



**Fairfax Vein Center**  
8505 Arlington Blvd. Suite 130  
Fairfax Radiology VA 22031  
P: 703-698-4475 F: 703-698-8278

**Patient Name:** \_\_\_\_\_  
**Procedure Date:** \_\_\_\_\_  
**Arrival Time:** \_\_\_\_\_ **Procedure Time:** \_\_\_\_\_  
**Dr:** \_\_\_\_\_

<p><b>1 Week F/U:</b> Date : _____ Time : _____ am pm</p>
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### Pre Procedure Instructions for Ultrasound Guided Sclerotherapy

- **Please be sure to arrive 30 minutes prior to your procedure time**, so the doctor can review the post-op instructions and obtain your consent for treatment.
- **Bring your prescribed thigh-high compression hose with you the day of your procedure;** you will be wearing them home and for three weeks following the procedure. If you do not have compression hose, your procedure will be rescheduled.
- We will give you a mild sedative prior to your procedure, therefore **you will need to make arrangements for a friend or a family member to drive you home or your procedure will be rescheduled.**
- Please inform us of any allergies you may have.
- Please **DO NOT** put any cream or lotion on your legs the day of your procedure.
- We encourage you to have a small meal but do not drink coffee or other caffeinated beverages prior to your procedure.
- We expect you to be able to resume most activities including work the day after your procedure.
- **No airline flight for three weeks after any Vein Procedure.**
- **No car rides longer than 1 hour after any Vein Procedure.**
- If you have any procedure, scheduling, or pre certification questions call 703-698-4475.

**If you need to cancel for any reason, please call at least one week prior to your scheduled procedure date.** This will assist to accommodate the other patients that are waiting to have this procedure done. The doctors and staff of the Fairfax Vein Center appreciate your consideration in this matter.

**Patient's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_