

	<b>Clinical Protocol:</b> Varicose Veins	
	<b>ORIGINAL EFFECTIVE DATE:</b> 05/22/2019	<b>REVIEWED/REVISED DATE(S):</b> 06/18/2019 08/13/2021
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## PROTOCOL OVERVIEW

This Clinical Protocol advises on guidelines, indications, and referral for evaluation of Varicose Veins.

## INDICATIONS

- Plastic surgery referral for evaluation or management of nonhealing venous ulcer and skin graft needed.
- Hematology referral in the setting of
  - Pulmonary embolism with unclear etiology
  - Recurrent superficial thrombophlebitis
- Infectious disease referral for
  - Ruling out an infectious condition that may mimic signs and symptoms of varicose veins or venous insufficiency
  - Superficial suppurative thrombophlebitis
- Vascular surgery referral for evaluation or management of:
  - Conservative therapy requiring fitting and use of graded compression stockings
  - Bleeding varicosity or large varices associated with skin ulcer
  - Interpretation of diagnostic testing needed (e.g., duplex US)
  - Large varices with associated skin ulcer(s)
  - Lower Limb skin changes indicative of venous insufficiency
  - Persistent or recurrent venous stasis ulcer or skin changes suggesting chronic venous insufficiency
  - Superficial thrombophlebitis that fails to improve with treatment
  - Saphenous venous insufficiency that has failed medical treatment, valve incompetence documented by duplex US, symptoms causing clinically significant functional impairment.

## RECOMMENDED RECORDS

Please submit history and physical or progress notes that show the symptoms, exam findings, and any pertinent diagnostic tests that may have been done. (i.e. venous ultrasound)

## CITATION

MCG, Ambulatory Care, “Varicose Veins and Venous Insufficiency – Referral Management”, 24<sup>rd</sup> Edition, 6/24/2020