Consent for VenaSeal

VenaSeal is a minimally invasive option for treating vein reflux (leaky valves) involving cyanocrylate adhesives and ultrasound guidance.

Possible Risks and Complications
All procedures carry risk. Infection, allergic reaction, pain, and blood clots resulting in a stroke or pulmonary embolism (PE) are all possible with VenaSeal. These complications have been well studied and are extremely rare. Possible risks and side effects that are specific to cyanocrylate adhesives (VenaSeal) include but are not limited to the following:

Common Complications:

Pain/Phlebitis: Patients generally experience mild to moderate discomfort after the procedure, usually described as a bruise-like ache. The pain generally responds to ibuprofen, heat, and elevation.

Swelling: Swelling usually resolves in a few days but may last a few weeks, especially after treatment of large varicose veins. Wearing the prescribed compression hose and elevation will lessen your swelling.

Darkening of the skin (hyperpigmentation): Patients who have had EVLT may notice some discoloration after treatment. This discoloration usually resolves in a few weeks to months. In rare cases, the darkening of the skin may persist up to a year.

Neuropathy: Rarely, there can be trauma to surrounding nerves, which can result in a transient numbness that will generally resolve on its own with time. In rare instances, the localized numbness may be permanent.

Failure of the procedure or recurrence: VenaSeal is very successful, however, there are cases where patient will need repeat treatment. The diseased vein may initially seal but then reopen in time as the body can occasionally form a new channel in the treated vein. Also, VenaSeal should be thought of as first step in a step wise approach to overcoming venous issue.
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I have read the information stated above and understand the risks and benefits of the procedure. In addition to the risks listed above, complications can include allergic reaction to VenaSeal adhesive, arteriovenous fistula, bleeding from the access site, DVT, edema, hematoma, huperpigmentation, infection at the access site, neurologic deficits including stroke and death, pain, paresthesia, phlebitis, urticari, vascular rupture, and visible scarring.

I also understand the alternative methods of treatment. I have had an adequate explanation and have had all questions answered. While the great majority of patients have very satisfying results, the practice of medicine and surgery is not an exact science, and therefore, results cannot be guaranteed.

______________________________________________________________
Patient Name

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Patient Signature

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Date