

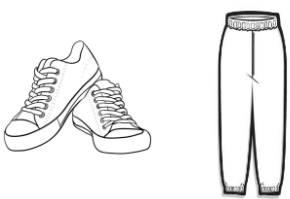


# Pre- and Post Procedure Instructions

# PRE-PROCEDURE INSTRUCTIONS



- SHOWER BEFORE YOUR PROCEDURE, AS YOU MAY NOT BE PERMITTED TO DO SO FOR 2-3 DAYS FOLLOWING YOUR TREATMENT.



- WEAR LOOSE COMFORTABLE CLOTHING. WEAR SOMETHING THAT WILL FIT OVER YOUR BANDAGES AND COMPRESSION SOCKS. WEAR SHOES THAT ARE COMPATIBLE WITH YOUR COMPRESSION SOCKS.



- YOU MUST BRING YOUR THIGH HIGH COMPRESSION SOCKS WITH YOU. *BE SURE TO BRING THEM TO EVERY APPOINTMENT AT OUR CLINIC.*



- IF YOU ARE ANXIOUS ABOUT THE PROCEDURE, A LIGHT SEDATIVE CAN BE PRESCRIBED (XANAX). IF YOU WANT TO USE XANAX, YOU MUST HAVE SOMEONE THAT CAN DRIVE YOU TO AND FROM YOUR PROCEDURE. **IF POSSIBLE, WE DO ADVISE YOU TAKE THE XANAX.**



- YOU MAY TAKE YOUR NORMAL MEDICATIONS PRIOR TO THE PROCEDURE. PLEASE NOTIFY THE NURSE IF YOU ARE TAKING A BLOOD THINNING MEDICATION. THOSE MIGHT INCLUDE- WARFARIN, COUMADIN, XARELTO, BRILINTA, ELIQUIS, PLETAL, PLAVIX, AND ASPIRIN.



- THERE ARE NO RESTRICTIONS ON EATING BEFORE OR AFTER YOUR PROCEDURE.



- IF YOU ARE PREGNANT, YOUR PROCEDURE WILL NEED TO BE POSTPONED UNTIL AFTER DELIVERY. IF YOU ARE BREASTFEEDING, YOU WILL NEED TO PUMP AND DUMP YOUR BREASTMILK FOR 24 HOURS AFTER YOUR PROCEDURE.

## OPTIONS FOR LIDOCAINE CREAM:

- **WE SEE THE BEST RESULTS WITH PRESCRIPTION CREAM.**



- WE WILL CALL IN OR SEND A PRESCRIPTION WITH YOU FOR EMLA CREAM OR 5% LIDOCAINE CREAM.

- YOU SHOULD HAVE 1 TUBE PER LEG.



- YOU CAN USE A DISCOUNT COUPON ON **GOODRX** APP TO PURCHASE EMLA CREAM (Lidocaine 2.5%-Prilocaine 2.5%).



- ASPERCREME 4% LIDOCAINE OR ICYHOT LIDOCAINE IS AN ACCEPTABLE SUBSTITUTION IF YOU ARE UNABLE TO PURCHASE THE PRESCRIBED CREAM. THE SUBSTITUTIONS ARE LOCATED IN MOST COMMERCIAL PHARMACY AREAS.

## LIDOCAINE CREAM DIRECTIONS:



- Apply cream *2 hours* prior to arrival time.
- Apply the cream to your legs as highlighted in *your* diagram. The cream should be applied liberally to the areas. Apply cream all the way to your groin crease if the upper thigh is highlighted.
- Apply lidocaine cream to any bulgy or protruding veins.



- **Do not** rub the cream into your skin, just spread or smear it over the skin. The cream numbs the skin by sitting on top of the skin.



- Wrap your leg with plastic wrap (Saran Wrap) when finished applying the cream. This will keep the cream on your skin and keep it from coming off on your clothes. Keeping your legs warm will also help with absorption.



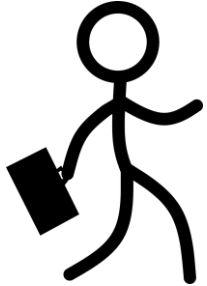
- You should be able to see and “squish” the cream around on top of your skin when finished.



- Do not apply more than 1 tube of lidocaine cream per day to avoid lidocaine toxicity.

# POST PROCEDURE INSTRUCTIONS

## ACTIVITY:

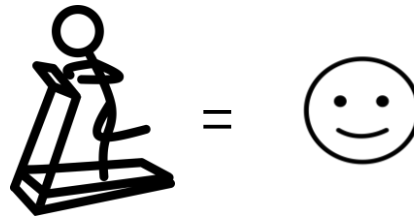


- Resume your normal activities. Walk hourly during waking hours. Return to work and school when you feel comfortable. If your leg is wrapped, bending your knee or kneeling may be more difficult.

- Driving is okay unless you have taken Tramadol, Xanax or a narcotic.



- Exercise and activity are fantastic.



- Heavy lifting, leg lifts, and leg squats should be *avoided for 1 week*. Avoid any activity that creates a lot of pressure in your legs.



## BATHING:



Sponge bathe only until your bandage is removed. Your bandage is usually kept in place for 2-3 days following your procedure. (You can bathe if you can keep your leg and bandage dry and out of the water.)



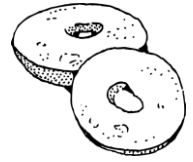
# MEDICATIONS:



## Ibuprofen:

**800 mg by mouth 3 times per day for 10 days.**

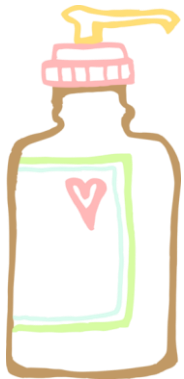
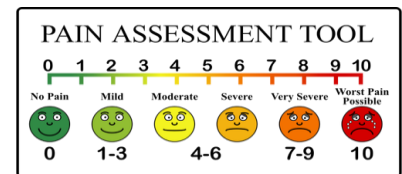
- Always take with food.
- Try to take morning, mid-afternoon, and bedtime.
- Take this medication *even if you are feeling great*.
- You will heal faster and feel better if you are consistent in taking ibuprofen.
- If stomach irritation or upset occurs, try taking  $\frac{1}{2}$  of a tablet instead of a full tablet, or take 1 tablet every 12 hours.



## Tramadol:

**Take 1 tablet (50 mg) every 4 to 6 hours as needed for pain.**

- Most patients experience mild pain or discomfort following the procedure.
- You may not need to take this medication.



## LOTIONS OR CREAMS:

- Lotions or creams may be applied after incision sites are fully healed. It usually takes 5-7 days for sites to close.

# SPECIAL INSTRUCTIONS:

**COMPRESSION HOSE:** Wear compression hose continuously for 3 days, then daytime for 7 days after that. You will wear your hose for 10 days total. You may find it beneficial to wear your hose during the daytime for several weeks. We advise prolonged use of compression socks if you had several ambulatory phlebectomy sites, or had swelling prior to or after your ablation. It helps redirect blood flow into healthy veins.



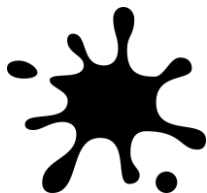
**DRESSING:** \*We try to wrap your leg very snug. Good compression can reduce phlebitis and inflammation after your procedure. *BUT, if your toes or feet become discolored, swollen, or throb, please loosen the dressing* by temporarily pulling down your hose and making slits or small cuts in the brown bandage.



\*The bandage can be bulky. It should be left in place for the first 2-3 days following your procedure. The bandage can start to bind behind your knee and cause pain. If this happens, pull your hose down, carefully remove your dressing to the binding point and pull your hose back up.

\*When you remove your dressing, it can be stuck to your leg. It can be more easily removed by getting in your shower and applying water or hydrogen peroxide.

**BLEEDING:** It is not uncommon to have areas that “bleed through” the dressing. Do not be alarmed. It is best to elevate your leg and apply compression to the area for 10 or more minutes. If you are unable to stop the bleeding or if your dressing is excessively soaked, please contact our office.



**LUMPS AND BUMPS:** Expect that you will get lumps and bumps where varicose veins were pulled out. These lumps are collections of blood that can feel like marbles or peas underneath your skin. It may take months for them to fully resolve.



**PHLEBITIS:** This closely resembles and is often confused with infection. Phlebitis is sections of clotted veins that cause inflammation. You may experience redness, heat, firmness, and tenderness over those veins. We often see this if ibuprofen is not taken, or after the course of ibuprofen has finished. Phlebitis is treated by resuming your ibuprofen, using compression hose, elevating your legs, and applying moist warm heat.



**STERI-STRIPS:** These are little strips of paper tape that are placed over phlebectomy sites. Leave them on until they fall off. The only exception to this is if you start to develop a blister or redness under or around the strip. If this happens, get the strip wet and gently remove. Apply an antibiotic ointment to the blistered site.

**NERVE PAIN:** It is possible to get areas of numbness near phlebectomy and ablation sites. They will initially be very numb, but then over the course of weeks to months, the sensation will gradually return from the edges in. These areas will be numb but also hypersensitive. It is best to limit the amount of stimulation to those areas by wearing your compression hose.







Seek **EMERGENCY CARE** if you have:

- Chest pain
- Uncontrolled pain
- Confusion or change in behavior or alertness
- Difficulty breathing or shortness of breath
- Progressive swelling of any area
- Severe abdominal pain
- Dizziness or feeling like you are going to pass out