

Varicose Veins Questionnaire

Which varicose vein procedure is the correct one for me? (What are the options?) What is the estimated cost of the procedure?______ How long is one appointment? How often will I need to receive treatment? ______ How far apart are the treatments? What are the common side effects or complications associated with the procedure? How can I prepare for the treatment/procedure?_____ Do the treatments hurt? What are my pain management and anesthesia options? How long is the recovery time associated with my procedure? Do you have before-and-after patient images to help to prepare me for what to expect? Will someone walk me through the process before going in for treatment? _____ What are the risks?

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What should I expect after the procedure is performed? (i.e., short-term and long-term effects; activity restrictions; expected recovery period)

Other Questions and Notes _____

Is a doctor on site?	🛛 Yes	🖵 No
Is the doctor board-certified in dermatology or in another specialty with equivalent training and experience?	🛛 Yes	🗖 No
Was my medical history taken?	🛛 Yes	🖵 No
Was I given an initial evaluation to determine if the technique or procedure is appropriate for my skin type?	🛛 Yes	🗖 No
Did the doctor show me before-and-after photos?	🛛 Yes	🛛 No