1. **Introduction**
   1.1. Peripheral veins have valves which prevent the reflux of blood and facilitate venous return to the heart. Venous valvular insufficiency or calf muscle pump malfunction may lead to reflux of blood, resulting in venous hypertension and dilated veins, known as varicose veins.
   1.2. Patients may also have calf/ankle swelling, tiredness/heaviness in legs, distending pain, skin changes, thrombophlebitis, ulcer or even bleeding.
   1.3. Surgery may be warranted to relieve symptoms, reduce the occurrence of complications, or enhance the recovery of complications.

2. **Procedural Preparation**
   2.1. A written consent is required.
   2.2. Inform your doctors about your drug allergy, current medications or other medical conditions for pre-operative assessment.
   2.3. Shaving at the groin/leg may necessary to reduce risks of post-operative infection.
   2.4. Local anaesthetic cream will be applied onto your thigh or leg if necessary.
   2.5. Fast for 6 to 8 hours before the operation.
   2.6. Change operation gown and empty bladder before heading to operating theater.
   2.7. Pre-medications, intravenous drip, or antibiotic prophylaxis may be required per doctor’s prescription.
   2.8. Perform tests including electrocardiogram, chest X-ray and blood tests as suggested by the doctor.

3. **Procedure**
   3.1. Under general, spinal or local anaesthesia, a small incision (2 to 3 cm) is made at the groin. The connection between the deep vein and the great saphenous vein is ligated.
   3.2. Another incision is made below the knee level. A stripper is then passed along the great saphenous vein to strip the vein. Multiple small stab wounds (0.5 to 1 cm) are then made to avulse varicose veins at the calf region.

4. **Recovery Phase**
   4.1. **General information/activities**
      4.1.1. After general anaesthesia, you may feel dizzy, tired or weak. These will subside gradually. You can resume usual activities gradually under the instruction of health care professional. Deep breathing and coughing exercise are helpful to prevent pneumonia.
      4.1.2. After local anaesthesia, you can resume usual activities after rest.
      4.1.3. Continue compression bandaging or graduated compression stockings after the procedure.
      4.1.4. You should elevate your operated limb and perform ankle/calf exercise to promote venous return.
      4.1.5. Avoid strenuous exercise within 2 weeks after the procedure.
   4.2. **Wound care**
      4.2.1. Keep wound dressing clean and dry. Change dressings till follow up or according to Doctor’s/Nurse’s instruction.
      4.2.2. Mild bruising may occur over the thigh and leg region. They will resolve gradually.
      4.2.3. Take the prescribed analgesic as needed.
      4.2.4. Stitches will be removed 7 to 10 days after the procedure.
   4.3. **Diet**
      4.3.1. Resumption of normal diet depends on the individual situation/progress.
4.3.2. In general, you can take a full balanced diet after the procedure unless you are on any special diet such as a diabetic or renal diet.

5. **Possible Risks and Complications**

5.1. **Systematic complications**
   - 5.1.1. Cardiovascular: myocardial infarction
   - 5.1.2. Pulmonary: pneumonia, respiratory failure
   - 5.1.3. Others: cerebrovascular accident

5.2. **Local complications**
   - 5.2.1. Wound haematoma and bruising
   - 5.2.2. Wound infection
   - 5.2.3. Deep vein thrombosis
   - 5.2.4. Neuritis resulting in paraesthesia
   - 5.2.5. Recurrence of varicosities

6. **Discharge Education**

6.1. Please contact your doctor or attend accident and emergency department for the following conditions:
   - 6.1.1. Severe or persistent wound pain
   - 6.1.2. Uncontrolled bleeding
   - 6.1.3. Fever (38°C or higher) and chills

6.2. Continue measures to prevent/reduce recurrence of varicose veins
   - 6.2.1. Avoid prolonged standing or sitting.
   - 6.2.2. Activate the calf muscle pump to promote venous return, e.g. ankle/calf exercise, walking.
   - 6.2.3. Elevate the leg on a stool during the day, raise the leg above the heart level in bed.
   - 6.2.4. Weight reduction if indicated.
   - 6.2.5. Put on graduated compression stockings during daytime (below knee compression stockings: 20-30 mmHg at ankle.

6.3. Attend the follow-up visit in your doctor clinic

7. **Remark**

7.1. The above mentioned procedural information is not exhaustive, other unforeseen complications may occur in special patient groups or different individual. Please contact your physician for further enquiry.

8. **Reference**

I, ______________________ acknowledged that the above information concerning the operation or procedure has been explained by Dr ____________________. I have also been given the opportunity to ask questions and received adequate explanations concerning the condition and treatment plan.

Name: __________________________
Pt No.: __________________________
Case No.: _________________________
Sex/Age: __________________________
Unit Bed No.: ______________________
Case Reg. Date & Time: ______________

Patient Signature: ____________________
Patient Name: _______________________
Date: ______________________________