

# Do I Need a Test for CVI?

***Chronic Venous Insufficiency (CVI) is a serious circulatory problem in which the leg veins cannot pump enough blood back to your heart. It affects over 2.5 million Americans, most over the age of 40. Symptoms of CVI include varicose veins, skin problems, leg and ankle swelling, tight calves and legs that feel heavy, tired, restless or achy. Factors that can increase the risk of CVI include pregnancy, obesity, smoking, standing or sitting for long periods of time and not getting enough exercise. Answers to questions will determine if you are at risk for CVI and if a vascular exam will help us better assess your vascular health status.***

Name: \_\_\_\_\_

Date: \_\_\_\_\_

## Circle "Yes" or "No":

Test for  
Venous Disease

- |  |     |    |                          |
|--|-----|----|--------------------------|
| 1. Are your legs swollen, painful, red or warm to the touch?   | Yes | No | <input type="checkbox"/> |
| 2. Have you had a blood clot in a vein that caused inflammation, pain or irritation?   | Yes | No | <input type="checkbox"/> |
| 3. Do you have varicose veins (veins that are enlarged or swollen and raised above the surface of the skin) in the legs?                               | Yes | No | <input type="checkbox"/> |
| 4. Have you had a Deep Vein Thrombosis (DVT) in the past and are experiencing pain, swelling, changes in skin color, cellulites or non-healing ulcers? | Yes | No | <input type="checkbox"/> |
| 5. Do your legs feel heavy, tired, restless or achy?   | Yes | No | <input type="checkbox"/> |
| 6. If you push on your swollen foot, ankle or leg for 10 seconds and release, does your fingerprint leave a dimple?                                    | Yes | No | <input type="checkbox"/> |
| 7. If your feet, ankles and legs are swollen, does the skin look stretched or shiny?   | Yes | No | <input type="checkbox"/> |
| 8. Do you have an ulcer on the inside of your ankle?   | Yes | No | <input type="checkbox"/> |

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

Physician Signature: \_\_\_\_\_

Date: \_\_\_\_\_