

# Risk Assessment for Venous Thromboembolism(VTE) prophylaxis in adults (>18 years old)

Patient

Address

DOB

Neight =	Kg
CrCl =	mL/min
Platelet count	$= x10^{9}/I$

### Surgical or medical patients 1) Thrombosis Risk (tick if appropriate):

Significant reduced mobility for $\geq$ 3 days
Hip or knee replacement
Hip fracture
Total anaesthetic + surgical time >90 min
General surgery (including gastro-intestinal, urological, major gynaecological and thoracic surgery) within 7 days, OR patients who have had major cancer surgery in the abdomen or pelvis within 28 days.
Less than 6 weeks post-partum
Surgery involving pelvis or lower limb with a total anaesthetic + surgical time > 60 min
Surgery with significant reduction in mobility
Varicose veins with phlebitis

# 2) Contraindications to pharmacological prophylaxis (tick if appropriate):

Active bleeding	Neurosurgery, spinal surgery or eye surgery
Concurrent use of anticoagulants	Other procedure with high risk of bleeding
Acquired bleeding disorders (such as acute liver failure)	Bacterial endocarditis
Acute stroke (until 15 days post-stroke)	Terminal care or end of life pathway
Uncontrolled systolic hypertension ( $\geq$ 230/120 mmHg)	Untreated inherited bleeding disorders (eg haemophilia and von Willebrand's)
Thrombocytopaenia (platelets <75x10 <sup>9</sup> /L)	Known allergy to dalteparin or heparin

# 3) Other clinical information, including CT and other imaging results.

#### 4) Clinical decision (tick if appropriate) – dalteparin is the preferred agent in Powys.

One or more thrombosis risk factors identified – Thromboprophylaxis prescribed:

Medical prophylaxis

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

Surgical Prophylaxis

Prescribing guide (medical patients or at least 12h after high-risk surgery, CrCl $\geq$ 15mL/min):						
Contact pharmacist if CrCl<15m/min						
Actual body weight (Kg)	<50	50-100	101-150	>150		
Dalteparin dose (units)	2,500 OD	5,000 OD	5,000 BD	7,500 BD		

Low thrombosis risk **OR** bleeding risk(s) identified – No Thromboprophylaxis required

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

Date:

**5)** Follow-up tasks (FOR MINOR INJURIES UNITS ONLY). For all patients with a lower limb cast and any of the above risk factors for VTE and no contraindications should be prescribed dalteparin. Ensure:

	Tick:
Verbal consent obtained.	
Instructions given for dalteparin, as per health board risk assessment.	
Five-day supply provided.	
Sharps bin provided.	
Dalteparin pack with patient details on record sheet.	
Patient information leaflet provided.	
GP letter given to patient and copy sent to GP.	
Copy of risk assessment kept with notes.	