

# Comprehensive Vein Treatment Center

## *Our Policy of Venous Disease Management*

1. **At the first visit**, you will have a consultation with the doctor and it includes a complete history and physical examination. The doctor may order a venous test (**Color Duplex Scan**).
2. **During the second visit**, you will meet our registered ultrasound sonographer. She will perform the venous test (**Color Duplex Scan**) on your legs, a non-invasive procedure, using the most modern ultrasound equipment in our **ICAVL Accredited Vascular Laboratory**. This allows us to visualize the blood flow through your leg veins and see the valves inside your veins to assess their function. Normally, the blood flows in an upward direction through your veins. An abnormal test may show the blood flowing in a downward direction indicating **venous insufficiency**--(see the diagram at bottom of the next page) (Sometimes the venous test is done on the same day the consultation is done.)
3. **After the venous test**, the doctor will discuss with you the **plan of therapy** in detail. It includes various options available along with discussion of the recent literature on the subject of venous disease. If you are interested, we will be glad to provide you references from the recent literature on the subject of venous problems and the current trends in their management. Also, feel free to visit our web site **[www.cvtc.net](http://www.cvtc.net)** and Facebook--**[www.facebook.com/cvtcnj](http://www.facebook.com/cvtcnj)**
4. **Photographs of the legs** with varicose and spider veins are taken at the first visit.
5. **If you are found to have reversal of blood flow in your leg veins, venous insufficiency**, we recommend **Venous Closure** of the involved superficial veins using **Endovenous Radiofrequency Treatment** (*minimally invasive procedure*). Please note that this is a minor surgical procedure performed under local anesthesia with minimum of sedation in our office. **No cutting is involved**. You will be able to go back to work on the same day if you so desire. If both legs need surgery, the procedures are done in two stages two to three weeks apart.
6. **Clusters of large visible bulging varicose veins** are treated using the modern minimally invasive procedure called **ambulatory micro-phlebectomy**. This procedure is also done under local anesthesia allowing you to ambulate immediately. There are virtually no scars after this procedure. Depending upon the number of varicose vein clusters to be treated, **multiple sessions of surgery may be required**. In our experience this causes much less pain and eliminates any chance of post-operative venous thrombosis.

*These surgical procedures are usually covered by your insurance. Our staff will obtain the necessary approvals.*

7. **We will prescribe you compression stockings** to aid in the recovery of your venous disease. Our office staff members will help you get the proper compression stockings. **Most insurance companies do not pay for the stockings**. However, we do recommend that you contact your insurance company to find out what your benefits are for durable medical equipment (DME).
8. **We will give you detailed instructions for specific leg exercises** that will help to improve the health of your leg veins by improving the function of various leg muscle pumps. Please ask for details.
9. **The spider and reticular veins** are treated with **Laser or Intense Pulse Light**. These treatments require multiple sessions of therapy; each affected area requires 3 to 4 sessions of therapy 2 to 3 weeks apart. Rarely an area may require more than 4 sessions of therapy. Insurance companies do not pay for these treatments even if the spider veins being treated are symptomatic or there is underlying venous insufficiency causing the spider veins. We treat large areas of the legs with spider veins at each session. Our staff members will provide you the pricing information. We strongly feel that the spider veins should be treated to prevent recurrence of venous insufficiency.

**For your information, recent medical literature has clearly shown that the superficial venous disease causes deep venous valvular insufficiency; and the treatment of superficial venous pathology (varicose and spider veins irrespective of size) does improve the deep venous insufficiency. It is also well-documented that the results are better if the treatment is started in the early stages of the disease.**

Recently published Guidelines of American Venous Forum for the treatment of **Class 1 venous disease (spider veins)** strongly recommends, “Spider veins when symptomatic should be treated with laser or sclerotherapy and even asymptomatic spider veins should be considered for treatment.” Please ask for the brochure of these guidelines.

**10. If you are diagnosed to have deep venous insufficiency in addition to superficial venous disease, we recommend 6-month follow up duplex scans for a period of 24 months. *Our extensive experience has shown that after complete treatment of the superficial venous disease, there is marked improvement not only of the symptoms, but also of the function of the deep venous valves.*** Repeat duplex scans are therefore necessary to assess the improvement of the deep venous insufficiency; this also helps us decide about the appropriate compression therapy for the future.

Our experienced and well-trained staff will welcome any questions or concerns you may have and guide you through this process.

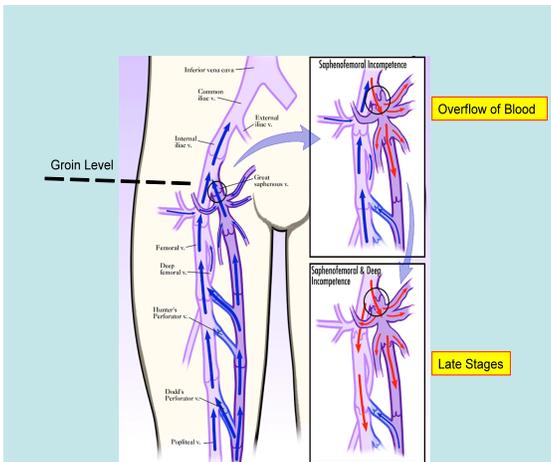
Please call (609) 890-2966 or (609) 890-2233 if you have questions.

To contact Dr. Ahmad after 5 PM call **(609) 658-3889**

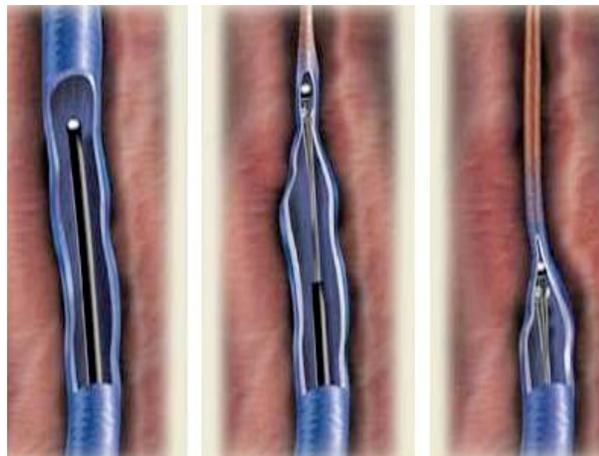
I have read and understood the above policy.

Patient’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Venous Insufficiency



### Radiofrequency Venous Closure



**Catheter inserted    Vein warmed and collapses    Catheter slowly withdrawn, closing the vein**