

## Microphlebectomy/Ambulatory Phlebectomy Post Care Instructions

1. Take Tylenol, Aleve, or Advil as needed for soreness.
2. **Wear the stockings for the next two days continuously both day and night.** You may sponge bathe. If you should wet the stockings you should remove the stockings and bandages and inform Dr. Douglass.
3. No heavy lifting over 40 pounds for the next week.
4. There may be some small amount of oozing at the sites of the microphlebectomy. **Any purulent drainage, heavy or persistent bleeding, swelling or fever should be reported to Dr. Douglass. Although extremely rare after this procedure, you should call Dr. Douglass while seeking immediate medical attention if you develop symptoms of marked leg swelling, chest pain and or sudden shortness of breath.**
5. The bandages are removed on the second day. The stocking is however, put back on and kept for a total of seven days but should only be worn during the day at this point and not at night. Walking is encouraged for 30 minutes daily (after bandages have been removed) as this will aid in wound healing.
6. If you have steri strips, they should be left in place for up to a week. You may shower with the steri strips and pat them dry with a towel. They can be removed after one week.
7. After one week begin to apply a small amount of **MEDERMA anti scar cream** once or twice daily to the puncture sites until they disappear.
8. When you are seated for any length of time elevating the leg will help reduce swelling and aid in wound healing.
9. It is normal to feel some lumps around the treated area. Small pea and marble sized lumps are normal. These will gradually disappear with the rest of your treatment.
10. **If you should have any questions or concerns after hours you may reach Dr. Douglass at his home (865) 470-2654 or cell (865) 300-7061. During regular business hours you should call the office (865) 686-0507 Monday through Thursday from 8:00 am-6:00 pm. We are closed most Fridays and some Mondays as well as holidays.**

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Patient name

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Date

\_\_\_\_\_  
Patient Signature

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Staff initials