

## Vein Patient Questionnaire

- Varicose veins? (Protruding, tortuous veins)
  - None
  - Few
  - Extensive
  
- Do your veins cause pain or disability?
  - None
  
  - Occasional, not restricting activity or requiring pain medication, can carry out usual activities without compressive therapy
  
  - Daily, limits activity, occasionally requires pain medication, can carry out usual activities only with compression and/or limb elevation
  
  - Daily, severely limits activities, requires pain medication regularly, unable to carry out usual activities even with compression and/or limb elevation
  
- Do you wear compression stockings?
  - No
  - Rarely
  - Most days
  - Always
  
- Ankle Swelling?
  - None
  - Evening only
  - Afternoon swelling above ankle
  - Morning swelling above ankle, requiring leg elevation and activity change
  
- Brown, purple, red purple skin discoloration?
  - None
  - Slight
  - Extensive
  
- Leg ulcer?
  - No
  - Healed
  - Active

- Previous Blood Clot in Leg Veins treated with blood thinners?
  - Yes
  - No
  
- Previous Vein Surgery?
  - None
  - Vein stripping
  - Vein Removal
  - Laser Vein surgery
  - Unsure
  
- Previous Sclerotherapy (Injections)?
  - Yes
  - No