

## Appendix 14 – Venous Thromboembolism Risk Assessment for Emergency Department

(To be completed for all patients immobilised in a lower limb plaster cast/back slab)

Patient's name: \_\_\_\_\_

Unit Number: \_\_\_\_\_

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

D.O.B: \_\_\_\_\_

Patients Details	
Age ≥60 years	1
Overweight BMI ≥ 30	2
Unable to walk before accident / injury	3
Current Medications	
Oral Contraceptive Pills	1
Hormone replacement Therapy (HRT)	1
Family History of DVT in family (brother, sister, father, mother)	3
Medical History	
Varicose veins	1
IHD(MI) /CVA in last 6 months / Resp disease/ Bowel disease/ long term medical disease requiring treatment	2
Abdominal surgery in last 6 weeks	3
Active cancer	3
Previous H/O of DVT	3
Previous H/O of PE	3
Pregnant or within 6 weeks of Childbirth	3
Complex lower limb surgery or Pelvic fracture in last 6 weeks	3
Known Thrombophilia needs discussing with haematologist	3
<b>Total Score:</b>	□
Name / Signature of the Clinician filling this form:	
Score	Recommendations
0-2	Mobilisations as able
3 or more	Enoxaparin 40mg daily S/C until end of full immobilization of lower limb in cast then reviewed on individual basis depending on the mobility.

**Any relative contraindications to LMWH**

Haemophilia/other haemorrhagic disorder	Yes
Thrombocytopenia or previous Heparin induced Thrombocytopenia	Yes
Recent cerebral haemorrhage or severe hypertension	Yes
Active peptic ulcer/recent gastrointestinal bleeding	Yes
Recent major trauma/surgery to eye or nervous system	Yes
Hypersensitivity to any form of heparin	Yes
Known estimated GFR <30ml/min	Yes
Risk deemed to outweigh benefits by clinician	Yes

If Yes to any of above



D/W Haematologist for further Prophylaxis options

## Check List to do if THROMBOPROPHYLAXIS IS ADVISED in the Emergency Department

Obtain baseline eGFR and/or platelet count for all patients with suspected or known renal impairment and/or thrombocytopenia	Yes
Any patient with baseline moderate or worse renal impairment (eGFR <50ml/min) to be dose adjusted as per BNF/pharmacist guidance	Yes
Prophylactic dose subcutaneous LMWH once daily prescribed until the date of Rigid Immobilization (POP/ BACK SLAB)	Yes
Patients educated regarding s/c injection technique OR district nurse referral for on-going injections	Yes
Safety net in place re: bleeding complications	Yes
Written guidance to patient regarding signs of <b>Heparin Induced Thrombocytopenia/Coagulopathy.</b>	Yes

Thromboprophylaxis in ambulatory trauma patients requiring temporary limb immobilisation - (Flowchart) (Oct 2012) Revised version published 2 Sept 2013