

**TO THE PATIENT:** You have the right, as a patient, to be informed about your condition and the recommended surgical, medical, or diagnostic procedure to be used so that you may make the decision whether or not to undergo the procedure after knowing the risks and hazards involved. This disclosure is not meant to scare or alarm you; it is simply an effort to make you better informed so you may give or withhold your consent to the procedure.

I (we) voluntarily request Dr. \_\_\_\_\_ as my physician, and such associates as he/she may deem necessary (for example anesthesia providers, educational assistants, and other health care providers who are identified and their professional role explained to me) to treat my condition. My condition has been explained to me as:

\_\_\_\_\_

\_\_\_\_\_

I (we) understand that the following surgical, medical, and/or diagnostic procedures are planned for me and I (we) voluntarily consent and authorize these procedure(s):

\_\_\_\_\_

\_\_\_\_\_

I (we) understand that my physician may discover other or different conditions which require additional procedures than those planned. I (we) authorize my physician, and any associates, technical assistants and other health care providers to perform such other procedures which are advisable in their professional judgment.

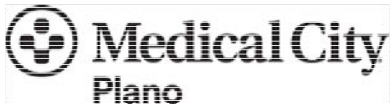
I (we) understand that these qualified medical practitioners may be performing significant tasks related to the surgery such as opening or closing incisions, harvesting or dissecting tissue, altering tissue, implanting devices, tissue removal or photography during procedures.

Initial  
I (we) **Do**  **Do Not**  consent to the use of blood and blood products as considered necessary. *Benefits, risks, alternatives and the risks and benefits of alternatives have been discussed and I (we) have been given the opportunity to ask questions.*

Initial  
**Texas Medical Disclosure**  
**HEMATIC AND LYMPHATIC SYSTEM**

**1. Transfusion of blood and blood components.**

1. Fever.
2. Transfusion reaction which may include kidney failure or anemia.
3. Heart failure.
4. Hepatitis.
5. AIDS (Acquired Immune Deficiency Syndrome).
6. Other infections.



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**DISCLOSURE AND CONSENT: UNIVERSAL PROCEDURE(S)  
BLOOD/ BLOOD PRODUCT ADMINISTRATION**



\* T R E A T \*

Initial

Just as there may be risks and hazards in continuing my present condition without treatment, there are also risks and hazards related to the performance of the surgical, medical, and/or diagnostic procedures planned for me, such as the potential for infection, blood clots in veins and lungs, hemorrhage, allergic reactions and even death. I (we) also realize that the following specific risks and hazards may occur in connection with this particular procedure(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I (we) **Do**  **Do Not**  consent to have students watch my procedure with my doctor for medical education, with the exception of: \_\_\_\_\_

I (we) **Do**  **Do Not**  consent to have one or more manufacturer's technical representatives, as requested by my physician, in the room during the procedure. I understand that one or more representatives from the equipment and/or supply company for the products that the physician will use during my procedure, may be present for the procedure but will not perform any portion of the procedure. I further understand that all manufacturer's technical representatives present have confidentiality agreements and that none of my personal health information will be disclosed to anyone other than my care givers within this hospital.

I (we) **Do**  **Do Not**  consent to my physician taking photographs during my procedure as long as my name or identity is not shown to anyone.

I (we) consent to the disposal by hospital authorities of any tissue or parts which may be removed.

I (we) have been given the opportunity to ask questions about my current condition(s), the proposed procedure(s), the benefits, the likelihood of success, the possible problems related to recovery, the possible risks of nontreatment of my condition, and other alternative forms of treatment, and the risks and benefits of alternatives involved. I (we) understand that no warranty or guarantee has been made to me as to result or cure. Any professional/business relationship between my health care providers, the hospital and educational institutions has been explained to me.

I (we) certify this form has been fully explained to me, that I (we) have read it or have had it read to me (us), that the blank spaces have been filled in, and that I (we) understand its contents. I (we) believe that I (we) have sufficient information to give this informed consent and I (we) request the procedure(s) to be done.

Initials

\_\_\_\_\_  
Patient's Signature Date Time

\_\_\_\_\_  
Other Legally Responsible Person's Signature Relationship Date Time

Medical City Plano, 3901 West 15th Street, Plano, Texas 75075

Other: \_\_\_\_\_

Witness Work Address

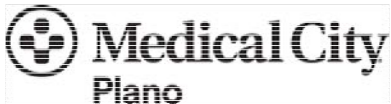
\_\_\_\_\_  
Witness Signature/Title/Position Date Time

Reason: \_\_\_\_\_

\_\_\_\_\_  
Interpreter

I have provided the patient/parent/guardian with information on risks, benefits, and alternatives to treatment as outlined in the above within my area of expertise.

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Physician Signature: **X** \_\_\_\_\_ Physician Identifier



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\* T R E A T \*

## ANESTHESIA CONSENT

**TO THE PATIENT:** You have the right, as a patient, to be informed about your condition and the recommended anesthesia/analgesia to be used so that you may make the decision whether or not to receive the anesthesia/analgesia after knowing the risks and hazards involved. This disclosure is not meant to scare or alarm you; it is simply an effort to make you better informed so that you may give or withhold your consent to the anesthesia/analgesia.

I voluntarily request that anesthesia and/or perioperative pain management care (analgesia) as indicated below be administered to me (the patient). I understand it will be administered by an anesthesia provider and/or the operating practitioner, and such other health care providers as necessary. Perioperative means the period shortly before, during and shortly after the procedure.

I (we) understand that anesthesia involves additional risks and hazards, but I (we) request the use of anesthetics/analgesia for the relief and protection from pain or anxiety during the planned and additional procedures. I (we) realize the type of anesthesia/analgesia may have to be changed possibly without explanation to me (us).

I understand that serious, but rare, complications can occur with all anesthetic/analgesic methods. Some of these risks are breathing and heart problems, drug reactions, nerve damage, cardiac arrest, brain damage, paralysis, or death.

I also understand that other complications may occur. Those complications include but are not limited to:

*Have the patient/other legally responsible person initial the planned anesthesia/analgesia method(s).*

Initial  
**General Anesthesia** - Injury to Vocal Cords, Teeth, Lips, Eyes; Awareness during the procedure;  
Memory Dysfunction/Memory Loss; Permanent Organ Damage; Brain Damage.

Initial  
**Regional Block Anesthesia/Analgesia** - Nerve Damage; Persistent Pain; Bleeding/Hematoma; Infection;  
Medical necessity to convert to general anesthesia; Brain Damage.

Initial  
**Spinal Anesthesia/Analgesia** - Nerve Damage; Persistent Back Pain; Headache; Infection;  
Bleeding/Epidural Hematoma; Chronic Pain; Medical necessity to convert to general anesthesia; Brain Damage.

Initial  
**Epidural Anesthesia/Analgesia** - Nerve Damage; Persistent Back Pain; Headache; Infection; Bleeding/Epidural  
Hematoma; Chronic Pain; Medical necessity to convert to general anesthesia; Brain Damage.

Initial  
**Deep Sedation** - Memory Dysfunction/Memory Loss; Medical necessity to convert to general anesthesia;  
Permanent Organ Damage; Brain Damage.

Initial  
**Moderate Sedation** - Memory Dysfunction/Memory Loss; Medical necessity to convert to general anesthesia;  
Permanent Organ Damage; Brain Damage.

Additional comments/risks:

Initial  
**Prenatal/Early Childhood Anesthesia-** Potential long-term negative effects on memory, behavior, and learning with prolonged or repeated exposure to general anesthesia/moderate sedation/deep sedation during pregnancy and in early childhood.



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### DISCLOSURE AND CONSENT: ANESTHESIA and/or PERIOPERATIVE PAIN MANAGEMENT





# LIST A TEXAS MEDICAL DISCLOSURE

(EFFECTIVE: JANUARY 1, 2012,  
AMENDED: APRIL 1, 2012)

Procedures requiring full disclosure (List A). The following treatments and procedures require full disclosure by the physician or health care provider to the patient or person authorized to consent for the patient.

## Patient to initial appropriate square.

### CARDIOVASCULAR SYSTEM

#### 1. Cardiac.

##### A. Surgical.

1. Coronary artery bypass, valve replacement, ventricular assisted device.
  - a. Acute myocardial infarction.
  - b. Hemorrhage.
  - c. Kidney failure.
  - d. Stroke.
  - e. Sudden death.
  - f. Infection of chest wall/chest cavity.
  - g. Valve related delayed onset infection.
2. Heart transplant.
  - a. Infection.
  - b. Rejection.
  - c. Death.

##### B. Non-Surgical--Coronary angioplasty, coronary stent insertion, pacemaker insertion, AICD insertion, and cardioversion.

1. All associated risks as listed under paragraph (2)(B) of this subsection.
  - Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
  - Hemorrhage (severe bleeding).
  - Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
  - Worsening of the condition for which the procedure is being done.
  - Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
  - Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
  - Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
  - Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
  - Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
2. Acute myocardial infarction (heart attack).
3. Rupture of myocardium (hole in wall of heart).
4. Life threatening arrhythmias (irregular heart rhythm).

5. Need for emergency open heart surgery.
6. Sudden death.
7. Device related delayed onset infection (infection related to the device that happens sometime after surgery).

#### C. Diagnostic.

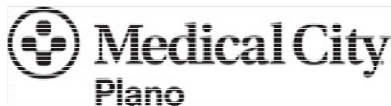
##### 1. Procedures utilizing fluoroscopy guided interventions.

The procedure may require a Substantial Radiation Dose Level. If you receive a substantial dose the proceduralist will notify you with follow up instructions post procedure.

- A. Skin injury (such as epilation (hair loss), burns, or ulcers).
- B. Cataracts (for procedures in the region of the head).
2. Cardiac catheterization.
  - A. All associated risks as listed under paragraph (2)(B) of this subsection.
    - Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
    - Hemorrhage (severe bleeding).
    - Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
    - Worsening of the condition for which the procedure is being done.
    - Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
    - Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
    - Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
  - B. Acute myocardial infarction (heart attack).
  - C. Contrast nephropathy (injury to kidney function due to use of contrast material during procedure).
  - D. Heart arrhythmias (irregular heart rhythm), possibly life threatening.
  - E. Need for emergency open heart surgery.
3. Electrophysiologic studies.
  - A. Cardiac perforation.
  - B. Life threatening arrhythmias.
  - C. Injury to vessels that may require immediate surgical intervention.
3. Stress testing--Acute myocardial infarction.
4. Transeosophageal echocardiography--Esophageal perforation.

#### 2. Vascular.

- A. Open surgical repair of aortic, subclavian and iliac, artery aneurysms or occlusions, and renal artery bypass.
  - a. Hemorrhage.
  - b. Paraplegia.
  - c. Kidney damage.
  - d. Stroke.
  - e. Acute myocardial infarction.
  - d. Infection of graft.



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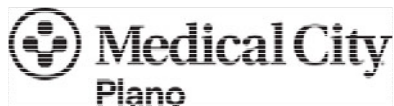
### DISCLOSURE AND CONSENT: CARDIOVASCULAR SYSTEM



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- B. Angiography (inclusive of aortography, arteriography, venography) - Injection of contrast material into blood vessels.
- Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
  - Hemorrhage (severe bleeding).
  - Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
  - Worsening of the condition for which the procedure is being done.
  - Stroke and/or seizure (for procedure involving blood vessels supplying the spine, arms, neck or head).
  - Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
  - Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
  - Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
  - Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
- C. Angioplasty (intravascular dilation technique).
- All associated risks as listed under paragraph (2)(B) of this subsection.
    - Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
    - Hemorrhage (severe bleeding).
    - Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
    - Worsening of the condition for which the procedure is being done.
    - Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
    - Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
    - Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
    - Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
    - Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
  - Acute myocardial infarction (heart attack).
  - Contrast nephropathy (injury to kidney function due to use of contrast material during procedure).
  - Heart arrhythmias (irregular heart rhythm), possibly life threatening.
  - Need for emergency open heart surgery.
- Failure of procedure or injury to blood vessel requiring stent (small, permanent tube placed in blood vessel to keep it open) placement or open surgery.
- D. Endovascular stenting (placement of permanent tube into blood vessel to open it) of any portion of the aorta, iliac or carotid artery or other (peripheral) arteries or veins.
- All associated risks as listed under paragraph (2)(B) of this subsection.
    - Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
    - Hemorrhage (severe bleeding).
    - Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
    - Worsening of the condition for which the procedure is being done.
    - Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
    - Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
    - Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
    - Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
    - Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
  - Change in procedure to open surgical procedure.
  - Failure to place stent/endoluminal graft (stent with fabric covering it).
  - Stent migration stent moves from location in which it was placed).
  - Vessel occlusion (blocking).
  - Impotence (difficulty with or inability to obtain penile erection) (for abdominal aorta and iliac artery procedures).
- E. Vascular thrombolysis (removal or dissolving of blood clots) - percutaneous (mechanical or chemical).
- All associated risks as listed under paragraph (2)(B) of this subsection.
    - Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
    - Hemorrhage (severe bleeding).
    - Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
    - Worsening of the condition for which the procedure is being done.
    - Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
    - Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
    - Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
    - Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
    - Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.



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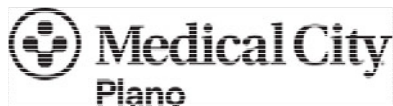
**DISCLOSURE AND CONSENT:  
CARDIOVASCULAR SYSTEM**



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2. Increased risk of bleeding at or away from site of treatment (when using medications to dissolve clots).
  3. For arterial procedures: distal embolus (fragments of blood clot may travel and block other blood vessels with possible injury to the supplied tissue).
  4. For venous procedures: pulmonary embolus (fragments of blood clot may travel to the blood vessels in the lungs and cause breathing problems or if severe could be life threatening).
  5. Kidney injury or failure which may be temporary or permanent (for procedures using certain mechanical thrombectomy devices).
  6. Need for emergency surgery.
- F. Angiography with occlusion techniques (including embolization and sclerosis) - therapeutic.
1. For all embolizations.
    - A. Angiography risks (inclusive of aortography, arteriography, venography) - injection of contrast material into blood vessels.
      - a. Unintended injury or occlusion (blocking) of blood vessel which may require immediate surgery or other intervention.
      - b. Hemorrhage (severe bleeding).
      - c. Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
      - d. Worsening of the condition for which the procedure is being done.
      - e. Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
      - f. Unintended thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
    - B. Loss or injury to body parts with potential need for surgery, including death of overlying skin for sclerotherapy/treatment of superficial lesions/vessles and nerve injury with associated pain, numbness or tingling or paralysis (inability to move).
    - C. Infection in the form of abscess (infected fluid collection) or septicemia (infection of blood stream).
    - D. Nontarget embolization (blocking of blood vessels other than those intended) which can result in injury to tissues supplied by those vessels).
  2. For procedure involving the thoracic aorta and/or vessels supplying the brain, spinal cord, head, neck or arms, these risks in addition to those under clause (1.) of this subparagraph:
    - A. Stroke.
    - B. Seizure.
    - C. Paralysis (inability to move).
    - D. Inflammation or other injury of nerves.
    - E. For studies of the blood vessels of the brain: contrast-related, temporary blindness or memory loss.
  3. For female pelvic arterial embolizations including uterine fibroid embolization, these risk in addition to those under clause (1.) of this subparagraph.
    - A. Premature menopause with resulting sterility.
    - B. Injury to or infection involving the uterus which might necessitate hysterectomy (removal of the uterus) with resulting sterility.
    - C. After fibroid embolization: expulsion/delayed expulsion of fibroid tissue possibly requiring a procedure to deliver/remove the tissue.
  4. For male pelvic arterial embolizations, in addition to the risks under clause (1.) of this subparagraph: impotence (difficulty with or inability to obtain penile erection).
  5. For embolizations of pulmonary arteriovenous fistula/malformations, these risks in addition to those under clause (1.) of this subparagraph:
    - A. New or worsening pulmonary hypertension (high blood pressure in the lung blood vessels).
    - B. Paradoxical embolizations (passage of air or an occluding divide beyond the fistula/malformation and into the arterial circulation) causing blockage of blood flow to tissues served (for example the blood vessels supplying the heart (which could cause chest pain and/or heart attack) or brain (which could cause stroke, paralysis (inability to move) or other neurological injury)).
  6. For varicocele embolization, these risks in addition to those under clause (1.) of this subparagraph.
    - A. Phlebitis/inflammation of veins draining the testicles leading to decreased size and possibly decreased function or affected testis and sterility (if both sides performed).
    - B. Nerve injury (thigh numbness or tingling).
  7. For ovarian vein embolization/pelvic congestion syndrome embolization: general angiography and embolization risks as listed in clause (1.) of this subparagraph.
  8. For cases utilizing ethanol (alcohol injection, in addition to the risks under clause (1.) of this subparagraph: shock or severe lowering of blood pressure.)
  9. For varicose vein treatments (with angiography) see subparagraph (L) of this paragraph.
- G. Mesenteric angiography with infusional therapy (Vasopressin) for gastrointestinal bleeding.
1. All associated risks as listed under paragraph (2)(B) of this subsection.
    - Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
    - Hemorrhage (severe bleeding).
    - Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
    - Worsening of the condition for which the procedure is being done.
    - Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).



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- Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
- Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
- Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
- Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.

2. Ischemia/infarction of supplied or distant vascular beds (reduction in blood flow causing lack of oxygen with injury or death of tissues supplied by the treated vessel or tissues supplied by blood vessels away from the treated site including heart, brain, bowel, extremities).

3. Antidiuretic hormone side effects of vasopressin (reduced urine output with disturbance of fluid balance in the body, rarely leading to swelling of the brain).

H. Inferior vena caval filter insertion and removal.

1. All associated risks as listed under paragraph (2)(B) of this subsection.

- Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
  - Hemorrhage (severe bleeding).
  - Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
  - Worsening of the condition for which the procedure is being done.
  - Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
  - Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
  - Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
  - Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
  - Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
2. Injury to the inferior vena cava (main vein in the abdomen).
3. Filter migration or fracture (filter could break and/or move from where it was placed).
4. Caval thrombosis (clotting of the main vein in the abdomen and episodes of swelling of legs).
5. Risk of recurrent pulmonary embolus (continued risk of blood clots going to blood vessels in the lungs despite filter).
6. Inability to remove filter (for "optional"/retrievable filters).

I. Pulmonary angiography.

1. All associated risks as listed under paragraph (2)(B) of this subsection.

- Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
  - Hemorrhage (severe bleeding).
  - Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
  - Worsening of the condition for which the procedure is being done.
  - Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
  - Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
  - Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
  - Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
  - Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
2. Cardiac arrhythmia (irregular heart rhythm) or cardiac arrest (heart stops beating).
3. Cardiac injury/perforation (heart injury).
4. Death.

J. Percutaneous treatment of pseudoaneurysm (percutaneous thrombin injection versus compression).

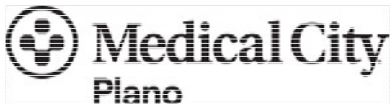
1. Thrombosis (clotting) of supplying vessel or branches in its territory.
2. Allergic reaction to thrombin (agent used for direct injection).

K. Vascular access - nontunneled catheters, tunneled catheters, implanted access.

1. Pneumothorax (collapsed lung).
2. Injury to blood vessel.
3. Hemothorax/hemomediastinum (bleeding into the chest around the lungs or around the heart).
4. Air embolism (passage of air into blood vessel and possibly to the heart and/or blood vessels entering the lungs).
5. Vessel thrombosis (clotting of blood vessel).

L. Varicose vein treatment (percutaneous via laser, RFA, chemical or other method) without angiography.

1. Burns.
2. Deep vein thrombosis (blood clots in deep veins).
3. Hyperpigmentation (darkening of skin).
4. Skin wound (ulcer).
5. Telangiectatic matting (appearance of tiny blood vessels in treated area).
6. Paresthesia and dysesthesia (numbness or tingling in the area or limb treated).
7. Injury to blood vessel requiring additional procedure to treat.



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