
ENDOVENOUS THERMAL ABLATION OF THE SAPHENOUS VEIN

Patient Instructions

These instructions are to prepare you for the endovenous thermal ablation procedures used to treat incompetent saphenous and varicose veins. The saphenous and/or other superficial/perforator veins frequently do not function properly in patients with chronic leg pain / swelling, and those with varicose veins. These malfunctioning veins can be percutaneously destroyed or ablated with thermal energy without stripping the veins from the legs. Ablation of diseased veins routinely results in immediate improvement of venous circulation in the leg, disappearance of the varicose veins, and relief of leg discomfort / swelling associated with venous hypertension.

The following instructions are to help you prepare for your procedure and speed your recovery.

Before and During the Procedure:

- Please drink *plenty* of water the evening before the procedure so that you will be well-hydrated for the procedure. *Do not eat or drink anything after 12:00 midnight before your procedure.*
- Shave your legs (men generally use a clipper, not a razor) the night before your procedure. On the morning of your procedure, shower and wash your legs thoroughly using hibiclens or antibacterial soap.
- Take your usual medications on the morning of your procedure with a small sip of water (unless Dr. Hayes or Kelsie has asked you to temporarily stop some of your medications)
- Unlike with most procedures, blood-thinning medications are typically best continued during these minimally-invasive procedures. If you are on blood-thinning medications and have any questions about them, please ask Dr. Hayes or Kelsie.
- Please bring a **complete** list of medications with you on the day of your procedure. It is especially important to notify Dr. Hayes' staff about any allergies or recent changes in your medications.
- Please bring shorts or loose-fitting clothing and slip-on shoes or house slippers to the Vein Center. After the procedure we will apply compression dressings and regular shoes and pants will not fit over the post-op dressings.
- Please bring all stockings with you. If you have received a blanket and bag from us, please bring those to all appointments.
- You may be sedated during the procedure and should not drive home or stay alone the day and night of the procedure. Please try and find a responsible adult to drive you to and from the Vein Center and stay with you the day and night of the procedure.
- Your venous ablation will be performed in one of the Vein Center procedure rooms. You will have monitors attached to record your blood pressure, pulse rate, and oxygen levels. You will likely be given intravenous conscious sedation. You may have trouble remembering the procedure, **but will not be completely asleep.**
- Endovenous Thermal ablation is performed using local anesthesia along the course of the diseased vein. As with any procedure, there will be discomfort associated with the placement of the anesthetic, and also with use of the ablation fiber/catheter.
- A surgical incision is generally not required. Only small punctures are made to both place the ablation fiber/catheter and to remove the ropey varicose veins. Sometimes a small incision is made at groin level to expose and ligate a large saphenous vein before positioning the ablation fiber/catheter.
- In order to remove the unsightly and painful varicose veins or other visible veins in the leg, many endovenous ablation procedures are accompanied by micro-phlebectomy, sclerotherapy, or both.
- Ultrasound is necessary during the procedure to access the diseased vein, to insert the ablation fiber/catheter, to place the local anesthetic around the vein, and to position the ablation fiber/catheter perfectly within the diseased vein.
- The ablation fiber/catheter is inserted inside the diseased vein and positioned to begin the ablation. Energy is delivered to the fiber/ catheter, which is slowly withdrawn through the vein. The heat gently destroys the lining of the vein.
- The small wounds are closed with steri-strips. Sterile compression dressings are applied.
- The procedure usually takes about an hour, depending on the severity of your disease and the amount of work required. You will, however, be at the Vein Center up to an hour or more before and after the procedure to evaluate and monitor your condition.

After You're Home:

- Leave the stocking in place until your ultrasound a few days after your procedure. If you have a blue color wrap, it should be removed at bedtime the evening of your procedure.
 - You need to frequently walk around the house and out of doors. **Please avoid sitting with your feet down or standing still for prolonged intervals.** We like you to walk around quite a bit, as this speeds recovery and helps to keep you from becoming too "stiff" or developing blood clots.
 - When the stockings are removed after your post-op ultrasound, you may shower (**no tub-baths**) to wash off any stains. Do not scrub the wounds. You can rub the legs lightly with your fingertips. Use hibiclens, dial, or other bactericidal soap. Pat your legs dry when getting out of the shower, and then dry them completely with a hair-dryer on the "cool" setting. Leave the paper steri-strips on your wound (they will peel off in about 2 weeks). You may place a band-aid over the wounds if you wish.
 - Starting postoperative day two or three (after the dressings are removed at the Vein Center), you should wear your stocking as much as you can for the next two weeks (daytime only).
 - You may resume normal activities after 2 to 4 days, depending upon your leg discomfort. You will continue to experience some soreness along the course of the treated vein. The pain/tenderness usually peaks about post-op day 14. This is usually best minimized with ibuprofen.
 - You may resume your exercise schedule within 2 weeks, again using common sense to adjust your schedule if your leg is still painful or tender.
 - There will be bruising, redness and tenderness in the areas that once contained varicose veins. Patients usually feel tender knots or bumps in the region the micro-phlebectomy or sclerotherapy has been performed (where the varicose veins had been). These knots represent subcutaneous bruising and thrombosed varicose veins. This is a normal result of the procedure and is temporary. The bruising will not harm you, and is not the type of "blood clots" that can go to your lungs. They will slowly disappear as the veins dissolve away.
 - Minor post operative "bleeding" is to be expected. Much of the "blood" is actually Lidocaine mixed with a little blood that has leaked from the puncture site. If the "bloody" spot is larger than a silver dollar, call the Vein Center.
 - If you travel by car, airplane, etc. for longer than one hour for the next six (6) months, or are at bedrest for any reason please:
 - 1) Wear your compression stockings while in transit.
 - 2) Walk around (in a parking lot, in the airplane aisle, etc.) for five minutes every hour.
 - 3) Stay well-hydrated.
 - 4) Move your feet frequently while seated.
- You do have an increased risk of developing blood clots in the deep veins of your leg if you are immobile for an extended period. These four measures will decrease that risk considerably.
- To decrease the chances of infection, you should avoid soaking in hot tubs or spas, etc. for at least 4 weeks after your operation. Swimming and tub baths are o.k. after 2 weeks.
 - Resume your normal medications after your procedure. If you have questions about your medications, please ask Dr. Hayes or Kelsie.
 - You will have a follow-up office visit and postoperative ultrasound within 1-2 weeks of your procedure. We will ask you to return for follow-up ultrasound at 6 weeks from your procedure date in order to be sure that the results are satisfactory to you and to Dr. Hayes/Kelsie.
 - If you need additional spider vein treatments, Dr. Hayes or Kelsie will explain what can be done and how the spider veins can be eliminated. Because insurance companies consider spider veins a cosmetic problem, they will not cover this treatment. Dr. Hayes or Kelsie will give you the cost to treat each leg. He determines a one-time fee for each leg, which is good for at least three treatments up to one year. We are widely known to be very fair regarding these treatments in order to provide an affordable service for you.
 - You will be given a prescription for pain medication (Lortab or Ultram) to be taken as needed. **Be sure to take ibuprofen 600-800 mgs every 8 hours for five days after the procedure to diminish postoperative inflammation (unless you are sensitive to ibuprofen).** You will most likely find that your thigh is tender during the next few weeks (it usually peaks at 14 days). This is due to the inflammatory process that accompanies your body absorbing the ablated vein. This inflammatory process is quite normal and will resolve over the next several months. After the first five days, the ibuprofen should be tapered down and stopped (not to exceed 400mg three times daily, in addition to the as-needed Lortab Ultram).

*Most Frequently Asked Questions are answered in the **FAQ and Vein Myths** section of our website at www.vcnt.com. If you have further questions, please feel free to call Dr. Hayes or his office staff at any time. You may also contact Dr. Hayes after office hours by calling him at his home. The contact numbers are listed below.*

Vein Center of North Texas phone numbers:
903-893-0123 | 903-624-6888

Vein Center of North Texas

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Thank you,

Clint A. Hayes, MD, RVT, RPVI, FACS, FACPh