



VASCULAR SERVICES

**PREPARING FOR YOUR LASER VENOUS ABLATION**

Please arrive for your Laser Closure on \_\_\_\_\_ at \_\_\_\_\_ AM/PM.

A driver should accompany you to the procedure and provide transportation to your home. If adequate transportation is not available to you, the procedure may be cancelled or rescheduled. You will be asked to walk for 15 - 20 minutes prior to the procedure after arrival to the office.

We maintain a very tight surgery schedule. Your timely arrival is of the utmost importance as others are scheduled after you. **IF YOU ARE MORE THAN 20 MINUTES LATE, YOU WILL BE RESCHEDULED FOR ANOTHER DAY.**

**It is imperative that you drink 32oz of water the evening before the procedure and an additional 32oz of water two hours prior to your procedure appointment.** Please eat a light breakfast for morning procedures and a light lunch for afternoon procedures. Wear loose fitting shorts or very loose pants that you can pull over the leg bandages that will be put on after the procedure. Take daily medications as usual. **PLEASE REMEMBER TO BRING YOUR SUPPORT HOSE/COMPRESSION GARMENTS** as these are **important/required** to receive the most benefit from your procedure.

Take a shower and wash your leg with antibacterial soap (dial or other brand) on the morning of the procedure. It may be necessary to shave some hair on your groin region to facilitate the ultrasound probe prior to and during the procedure. Do not apply cream, oil, or lotion to the legs.

**Please understand that part of your POST OP care will be to have scheduled ultrasound as follows: 1 week, 6 weeks, and again in 3 months.**

Please review and sign the **Patient Informed Consent** form and bring it with you. If you have any questions, we can address them upon your arrival or you may call the office at 770-692-4000 before the day of the procedure.

**Drink water and bring your support stockings on the day of procedure.**

**If you have been given Oral Medication before your procedure, you will not be able to drive, operate heavy machinery or make major decisions for 24 hours.**

**If you are on blood thinners, notify the staff. If you have allergies, notify the staff.**

**It is recommended that you not drive or operate heavy machinery until you remove the bandage.**

\_\_\_\_\_  
Patient Name (Print)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Today's Date



VASCULAR SERVICES

**IMPORTANT INFORMATION REGARDING VENOUS LASER ABLATION**

Following the venous laser ablation procedure, your leg will be wrapped with an ACE bandage. It is important that you keep the ACE bandage in place for 48 hours post procedure. You may shower using lukewarm water after removing the ACE bandage but hot tub baths or whirlpools are not advised for 3 days. **For best short as well as long-term results, it is strongly advised that you resume wearing compression stockings during active hours once the ACE bandage is removed.** This will help with reduction in pain, swelling and inflammation and also facilitate early healing.

Frequent walking post procedure (for 5-10 minutes every hour) is recommended to prevent blood clots in the deep veins of the legs. However, strenuous exercise such as gym work-outs, weight lifting and long distant running is not advised for at least a week as this can adversely affect the short as well as long term procedure outcomes. **Driving any motor vehicle is prohibited for 48 hours post procedure. Flying is also prohibited for 2 weeks post procedure.**

Recovery from venous laser ablation procedure is usually quick and it is normal to experience mild discomfort as well as mild sensory changes that may include soreness, bruising, and a tightness or 'pulling' sensation in the leg which usually resolve within a few weeks. This discomfort can generally be managed with over the counter analgesics such as Tylenol or Motrin and the application of cold or warm compresses. It is also normal to experience some drainage of pinkish or light brownish colored fluid that can seep out for the first 24 hours which is harmless and of no clinical significance.

We encourage you to call our office immediately if you experience any chest pain, shortness of breath, significant leg swelling, tenderness or fever post venous laser ablation procedure. Also as part of your post venous laser ablation management, you will be requested to return to the clinic for the follow up ultrasound studies at **1 week, 6 weeks, and again in 3 months.** These follow up appointments are important in addressing any clinical concerns and also help in evaluating short and long term procedure success.

*These post-operative instructions were reviewed with me prior to my discharge.*

Office Number: (770)-692-4000

\_\_\_\_\_  
Patient Name (Print)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Instructions Given By