

VARICOSE VEINS



The Vein Care Center

www.msa-veincarecenter.com



Muskegon Surgical Associates, P.L.C.
www.msapc.com

*1316 Mercy Drive
Muskegon, Michigan 49444
231-739-9461
1-888-874-5892 (Toll Free)*

Welcome

The Vein Care Center at Muskegon Surgical Associates is renowned for the vascular surgeons who specialize in the diagnosis and treatment of vein disorders. Recognized as the respected leader in the treatment of leg vein conditions in West Michigan, this experienced team of surgeons and nurses offers a wide range of treatment options for their patients using state-of-the-art technology.

Please take a few minutes to review the information enclosed. Understanding your disease and treatment options provides you with knowledge to make decisions about your care. Treatment may range from conservative, non-surgical treatments or surgery.

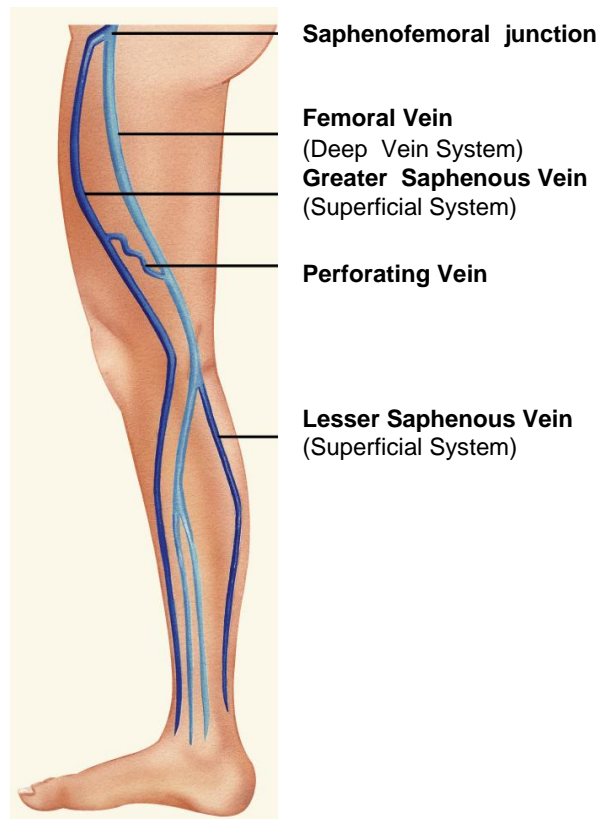
At your initial visit your surgeon will review your medical history, medications and examine your veins. Together, you will decide on a treatment plan.

Please keep this brochure, you will be referring to the directions frequently during your treatment.

Understanding Veins

Competent (Healthy Veins)

Your veins are blood vessels that return blood to the heart. Healthy, competent valves in the veins control blood return to the heart. When a muscle relaxes, the valve closes preventing the blood from back flowing. Valves function like doors aiding the return of blood to the heart from all parts of the body.



Incompetent (Unhealthy)

When the valves become weakened or damaged (incompetent) they allow blood to backflow and pool in the vein. This causes an increase in pressure on the vein walls and eventually the vein will begin to “bulge” or “rope”. This can lead to medical conditions referred to as Venous Disease or Venous Insufficiency. Venous insufficiency may cause aching, heaviness, pain, cramping, fatigue, swelling, itching, bleeding and leg ulcers.

Varicose veins can be inherited (run in families), they can worsen with pregnancy, hormonal changes, age and obesity. Varicose veins may also be caused from prolonged sitting, standing or trauma.



Left: Competent Valve opens allowing blood to return to the heart.



Right: Valves close preventing backflow of blood into the vein.

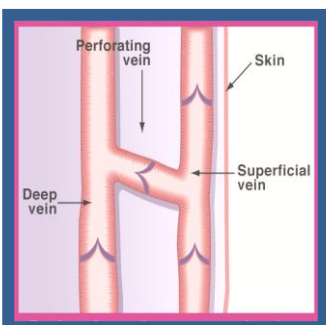
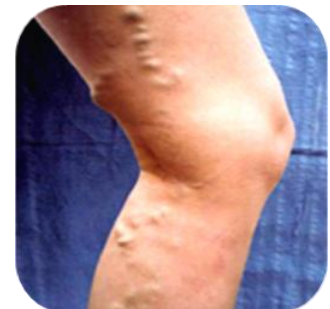


Left: Incompetent valve. Valve fails to shut completely, allowing blood to backflow into the vein causing varicose veins.



Spider Veins are signs of venous insufficiency in superficial veins, located just under the skin. They are groups of tiny blood vessels that resemble spider webs or tree branches. Spider veins may appear red, purple or blue in color. Diagnosis of spider veins may include a visual exam and ultrasound (duplex) of the veins. Treatment includes conservative treatment, sclerotherapy and dermal laser procedures. Treatments may be considered cosmetic and may not be covered by insurance.

Varicose Veins are superficial veins that have become enlarged, ropey or bulgy in appearance. They may stand out visually from the skin and appear to turn or twist. The veins may turn red, purple or blue in color. Varicose veins are diagnosed by visual exam and ultrasound. Treatment may include conservative treatment (compression hose), dermal laser, sclerotherapy, radiofrequency ablation, miniphlebectomy or high ligation.



Perforator Veins are veins that communicate between superficial veins (spider and varicose veins) and the deep venous system. These are diagnosed by ultrasound. Treatment may include ultrasound guided sclerotherapy or radiofrequency ablation.

Incompetent (Unhealthy)



Chronic Venous Insufficiency occurs when leg swelling isn't controlled. Blood pools in the lower portion of the leg usually causing fluid to leak into the tissue, and above the ankle. The skin may be dry and itchy or become thickened. The skin may hyperpigment and look brown or purple. When left untreated the skin breaks down and an ulcer forms usually below the calf but above the ankle. The ulcer may have an odor and have yellow or green drainage. Venous stasis ulcers are usually slow to heal and will return if the underlying disease is not treated.

Diagnosis and Treatment of Varicose Veins

All vein problems are not the same. It is important to determine the underlying cause of your condition. Your surgeon will perform a physical exam and order an ultrasound if indicated. Duplex Imaging/Ultrasound uses sound waves to create an image. The image shows the amount of blood flowing through your veins, the size and shape of the vein, and the condition of the valves within the veins.

Individual Treatments are determined by physician evaluation and testing. Multiple sessions may be required for complete treatment of venous disease. Failure to follow the preoperative and postoperative instructions may result in cancellation of your treatment and/or the outcome of your procedure. Surgical treatment of varicose veins may be delayed for the following reasons: pregnancy, ulcers, cellulitis, infection, phlebitis and deep vein thrombosis.

Conservative (non-surgical) Management

Conservative treatment includes wearing support hose (compression keeps blood from pooling in your veins and helps to decrease swelling). Exercise, weight loss programs and elevating your legs above the level of your heart can also help manage your symptoms.



Surgical Treatment

***Note: Each of the procedures below have specific preoperative and postoperative directions that should be reviewed prior to and after each treatment.**

Radiofrequency Ablation (RF) Venus Closure is a procedure performed in the office with local anesthesia, utilizing heat to close the greater and/or lesser saphenous vein. The surgeon places a catheter into the vein through a small opening in the skin. Radio-frequency (RF) energy delivers heat to the vein wall. As the thermal energy is delivered, the vein wall shrinks and the vein is sealed closed, rerouting the blood to other healthy veins.

High Ligation is an office procedure used for patients with saphenous veins that cannot be accessed with a radiofrequency catheter. After injecting local anesthesia, the surgeon makes a small incision in your groin area, the saphenous vein is tied off and the skin is closed off with dissolvable suture.

Miniphlebectomy is a procedure usually performed on large varicose veins. The procedure is performed in the office using local anesthesia. It involves a small incisions to bring the vein to the surface. Using specialized instruments, segments of the vein are removed.

Ultrasound Guided Sclerotherapy uses ultrasound guidance to locate perforator veins (veins communicating between the superficial and deep system). The veins are injected with medication (sclerosing agent) to close them.

Sclerotherapy vein injections involves injecting medication (a sclerosing agent) into the superficial veins, making the veins sclerose (seal). Treated veins are eventually reabsorbed by the body.

Dermal laser uses focused laser energy to the skin surface, shrinking the vein. This is reserved for the smallest of spider veins. Dermal laser may be used in conjunction with sclerotherapy.



Risks and Complications of Surgery

Your surgeon will discuss the benefits and risks of having surgery. Complications may include bruising, swelling, hyperpigmentation or staining (darker) skin at injection sites, superficial phlebitis or deep venous thrombosis (blood clot), bleeding, infection, and additional superficial veins. Other risks include: reaction to medications injected including anesthesia, scarring, tape blisters, ulcerations, nausea, vomiting, numbness at the incision. Your risks of having complications increase if you are a smoker and with certain diseases such as heart disease, obesity, and failure to follow your preoperative and postoperative instructions.

Preoperative Care: Please review prior to any treatments

Medications. If you take Coumadin (warfarin), you will be instructed stop this medication prior to treatments. You will receive specific directions from the nurses or scheduling department. It is ok to continue your other medications as usual.

Quit smoking. Smoking decreases the blood supply to the tissues causing a delay in healing. It can also increase your risk of respiratory problems. Literature regarding smoking cessation is available from our nursing staff and in the lobby. You may want to contact your primary care physician for assistance in smoking cessation.

Our office staff will review your consent form and insurance information. Please notify your primary care physician and insurance company of your procedure. You will be notified of what your insurance will and will not pay and given an estimated cost.

Our scheduling department will call you with a date and time of your procedures.

Use the forms at the end of this booklet to keep track of your session dates, procedures pre-operative and post-operative instructions. Each procedure has different preoperative and postoperative instructions that you should review prior to your appointments.

Five days prior to your procedure, review all of your directions for surgery. There are different preoperative and postoperative instructions for each procedure. Pick up any prescriptions and supplies. Failure to follow your pre and post instructions will cause cancellation in your procedure and may effect the outcome of the treatment.

Frequently Asked Questions

Do I need a referral to be evaluated for varicose veins? No, you may call the office at 231-739-9461 or toll free at 1-888-874-8952 to make an appointment for your evaluation.

Will I have to have any testing? If you have superficial, spider veins you probably will not need any testing, however if your veins are large or bulging, you may need a duplex (ultrasound) to determine if the valves in your veins are functioning properly.

Does my insurance pay for treatments? It depends on the type of treatments the surgeon recommends and the type of insurance you have. On the first visit or after testing, the surgeon will develop a treatment plan. Our patient coordinators will send in a “predetermination” to the insurance company to verify payment and notify you with a cost estimate for treatment. If you have an HMO, contact your primary care physician for appropriate referrals.

Will my insurance pay for support/compression hose? Although we have support hose available for purchase in the office, we cannot bill the insurance for them. We recommend going to one of the listed businesses, they will be able to tell you if your insurance will pay and they can bill the insurance company for you.

Will I need more than one procedure? Multiple treatments may be needed depending on the severity of your disease.

Can all my procedures be done at once? Procedures are divided into sessions based on severity of disease.

Will I need anesthesia? We do not use general or conscious sedation in our office. A mild oral sedative may be called to your pharmacy for certain procedures. We will administer a local anesthetic in the office.

Will I be able to drive after my procedures? For sclerotherapy/injections and dermal laser, you may drive to and from the office. All other procedures require you to be driven to and from the office due to the sedatives. (You should never drive if you are taking narcotics such as Darvocet, Tylenol with Codeine, Vicodin or Norco).

Reference Web Sites

www.vnus.com

www.dornier.com

www.jobst.com

www.veincarecenter.com

Radio Frequency/ High Ligation/ Miniphlebectomy Treatment Schedule

Session 1: Date: _____ **Time:** _____

Radio Frequency, High ligation, Miniphlebectomy

Session 2: Date: _____ **Time:** _____

Radio Frequency, High ligation, Miniphlebectomy

Session 3: Date: _____ **Time:** _____

Radio Frequency, High ligation, Miniphlebectomy

Session 4: Date: _____ **Time:** _____

Radio Frequency, High ligation, Miniphlebectomy

*****Call our office to speak to a nurse if you are on Coumadin.**

It is ok to continue your Plavix and aspirin as usual unless otherwise directed by your physician.

The day of your procedure:

- Bring a pair of shorts to wear during your treatment unless you are having a radiofrequency.
- Our procedure rooms are kept cool, so you may want to wear a sweatshirt or something warm.
- Do not wear lotion or moisturizers on your legs.
- Wear a shoe that is easy to get on and off. (sandal, slipper or clog etc.).
- Bring a headset to listen to if you would like.
- Take your Valium 1 hour before your treatment.
- Take your 1st dose of antibiotic the morning of your treatment.
- You will need someone to drive you to and from your appointment.
- You can plan on your treatment taking _____minutes/hours.
- Arrive 10-15 minutes prior to your scheduled appointment time to sign consent forms, use the restroom, etc.
- No one other than the patient and medical staff are allowed in the surgery room.

After your procedure:

- Your leg will be wrapped and you will have to be off your feet with leg elevated for the first 48 hours.
- If you are having radiofrequency or miniphlebectomy you will need 20-30mmHg compression stockings (not TED hose) after your procedure. Stockings can be purchased in our office (we cannot bill insurance) or at an outside pharmacy (which will bill your insurance company) with a prescription.
- You will be sent home with a prescription for a pain medication (to last for all of your sessions) . You may take over the counter medications such as Tylenol (acetaminophen) or Motrin or Advil (ibuprofen).

Additional instructions:

RADIOFREQUENCY POSTOPERATIVE INSTRUCTIONS

- Walking at frequent intervals is recommended. Prolonged sitting and standing should be avoided. When resting elevate your leg above heart level as much as possible for the first 48 hours.
- Wear the compression bandages that we apply continuously for 48 hours.
- You may remove your compression bandages after 48 hours and take a tepid shower.
- Avoid hot showers and tub baths for 5 days post-op. (Since the vessels are newly sealed, hot showers or baths may open them up, causing bleeding under the skin.)
- Walking/normal activity is allowed after 48 hours. Avoid exercising for one week.
- Avoid working for two days then return to work without restrictions.
- Wait at least two weeks before getting into a hot tub/spa, pool or lake.
- Wear your compression stockings when you are up and around for two weeks. You do not have to wear compression stockings during sleep. (You only have to wear the stocking on the leg that is treated).
- Continue to take your prescribed antibiotics as directed.
- You may resume all your medications after your procedure including Coumadin.
- Continue to take your prescribed antibiotics as directed.
- For discomfort take your prescription medication or acetaminophen (Tylenol) or Ibuprofen (Motrin, Advil). Avoid operating machinery/driving while using narcotics.
- It is normal to have firm nodular areas at your incision. This is due to your bodies anti-inflammatory process and will gradually resolve.
- Return in 48-72 hours for your follow-up ultrasound.

Please feel free to call our office if you have any questions at 231-739-9461 or 1-888-874-8952.

Additional instructions:

HIGH LIGATION POSTOPERATIVE INSTRUCTIONS

- Relax and keep your leg elevated above heart level as much as possible for the first 48 hours after your procedure.
- A small amount of oozing from your dressing is normal.
- Avoid working for two days then return to work without restrictions.
- Walking is allowed after 48 hours. Avoid exercising for one week.
- It is not necessary to wear compression stockings after a high ligation unless you have combined procedures. Our staff will instruct you.
- You may take a tepid (not hot) shower the day after your procedure.
 1. Change the dressing on top of your incision as needed. Wash your hands prior to and after changing the dressing.
 2. Steri-strips may be removed after 5 days.
- Avoid hot showers/tub baths for 5 days after your procedure. (Since the vessels are newly sealed, hot showers or baths may open them up causing bleeding under the skin).
- Wait at least two weeks before getting into a hot tub/spa or pool or lake.
- Take prescribed antibiotics as directed.
- You may resume all of your medications including coumadin after your procedure.
- Additional For discomfort take your prescription medication or acetaminophen (Tylenol) or ibuprofen (Motrin, Advil). Do not operate machinery/drive while taking narcotics.

Additional instructions:

Please feel free to call our office if you have any questions at 231-739-9461 or 1-888-874-8952.

MINIPHLEBECTOMY POSTOPERATIVE INSTRUCTIONS

- Keep your leg elevated above heart level as much as possible during the first 48 hours.
- A small amount of oozing from your dressing is normal.
- Avoid working for two days then return to work without restrictions.
- Walking/normal activity is allowed after 48 hours. Avoid exercising for one week.
- Wear the compression bandages continuously for 48 hours.
- You may remove your compression bandages after 48 hours and take a tepid (not hot) shower.
- Steristrips on incisions may be removed after 5 days.
- Avoid hot showers/tub baths for 5 days post op. (Since the vessels are newly sealed, hot showers or baths may open them up, causing bleeding under the skin).
- Wait at least two weeks before getting into a hot tub/spa, pool or lake.
- Wear your compression stockings when you are up and around for two weeks. (You only have to wear the stocking on the treated leg). You do not have to wear compression stockings during sleep.
- Continue to take your prescribed antibiotics as directed.
- You may resume all of your medications including Coumadin after your procedure.
- For discomfort take your prescription medication or acetaminophen (Tylenol) or ibuprofen (Motrin, Advil). Do not operate machinery/drive while taking narcotics.
- It is normal to have lumpy or firm nodular areas at your incision. This is due to your bodies anti-inflammatory process and will gradually resolve.

Additional instructions:

Please feel free to call our office if you have any questions at 231-739-9461 or 1-888-874-5892.

Sclerotherapy/Vein Injections/Dermal Laser Treatment Schedule

Session 1: Date: _____ **Time:** _____
Injections/ Dermal Laser

Session 2: Date: _____ **Time:** _____
Injections/ Dermal Laser

Session 3: Date: _____ **Time:** _____
Injections/ Dermal Laser

Session 4: Date: _____ **Time:** _____
Injections/ Dermal Laser

*****Call our office to speak with a nurse if you are on Coumadin.**

It is ok to continue your Plavix and aspirin as usual unless directed otherwise by your physician.

The day of your procedure:

- Bring your compression stockings (not TED hose) with you to your appointment. They **must** be worn for the 1st 48 hours following your procedure, then daily for 1 week. We recommend prescription compression stockings of 20-30 mmHg. They can be purchased in our office or at an outside pharmacy. If you think your insurance will pay for them we can give you a prescription.
- Do not wear lotion or moisturizers on your legs.
- Bring a headset to listen to if you would like.
- Bring a pair of shorts to wear during your treatment
- No one other than the patient and medical staff are allowed in the surgery room
- You may drive after vein injections and/or dermal laser.
- You can plan on your treatment taking _____minutes
- No sun exposure or tanning beds for three weeks before a treatment. Do not use artificial tanner for two weeks before a treatment. You can resume artificial tanning two weeks after injections/laser.

Additional instructions:

POSTOPERATIVE INSTRUCTIONS FOR SCLEROTHERAPY (INJECTIONS)

- Leave your compression stockings (support hose) on for 48 hours (you will be sleeping in them).
- Remove any bandages and stockings after 48 hours.
- You may shower or bathe 48 hours after the treatment.
- Wear stockings for one week after treatment (not during sleep).
- Your veins will look worse before looking better, bruising is normal, occasionally there may be a hard area that may be tender, this may take 2-3 months to resolve.
- Occasionally there is a brownish discoloration after the injections. This is transient and in most cases will fade over the next several months.
- Take acetaminophen (Tylenol) or ibuprofen (Motrin) for pain.
- Avoid sun, use sunscreen and avoid self-tanning lotions for the next two weeks or until you have completed all of your procedures.
- You may return to work after your injections.
- No exercise for three days.

Additional instructions:

Please feel free to call our office if you have any questions at 231-739-9461 or 1-888-874-5892.

POSTOPERATIVE INSTRUCTIONS FOR DERMAL LASER

- Apply aloe Vera or Vaseline to the treatment area. Due to the thermal nature of the laser effect, some dehydration of the area occurs during and after the treatment.
- No exercise for three days after your treatment.
- Avoid sun, and self-tanning lotions for the next two weeks or until you have completed all of your procedures.
- You may take tepid (not hot) showers the day after your laser.
- Avoid hot showers, tub baths and hot tubs for four days after treatments.
- Occasionally you may see brown dots where the veins were treated, this will fade with time.
- Take acetaminophen (Tylenol) or ibuprofen (Motrin) for pain.

Additional instructions:

Please feel free to call our office if you have any questions at 231-739-9461 or 1-888-874-5892.



Compression Stockings Suppliers

Watkins 231-739-7158

Carry Jobst and are able to order Mediven if needed. Knee, thigh and panty
They try to keep a variety of compressions and sizes on hand and can order if needed.
Usually takes 2-3 days to get in.
They are able to bill some insurance's if insurance will cover.

Airway Oxygen 231- 767-9825

Carry Jobst. They keep a small quantity on stock and are able to order.
They are able to bill Medicaid and Priority Health. BCBS pts have to pay out-of-pocket and submit their own claim.

In-Home Care 616-846-0360

Carry Jobst. They keep a variety of sizes in stock but can order if needed. Would take 1 wk to order.
They do not do custom stockings. They would refer to Watkins.
They are able to bill insurances if they will cover.

Metron 231- 739-3436

Carry Jobst and are able to order Mediven.
Orders take 1-3 days. They are able to bill insurances.

Mercy Orthotics and Prosthetics 231-672-4886

Carry Jobst. They are able to order. This will take 2-3 days. They bill insurance.
They recommend appointments to get fitted; otherwise you may have to wait.

West Michigan Pedorthotics /The Shoe Shop 231-739-4414

Carry a large supply of Jobst stockings and are able to order if needed.
They are able to bill insurance companies.

Air Caire Home Medical Equipment phone # 231-924-4040

They only bill for medicaid.
All stockings are to order only

Apothecary Shoppe 231-723-3545

Manistee, MI 49660
Carry Trufit and Mediven. They are able to order and bill insurances if needed.

Carelinc 1-800-280-8889

5750 W US-10, Ludington, MI.
Carry Jobst and are able to bill for stockings.

Oceana Home Medical Equipment Plus 231-861-8240 Toll Free: 1-877-861-8240

169 N. Michigan Ave, Shelby, MI 49455
Carry Jobst and can bill for some insurance.

Notify Our Office

231-739-9461

Or

1-888-874-5892

Fever over 101 degrees

Bleeding

Uncontrolled pain

Chills, shakes, sweating

Drainage from your incision

Rash

Redness around your incision getting bigger

Nausea or vomiting

Swelling in the surgical leg that does not resolve with adjusting the compression dressing or elevating the leg above the level of the heart

