

Risk Assessment & Venous Thromboemolism (VTE) Prophylaxis Recommendations

Low Risk		
No reduction in mobility compared to usual state		
		RECOMMENDATION:
Have reduced mobility but an expected length of stay of		
2 days or less, and no risk factors (see Risk Factor Table)		
Same day surgery patients *		Early Ambulation
Surgical procedure with a total anesthetic and surgical		
time of less than 60 minutes, and no risk factors (see Risk		
Factor Table)		
Moderate / High Risk		
Have had or are expected to have significantly reduced		RECOMMENDATION:
mobility for 3 days or more.		Unfractionated Heparin 5000unit
Are expected to have ongoing reduced mobility		subcut BID, OR Dalteparin 5000unit
(compared to their usual state) AND have 1 or more risk factors (see Risk Factor Table)		subcut daily
Surgical procedure with a total anesthetic and surgical		<u>'</u>
time of 60 minutes or longer; or less than 60 minutes		In situations where it is unsafe to receive anticoagulation thromboprophylaxi, consider Mechanical Prophylaxis – Antiembolic Stocking (AES)
with one or more risk factors (see Risk Factor Table)		
Mechanical ventilation		
High Risk Surgical or non-surgical trauma patients including those		RECOMMENDATION:
with spinal cord injury/paralysis		Dalteparin 5000unit subcut daily, OR
		Rivoroxaban 10mg po daily (approved
Major surgery (orthopaedic, abdominal, cancer removal)		post knee and hip replacement)
Congenital and/or acquired coagulation disorder		In situations where it is unsafe to receive anticoagulation thromboprophylaxi, consider Mechanical Prophylaxis – Antiembolic Stocking (AES)
Risk Factors		
Age over 60 years	One or more	significant medical conditions
Dehydration	Sepsis or	severe acute infection
Previous VTE	/TE + Heart disease (CHF, MI, etc)	
First-degree relative with a history of VTE Respiratory pathology		ry pathology
Obesity (body mass index over 30 kg	sity (body mass index over 30 kg/m2) • Inflammatory condition (eg. IBD, Crohn's, Coli	
Jse of hormone replacement therapy • Rheumatological disease		ological disease
Use of estrogen-containing contraceptive Nephrotic syndrome		c syndrome
tnerapy		•
·		philic disease (ex. antiphospholipid
syndrome)		,
ICU admission • Cancer with or without active treatmen Trauma (algusts to High Bigly) • Mulanreliferative disorders (algusts to		
Trauma (elevate to High Risk)	rauma (elevate to High Risk) • Myloproliferative disorders (elevate to High Risk)	