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PATIENT: Candy Test

ACCOUNT #: 379655

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**VARITHENA**

Dr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has scheduled you to have a vein procedure.

* Cardiovascular Medicine - Davenport Office – 2nd Floor
* Cardiovascular Medicine - Moline Office

**Procedure Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Time:** \_\_\_\_\_\_\_\_\_\_\_\_\_

**Follow up Ultrasound Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Time:** \_\_\_\_\_\_\_\_\_\_\_\_\_

* **Please read these instructions carefully. Failure to follow these instructions may require the procedure to be rescheduled.**
* **Each time a patient misses an appointment without providing notice, another patient is prevented from receiving care. We ask that you please give at least a 24-hour notice if you are unable to keep your appointment. If you do not keep your appointment and do not notify us in advance, a $200 charge will be assessed to your account. This charge must be paid prior to rescheduling.**

**BEFORE YOUR PROCEDURE**

* Please drink at least 24 ounces of water 2 hours prior to the procedure.
* Hold water pill (if prescribed) and any of the following medications the day of your procedure: (All other medications may be taken as prescribed.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Wear loose, comfortable pants or shorts.
* You may not be able to drive home. Please arrange for someone to drive you home.
* Additional instructions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you need to reschedule or have any questions regarding these instructions, please call our office.

* Illinois: 309-743-6700; extension: \_\_\_\_\_\_\_\_\_\_
* Iowa: 563-324-2992; extension: \_\_\_\_\_\_\_\_\_\_\_

**ABOUT YOUR PROCEDURE**

**WHAT IS VARITHENA?**

Varithena (also known as non-thermal sclerosant) treats varicose veins in the legs through the injection of a foam solution into the affected vessel. The foam causes the diseased vein to collapse. Varithena is safe and rarely has any serious side effects. Response to the foam varies from patient to patient and is dependent on the severity of the diseased vein. It may take 4-8 weeks for the affected leg to look better with optimal results appearing in 4-6 months.

**PREPARING FOR YOUR PROCEDURE**

You will not be able to shower for 24 hours post procedure because of the leg wrap. On the day of your appointment wear loose, comfortable pants or shorts. **Do not wear your compression stocking 24 hours prior to the procedure.**

We recommend that you plan to have someone drive you home post procedure. The procedure may take up to 30 minutes to complete. *Please note that your procedure time could be delayed from your scheduled time.*

**DURING YOUR PROCEDURE**

A member of our staff will escort you to an exam room. You will be asked to remove your pants, shoes and socks, and your leg will be cleaned with an alcohol based cleaner. An ultrasound tech and your physician will re-identify the veins requiring treatment. Your physician will inject the foam solution into the veins. It is normal to feel some slight discomfort and burning during the procedure.

Blood flow will be naturally redirected to healthy veins as the recovery process begins. The treated vein becomes scar tissue and is eventually absorbed by the body.

**AFTER YOUR PROCEDURE**

It is important that you stay off of your feet as much as possible the day of your procedure and elevate your leg. After your procedure, your leg will be wrapped with a compression wrap. This wrap should be worn continually for 24 hours after your procedure. After 24 hours, remove the wrap and wear your compression stocking during the day for 2-3 weeks (at your physician’s discretion). You may take your compression stocking off to sleep and shower.

You should not participate in strenuous exercise such as weight lifting, sit-ups, leg presses, and lunges for 7 days. Upper body light weightlifting (15 easy reps of 10-15 pounds) is acceptable.

Do not sun bathe for at least one week after treatment. If you get sun exposure you should protect the treated leg with sunblock (SPF 20).

In general, air travel should be avoided for 3 days following the procedure. Check with the office if you have any scheduled air travel around the time of your procedure.

Some soreness, tenderness, and hard lumps following the procedure is normal and should be expected. If this develops, it can be treated with a few simple steps such as:

* Resting the treated leg.
* Taking ibuprofen (Advil, Motrin) or acetaminophen (Tylenol).
* Applying hydrocortisone cream or Aspercream with lidocaine to reduce pain and inflammation.
* Icing the area for 15-20 minutes as needed.

**Do not use heat.**

If your pain or discomfort is not relieved by over the counter medications and ice, please contact our office.