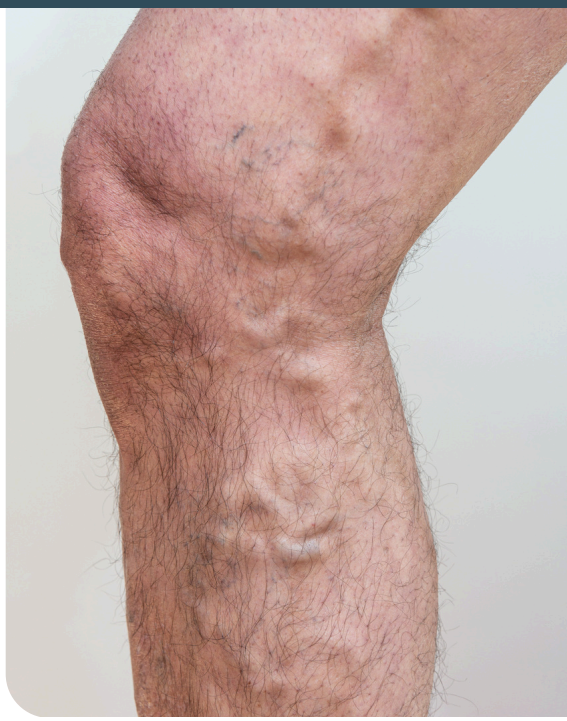
SKIN INSTITUTE

GP Referral Guide

Assessment and Referral of Patients with Venous Disease



Venous disease is common and may present across a spectrum from uncomplicated varicose veins to chronic venous insufficiency, recurrent thrombophlebitis and venous ulceration.

Early identification and appropriate intervention can improve symptoms, reduce complications and help prevent disease progression.

Skin Institute provides specialist assessment, duplex ultrasound evaluation and a range of minimally invasive treatment options through a coordinated care pathway.

Why Recommend Skin Institute?

Specialist-led assessment
Vascular surgeons, vein specialists and experienced sonographers

Comprehensive duplex ultrasound mapping
Identifying the source and extent of venous reflux

Coordinated care pathway
Consultation, investigation, treatment and follow-up

Minimally invasive treatment
Endovenous ablation, ultrasound-guided sclerotherapy and microsclerotherapy

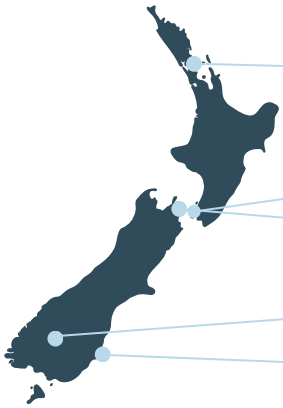
Partnering for better outcomes
Clear communication and ongoing collaboration with referring GPs

Learn more about our Vein Services

Vein Consultations & Ultrasound Mapping

GP Hub: Clinical Information for Referrers

Skin Institute Vein Clinics



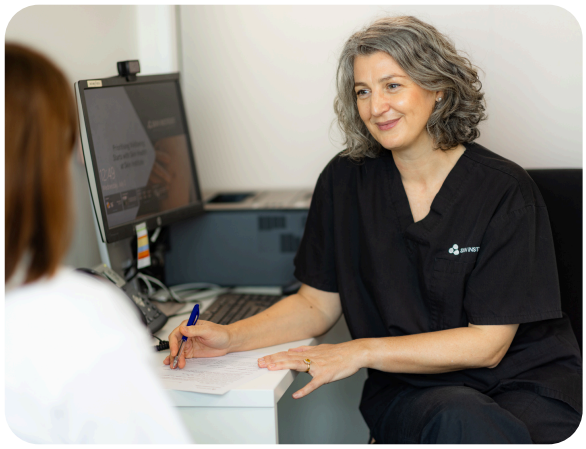
- Skin Institute Silverdale
- Skin Institute Albany
- Skin Institute NorthWest
- Skin Institute Remuera
- Skin Institute Wellington
- Skin Institute Richmond
- Skin Institute Queenstown
- Skin Institute Dunedin

Free Vein Assessment

We offer a Free Vein Assessment. During the appointment our experienced sonographers or vein doctors visually examine the patient's legs, discuss their symptoms and assess whether a full consultation with ultrasound mapping is required.

It does not include a consultation or ultrasound mapping, and there's no obligation to proceed with treatment.

Learn more about our Free Vein Assessments



When should you consider recommending a patient for a specialist vein assessment?

Specialist assessment should be considered when symptoms, clinical findings or complications suggest clinically significant venous reflux or when patients wish to explore treatment options.

Symptomatic Varicose Veins

- Aching, throbbing, tired, painful or heavy legs
- Itching associated with varicose veins
- Night cramps
- Swelling affecting daily activities

Signs

- Venous eczema
- Lower limb oedema
- Haemosiderin staining
- Lipodermatosclerosis
- Skin thickening of the lower leg and ankle
- Itchy skin over lower legs and ankle areas

Complications

- Active venous ulcers
- Superficial thrombophlebitis
- Bleeding varicose veins
- Recurrent varicose veins following treatment

Other reasons

- Diagnostic uncertainty
- Patients seeking treatment for symptomatic or cosmetic concerns

Skin Institute Assessment Pathway

Free Vein Assessment (where appropriate) or Specialist consultation for more immediate care > Duplex Ultrasound Mapping > Personalised treatment plan > Coordinated treatment & follow-up

Even if your patient is at high risk, there's plenty they can do to support their vein health. Awareness and early action can make all the difference!

Referral Pathway

NO FORMAL WRITTEN REFERRAL IS REQUIRED
We do not require a formal referral. However, if you would like to provide any information, please see the guidance below.

Helpful information to include in a referral, if desired

Patient details
□ Full name, date of birth and NHI number
□ Contact details and GP practice

Clinical concerns
□ Presenting symptoms and duration
□ Impact on daily activities or quality of life

Venous history
□ Previous venous procedures or treatment
□ History of DVT or superficial thrombophlebitis
□ Family history of venous disease or thrombotic disorders

Examination findings
□ Varicose vein distribution (unilateral/bilateral)
□ Oedema, skin changes, ulceration or thrombophlebitis

Investigations
□ Previous duplex or vascular imaging **(if available)**

No need to order scans prior to referral

Medical information
□ Significant comorbidities
□ Current anticoagulation or relevant medications
□ Allergies

Funding information
□ ACC, insurance or self-funding status
□ Prior approval reference (if applicable)

Quick Referral Checklist & Printable Guide

Consider recommending your patient to Skin Institute if they present with:

✓ Symptomatic varicose veins
✓ Leg aching or pain
✓ Leg swelling associated with venous disease
✓ Venous eczema or skin pigmentation changes
✓ Lipodermatosclerosis
✓ Superficial thrombophlebitis
✓ Bleeding varicose veins
✓ Active venous ulcers
✓ Recurrent varicose veins following treatment
✓ Uncertain diagnosis

Urgent Referral
Bleeding from varicose veins, rapidly progressing skin changes or non-healing venous ulceration.

Insurance
We are a preferred or affiliated provider for several insurance companies. Coverage varies by individual policy and appointment type. Patients should contact their insurer to confirm their level of cover.

Affiliated Provider Southern Cross Health Insurance
AIA HEALTHIER, LONGER, BETTER LIVES
nib First Choice Network

Skin Institute is committed to keeping referring GPs informed at every stage.
Our team is available to discuss patient progress or answer clinical queries at any time.

Treatment Options Available

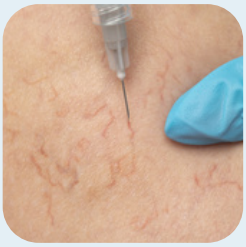
Treatment options are guided by clinical assessment, duplex ultrasound findings, symptom severity and patient preferences. Depending on the underlying venous disease, treatment options may include:

Ultrasound Guided Sclerotherapy (UGS)

A minimally invasive procedure using ultrasound to guide the injection of a sclerosant solution into affected veins. Suitable for truncal and deeper varicose veins. Performed as a walk-in, walk-out procedure with no general anaesthetic required.

Endovenous Ablation (EVA)

A thin catheter is inserted into the diseased vein under ultrasound guidance. Once in place, controlled heat (radiofrequency energy) is applied to the vein wall, causing it to collapse and seal shut.



Microsclerotherapy

Targeted injection treatment for superficial spider veins and reticular veins. Multiple sessions may be required depending on the extent of involvement. Ideal for cosmetic concerns and smaller vessel disease.

Compression Therapy

Medical-grade compression stockings can be used as a conservative measure or as an adjunct to procedural treatments. Supports venous return and reduces symptoms such as aching, swelling and heaviness.

Post-Procedure Care and Follow-Up

Aftercare Guidance

Most procedures are performed as day cases with minimal disruption. Patients are encouraged to mobilise early and wear compression stockings as directed (typically 2–3 weeks). Daily walking supports recovery and reduces complication risk.

Follow-Up Expectations

Follow-up is arranged according to clinical findings and treatment performed. Patients are typically reviewed at 2–6 weeks post-procedure. Findings and outcomes are communicated back to the referring GP throughout the care pathway.

When to Review or Escalate

Contact Skin Institute or advise the patient to seek review if any of the following occur:

- Increasing pain, redness or swelling beyond expected post-procedure discomfort
- Signs of infection at treatment sites (warmth, discharge, fever)
- Symptoms suggestive of deep vein thrombosis (calf pain, swelling, tenderness)
- Skin changes such as ulceration or significant discolouration
- Recurrence of varicose veins or new symptomatic veins
- Patient concerns about cosmetic outcome or ongoing symptoms