphenous vein. There may be some discomfort associated with placement of the anesthetic, and also with use of the laser or the radiofrequency catheter. The discomforts are mild in general, and I may receive additional sedation during these times to lessen any discomfort. If I am sedated, I may not be aware of the local anesthetic or the ablation procedure.

All surgical interventions carry an inherent risk of infection, allergic reaction, bleeding and anesthetic complications including cardiopulmonary complications. Below are possible risks and side effects that are specific to endovenous laser ablation.

- ALLERGIC REACTION: Very rarely, a patient may have an allergic reaction to the anesthetic agent. The risk of this is greater in patients who have a history of allergies.
- PAIN: Patients may experience moderate to severe pain following the procedure. The leg may be tender to the touch after treatment, and 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.

- SKIN BURNS: Utilizing laser therapy carries a risk of skin burns, which usually requires further surgical treatment.
- DAMAGE TO THE EYES: Laser therapy carries a risk of damage to the unprotected eye. You will be provided with safety goggles to protect your eyes.
- DEEP VEIN THROMBOSIS: is a very rare complication, the dangers of thrombosis include the possibility of pulmonary embolus (a blood clot carried to the lungs) and post phlebotic syndrome, resulting in a permanent swelling of the leg.
- TRANSIENT HYPERPIGMENTATION: Patients who have had Endo Venous Laser Therapy may notice some discoloration after treatment. This discoloration is almost always transient and will resolve in about three months. In rare cases this darkening of the skin may persist up to a year or longer.
- NODULARITY: Nodularity at the site of vein removal may persist for up to a year. 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 but some may persist.
- SKIN ULCERATION: Post injection therapy at the site of injection, a skin ulcer may develop. This is a rare complication. In the event of a skin ulcer it may takes months for the area to heal.
- NERVE TRAUMA: Occasionally there can be trauma to surrounding nerves, which can result in a transient numbness that will resolve on its own with time. In rare instances the localized numbness may be permanent.
- REOCCURRENCES 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. We recommend a yearly follow up with ultrasound so that we can detect any new problems and treat them accordingly as they arise.
- SPIDER VEINS: Occasionally occur along the path of the area treated with laser.

I am aware that in addition to risks listed above, there are other risks that may accompany any surgical procedure, such as loss of blood, infection, and inflammation in the venous system with formation of a thrombus (clot), postoperative bleeding, and nerve trauma that may lead to temporary or permanent numbness.

I understand that there are also some common side effects including bruising, pain or a tightening sensation in the thigh, leg and ankle swelling, palpable lumps and or hematomas (bleeding) that may need aspiration to relieve.

I also understand that despite the high clinical efficacy of Endovenous Laser procedure, my physician cannot make any guarantees about my results or cure of my venous disorder.

By signing below, I acknowledge that I have read the above. I have been adequately informed of the nature, intended purpose, significant risks and consequences of endovenous laser treatment, as well as the alternative treatment methods. I acknowledge I have been given plenty opportunity to ask questions about my condition and options.

I hereby authorize consent to endovenous laser ablation performed at Palmetto Vein & Surgery Center by Dr. Stephen Miller. I also authorize the taking and usage of photographs.

Patient Name (please print): _____

Patient Signature: _____

Today's Date: _____

Physician Use Only:

I have discussed the nature and purpose of endovenous laser treatment, the associated risks, consequences and available alternatives with the above patient. I am satisfied with the patient's understanding of this information.

Physician Signature: _____

Today's Date: _____