

PREVENTING VENOUS THROMBOEMBOLISM (VTE) PROPHYLAXIS

LET'S KEEP PATIENTS/CLIENTS/RESIDENTS SAFE: PRACTICE VTE PROPHYLAXIS (CLOT PREVENTION)

See your site/program policy, procedure or guideline

Note: Patient/Client/Resident used interchangeably



Prevent Patient/Client Harm

Practice VTE prophylaxis. This can reduce patient risk of a having a life threatening clot. Be alert to patients at risk of VTE.

VTE Prophylaxis - Your Role

Sites & programs have a VTE prophylaxis policy, procedure or guideline in place. Make sure you review these documents and know your roles & responsibilities around VTE risk and VTE prophylaxis.

Common Risk Factors for VTE may Include:

- Diabetic
- Smoker
- Overweight
- Recent surgery
- Hospitalization for illness
- Major orthopedic surgery
- Immobile/sit long periods
- Serious injury especially to arm or leg
- Takes estrogen (birth control or hormone replacement)
- History of stroke or heart attack
- 60 years of age or older

Common Strategies & Interventions

- Perform initial VTE risk assessments on admission
- Order appropriate VTE Prophylaxis
- Reassess patient risk regularly e.g. care transitions or change in their health condition
- Individualize prophylaxis based best practice
- Manage ortho-surgery patients' post discharge prophylaxis

Common Risk Factors for VTE may Include:

- Document the patient's risk & prophylaxis orders
- Communicate to other staff about patient's risk
- Provide the patient/ family & team members with information on VTE risk & prevention
- Communicate patient's VTE risk & prophylaxis status as part of information transfer at care transition

Evaluation

Sites/programs regularly evaluate their VTE prophylaxis strategy, make needed improvements, & keep staff members informed of changes.

Need more information?

Contact your coordinator /supervisor/manager or quality safety lead.