ENDOVENOUS RADIOFREQUENCY ABLATION (Venefit® Procedure)

This form is intended to provide you with information necessary to assist you in making an informed decision about whether to undergo radiofrequency treatment of the saphenous vein. Sign this consent only after you have read and understood this information and all of your questions have been answered to your satisfaction.

Procedure Description

Duplex ultrasound imaging is used throughout the procedure to visualize the veins and guide treatment. The treatment catheter is inserted near the lower part of the vein to be treated using local anesthesia and a small puncture. The treatment catheter is then threaded up the vein and positioned near the upper part of the vein to be treated. A dilute solution of local anesthetic and saline is injected around the vein to compress it and to provide a protective layer around the vein. While being carefully monitored, radiofrequency energy is then delivered to treat the targeted vein. At the completion of the procedure, a compression stocking is applied and you will be asked to walk immediately.

Potential Risks and Complications

If you undergo Endovenous Radiofrequency Ablation, your symptoms may improve, remain the same, or worsen. However, the long term success rate of saphenous vein closure is greater than 90%.

The procedure is quite safe and complications are very rare, but possible. Potential side effects or complications are allergic reaction to the anesthetic, thermal injury (burn) to the overlying skin or intervening tissue, bruising of the overlying skin (some mild temporary bruising is anticipated), perforation of the vein, breakage of the treatment catheter, superficial phlebitis (inflammation of the vein), leg swelling, infection, bleeding, hyperpigmentation (darkening of the overlying skin), neovascularization (growth of new veins), and nerve injury resulting in numbness or muscle weakness. Rarely, a clot may form in the deep vein (DVT) requiring blood thinners or other treatment. Other complications not known at this time may occur. Also, treatment of the great saphenous vein would make it unavailable or unsuitable for use in heart surgery should it be needed at a later date.

Potential Risks of Not Undergoing Treatment

Usually, there are no serious health consequences of not undergoing treatment except that your condition may worsen. Progression of chronic venous insufficiency may lead to more serious consequences such as skin changes, ulcers or sores, swelling, phlebitis, or bleeding.

Potential Benefits

The purpose of the procedure and potential benefits are reduction in size or closure of treated varicose veins, improvement in varicose vein related symptoms, and prevention or treatment of ulcers, swelling, and other more serious conditions associated with chronic venous insufficiency.

Alternative Treatment

Some patients may get adequate relief of venous insufficiency symptoms by wearing graduated compression stockings. Alternative treatments for varicose veins include surgical stripping, ambulatory phlebectomy, sclerotherapy, endovenous laser treatment, and other treatments similarly aimed at removing, destroying, or closing the great or small saphenous veins.

I acknowledge that I have read and understand the above and that I have been adequately informed of the nature, intended purpose and significant risks and consequences of Endovenous Radiofrequency Ablation (Venefit® Procedure), as well as alternative treatment methods. I acknowledge that I have been given ample opportunity to ask questions about my condition and treatment options. I hereby authorize and consent to Endovenous Radiofrequency Ablation performed by Dr. Arnold P. Robin MD or Dr. Dean T. Velis MD. I also authorize the taking and use of photographs.

Patient Name	Signature	Date
Witness	Signature	Date

I have discussed the nature and purpose of Endovenous Radiofrequency Ablation (Venefit® Procedure), and the associated risks, consequences, and available alternatives with the person signing above, and I am satisfied that he/she understands.

Physician	Date