## Venogram

### A. Interpreter / cultural needs

- **An Interpreter Service is required?** Yes □ No □
- **A Cultural Support Person is required?** Yes □ No □
- **If Yes, is a Cultural Support Person present?** Yes □ No □

### B. Procedure

The following will be performed (Doctor/doctor delegate to document – include site and/or side where relevant to the procedure)

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A venogram is a procedure where x-rays and iodinated ‘Contrast’ are used to examine veins. This procedure may require the injection of a local anaesthetic.

### C. Risks of the procedure

In recommending a Venogram, the doctor believes the benefits to you from having this procedure exceed the risks involved.

The risks and complications with this procedure can include but are not limited to the following.

#### Common risks and complications include:
- Pain or discomfort at the puncture site. This may require medication.
- Bleeding or bruising may occur. This is usually stopped by applying further pressure and/or ice to the puncture site. This is more common if you take Aspirin, Warfarin, Clopidogrel (Plavix and Iscover) or Dipyridamole (Persantin and Asasantin).
- Failure of local anaesthetic which may require a further injection of anaesthetic or a different method of anaesthesia may be used.
- Nerve damage, is usually temporary, and should get better over a period of time. Permanent nerve damage is rare.

#### Less common risks and complications include:
- Infection, requiring antibiotics and further treatment.
- Damage to surrounding structures such as blood vessels, organs and muscles, requiring further treatment.
- A blood clot at the puncture site may form, disrupting the blood flow from the legs, arms or head. This may require treatment with medications.

#### Rare Risks and complications include:
- An allergy to injected drugs, requiring further treatment.
- The procedure may not be possible due to medical and/or technical reasons.

- An increased lifetime cancer risk due to the exposure to x-rays.
- Skin burns or damage from exposure to x-rays.
- Seizures and/or cardiac arrest due to local
- Death as a result of this procedure is very rare.
D. Risks of Iodinated Contrast for patients with renal impairment

Specific Risks of Iodinated Contrast to patient’s identified as having Renal Impairment.

- Giving the Contrast to people with weakened kidneys (renal impairment), can cause further kidney damage, which may in turn cause the kidneys to stop working properly (acute renal failure).

E. Patient consent

I acknowledge that the doctor/doctor delegate has explained the proposed procedure.

I understand;

- the risks and complications, including the risks that are specific to me.
- the sedation/anaesthetic required for this procedure. I understand the risks, including the risks that are specific to me.
- if immediate life-threatening events happen during the procedure, they will be treated based on my discussions with the doctor/doctor delegate or my Acute Resuscitation Plan.
- a doctor/doctor delegate undergoing further training may conduct this procedure.

I have been given the following Patient Information Sheet/s:

- [ ] Venogram
- [ ] Iodinated Contrast

F. Doctor/delegate Statement

I have explained to the patient all the above points under:

- [ ] the Patient Consent section (E)
- [ ] Iodinated Contrast - Patients with Renal Impairment Section (D) (for renal impaired patients only)

and I am of the opinion that the patient/substitute decision-maker has understood the information.

Name of Doctor/delegate: ____________________________
Designation: ____________________________
Signature: ____________________________ Date: ____________________________

G. Interpreter’s statement

I have given a sight translation in

(state the patient’s language here) of the consent form and assisted in the provision of any verbal and written information given to the patient/parent or guardian/substitute decision-maker by the doctor.

Name of Interpreter: ____________________________
Signature: ____________________________ Date: ____________________________
1. What is a Venogram?
A venogram is a procedure where x-rays and Iodinated ‘Contrast’ (once called x-ray dye) are used to examine veins.
For more information on Iodinated Contrast and the risks involved in its use, please read the Iodinated Contrast Patient Information Sheet. (If you do not have this information sheet please ask for one).

2. Will there be any discomfort, is any anaesthetic needed?
This procedure may require an injection of local anaesthetic. It is used to prevent or relieve pain, but will not put you to sleep.

3. Preparation for the procedure
The medical imaging department will give you instructions on how to prepare for your procedure.
- Please tell the staff if you are or suspect you might be pregnant or are breastfeeding.
- If you take Aspirin, Warfarin, Clopidogrel (Plavix and Iscover) or Dipyridamole (Persantin and Asasantin) or any other drug that is used to thin your blood ask your doctor/health practitioner if you should stop taking it before the procedure as it may affect your blood clotting.

4. During the procedure
The Radiologist (x-ray doctor) may inject local anaesthetic into the skin before a small tube is inserted into a vein.
The vein used is determined by the area to be studied. For example if you are having the veins in your leg studied you will have the tube (cannula) placed into a vein in your foot. If you are having a vein in your abdomen or chest studied you will have the tube (catheter) placed into the large vein in the groin.
X-ray pictures are taken while the Contrast is injected into your veins.
Once all the x-ray pictures have been taken, the tube will be removed. Firm pressure will be applied to the puncture site. This allows the vein to seal over so you will not bleed.

5. After the procedure
The recovery time after the procedure may be up to 2 hours.
If a vein in your groin was used you may have to rest in bed for a while. Moving too soon after a venogram may cause bleeding at the puncture site.

6. What are the risks of this specific procedure?
The risks and complications with this procedure can include but are not limited to the following.

Common risks and complications include:
- Pain or discomfort at the puncture site. This may require medication.
- Bleeding or bruising may occur. This is usually stopped by applying further pressure and/or ice to the puncture site. This is more common if you take Aspirin, Warfarin, Clopidogrel (Plavix and Iscover) or Dipyridamole (Persantin and Asasantin).
- Failure of local anaesthetic which may require a further injection of anaesthetic or a different method of anaesthesia may be used.
- Nerve damage, is usually temporary, and should get better over a period of time. Permanent nerve damage is rare.

Less common risks and complications include:
- Infection, requiring antibiotics and further treatment.
- A blood clot at the puncture site may form, disrupting the blood flow from the legs, arms or head. This may require treatment with medications.
- Damage to surrounding structures such as blood vessels, organs and muscles, requiring further treatment.
- An allergy to injected drugs, requiring further treatment.
- The procedure may not be possible due to medical and/or technical reasons.

Rare Risks and complications include:
- An increased lifetime cancer risk due to the exposure to x-rays.
- Skin burns or damage from exposure to x-rays.
- Seizures and/or cardiac arrest due to local anaesthetic toxicity.
- Death as a result of this procedure is very rare.

7. What are the safety issues when you leave the hospital?
Go to your nearest Emergency Department or GP if you become unwell or have;
- pain unrelieved by simple pain killers
- swelling in the limb closest to the puncture site
- continuous bleeding or swelling at the puncture site
- redness or inflammation at the puncture site
- a fever
- other warning signs the doctor may have asked you to be aware of.
1. What is Iodinated Contrast?
The medical imaging procedure your doctor has asked you to have uses Iodinated ‘Contrast’ (once called X-ray dye). Contrast is a colourless liquid which includes iodine. Contrast is injected into your bloodstream to allow your organs to be seen more clearly on x-rays. Contrast is not a dye. It does not stain the inside of your body. Your doctor needs to use Contrast to be able to get all the information needed to assist with your diagnosis.

This information sheet must be read together with the information sheet of the procedure you are booked for (if you do not have this information sheet please ask for one).

2. During the procedure
When the Contrast is injected you may feel:
- A very warm or ‘flushed’ feeling over your body, this may also make you think you have passed urine. You will not pass urine – it is only a feeling.
- A ‘metallic’ taste or smell may also happen. This usually lasts less than a minute.

3. After the procedure
It is recommended that you drink 2 to 4 glasses of water after your procedure to help flush the Contrast from your body.
Contrast does not affect your ability to carry out normal activities; you should be able to continue with your day as normal.

4. Precautions
Contrast is not suitable for some people; you will be asked a series of questions before it is given to you. Your answers allow staff to identify any risk factors that you may have.
- Please tell the staff if you are or suspect you might be pregnant or are breastfeeding.

Kidney function
- Contrast is removed from your blood by your kidneys through your urine. It is easily removed from the body of people who have normal kidney function.
- Giving Contrast to people with weakened kidneys (renal impairment), can cause further kidney damage, which may in turn cause the kidneys to stop working properly (acute renal failure).
- You may be asked to have a simple blood test to find out the level of their kidney function.

Diabetic Drug interactions - Metformin
(Other Drug names: Avandamet, Diabex, Diaformin, Formet, Glucohexal, Glucomet, Glucophage, Glucovance, Metforbell)

If kidneys suffer damage from the Contrast then the kidneys may not be able to remove Metformin from the body. It is safer to briefly stop taking Metformin when having Contrast. Staff will inform you when to stop and when it is safe to take Metformin again.

Contact your GP to monitor your diabetes if you are told to stop your Metformin.

5. What are the risks of Iodinated Contrast?
The risks and complications with this injection can include but are not limited to the following.
Common risks and complications include:
- No known common risks.

Less common risks and complications include:
- Injected Contrast may leak outside of the blood vessel, under the skin and into the tissue. This may require treatment. In very rare cases, further surgery could be required if the skin breaks down.
- Acute Renal Failure occurs when one or both of your kidneys suddenly stop working. Failure can last for days or weeks. It may take the kidneys a long time to regain their previous level of function and you may require dialysis to filter your blood during this time. There is a risk your kidneys could be permanently damaged. To reduce this risk the smallest possible dose of Contrast will be given.
- The injection may not be possible due to medical and/or technical reasons.

Rare risks and complications include:
- Allergic reactions occur within the first hour with most happening in the first 5 minutes. Late reactions have been known to occur up to a week after the injection.

Note: Allergy to topical iodine and/or seafood does not imply an allergy to Iodinated Contrast.
The reactions vary from:
Mild – hives, sweating, sneezing, coughing, nausea.
Moderate – wide spread hives, headaches, facial swelling, vomiting, shortness of breath.
Severe – Severe reactions are rare but include: life-threatening heart palpitations, very low blood pressure, throat swelling, fits and/or cardiac arrest.
- Death as a result of Iodinated Contrast is very rare.

6. What are the safety issues when you leave the hospital?
Go to your nearest Emergency Department or GP if you become unwell.