

Birmingham Vascular Centre

Varicose veins service - referral proforma

Patient Demographics		
Date of referral	NHS number	
Forename	Surname	
Address	Date of birth	
	Telephone number	
Clinical indication for referral	Please circle	
Healed venous ulcer	Left leg	Right leg
Lipodermatosclerosis or atrophie blanche	Left leg	Right leg
Pigmentation or eczema	Left leg	Right leg
Patient clinical details		
Body Mass Index		
Previous venous intervention left leg	No	Yes
Previous venous intervention right leg	No	Yes
Previous deep vein thrombosis	No	Yes
History of anaphylaxis	No	Yes
Medication history		
Anticoagulation	Nil	Warfarin DOAC
Known Drug Allergy	No	Yes
Exclusions	Guidance	
Bleeding varicose veins	Refer to on call vascular service call 0121 424 2000	
Active venous leg ulcer	Refer to venous leg ulcer service	
Telangiectasies or reticular veins	Treatment not currently offered	
Visible varicose veins	Treatment not currently offered	
Lower limb oedema/ swelling	Refer to community lymphoedema service	